

**REVIEW OF PROBATIONARY PSYCHIATRIC MENTAL HEALTH NURSE PRACTITIONER'S FURNISHING ABILITY BY FURNISHING SUPERVISOR**

As the assigned Furnishing Supervisor for this Probationary Psychiatric Mental Health Nurse Practitioner (PMHNP), I have observed and directly supervised his/her work during this portion of the probationary period.

Based upon my supervision during the period of \_\_\_\_\_ to \_\_\_\_\_, I believe that this probationary PMHNP has demonstrated a sufficient mastery of diagnostic skills, clinical furnishing recommendations, and knowledge of furnishing procedures to be able to furnish medication to Los Angeles County Department of Mental Health (LACDMH) clients with an acceptable level of safety and effectiveness within LACDMH programs.

Or:

As the assigned PMHNP Furnishing Supervisor for this Probationary PMHNP, I have observed and directly supervised his/her work during this portion of the probationary period.

Based upon my supervision during the period of \_\_\_\_\_ to \_\_\_\_\_, I do not believe that this Probationary PMHNP has demonstrated a sufficient mastery of diagnostic skills, clinical furnishing recommendations, and knowledge of furnishing procedures to be able to furnish medication to LACDMH clients with an acceptable level of safety and effectiveness within LACDMH programs.

The basis for this belief is (Check all that applies):

1.  Unacceptably limited knowledge of psychiatric medications
2.  Unacceptably limited diagnostic ability.
3.  Unacceptably limited interview and assessment skills
4.  Unacceptably limited judgment
5.  Other

Explain:

Signature of Furnishing Supervisor: \_\_\_\_\_ Date: \_\_\_\_\_

Signature of Regional Medical Director: \_\_\_\_\_ Date: \_\_\_\_\_

Reviewed by PMHNP: \_\_\_\_\_ Date: \_\_\_\_\_