Action Plan

An action plan is required when a student's performance causes concern.

Practice assessor must liaise with the academic assessor.

The **SMART** principles should be used to construct the action plan.

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| **Placement Name:** |  | | | **Date Action Plan Initiated:** | |  |
| **Nature of Concern**  **Refer to Professional Value(s). Proficiency and/or Episode of Care** (**S**pecific) | | **What Does the Student Need to Demonstrate?**  *Objectives and measures of success*  (**M**easurable, **A**chievable and **R**ealistic) | | **Support Available and Who Is Responsible** | | **Date for Review**  (**T**imed) |
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|  | |  | |  | |  |
| **Student's Name:**  **Practice Assessor's Name:**  **Academic Assessor's Name:** | | | **Signature:**  **Signature:**  **Signature:** | | **Date:**  **Date:**  **Date:** | |
| **Review/Feedback** | | | | | | |
| **Have the objectives been achieved? YES/NO**  **Comments:**  **Practice Assessor Name: Signature: Date:** | | | | | | |