

# 7 Minute Briefing Action Plan



Title of 7 Minute briefing

Type here

Name of organisation

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Team Manager

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Name of section and team

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Contact Details

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Identify the learning or recommendations that are relevant to your team and your team's discussion on those points

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Please ensure that you keep a copy of this discussion and plan for your records

## 7 Minute Briefing Action Plan



What actions have been agreed to improve practice?

What needs to happen?	Who will do it?	By When?	How will you know when this has been done?	How will you know if it has worked?
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Please ensure that you keep a copy of this discussion and plan for your records