One-on-One Template

# Name: Date:

|  |  |
| --- | --- |
| What I need to do this year (goals):  | Status & commentary |
| * Eg RECEPTION: Work to become more confident in sharing information about portal functions with patients
* Eg: NURSE: Complete IV certification training and get signed off by end of year.
 | http://fcc-intra.fb.co.nz/images/header_logo.gif |

# Agenda:

|  |  |
| --- | --- |
| Achievement against last month’s objectives/priorities:  | Status & action |
|  |  |
| Agreed objectives/priorities for next month:  | Action  |
|  |  |
| Reminders, concerns, red flags |
|  |
| Career & development planning |
|  |

**Form completed by:**