**Discipline-Specific Interprofessional Team Plan**

**This form *must* be completed by every student in advance of the symposium. Bring completed form with you on that day.**

**See instructions at the bottom of this page.**

|  |  |  |
| --- | --- | --- |
| **Team: \_\_ (letter) Service Provider: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**  **Discipline: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_** | | |
| **1) Strengths or resources** | | **2) Problems** |
| **3) Goal(s) for prioritized problems:** | | |
| **4) Solutions:** | **5) Action Plan:** | |
| **6.) Follow up needed:** | | |

**Instructions for filling out form:**

From your discipline’s perspective:

1. What are the 2 to 3 top strengths for this client and the top 2 resources?
2. What are the top 3 problems for this client?
3. Write one or two goal(s) that your discipline would identify or suggest for this client.
4. What potential solutions/services could you provide for this goal to solve the problems?
5. What actions would you implement toward solving the problem or meeting the goals?
6. Recommend a follow-up plan. For example, evaluation of solution, communicating plan to family, reconvening of the team, etc.