

Bubble Task

What would you like to focus on this week?

Action Plan

How are you going to do it?

Action 1

What?
By Who?
By When?

Action 2

What?
By Who?
By When?

Action 3

What?
By Who?
By When?

Barriers

What might stop you?

Barriers

-
-
-

Solutions

-
-

Date Achieved

.....
.....



Action plan –

Name Date of Birth..... NHS number.....

My action plan this week is to:

Day	Action (What?, Where?, When?)	Completed
Monday		
Tuesday		
Wednesday		
Thursday		
Friday		
Saturday		
Sunday		