

# Post-Encounter Action Grid

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**Date:**

**Patient Name:**

**Clinic:**

**Provider Name:**

<b>Goal</b> <i>What is action contributing to?</i>	<b>Action</b> <i>What needs to be completed?</i>	<b>Who</b> <i>Who is responsible for completing action?</i>	<b>When</b> <i>What is the timeline that the action needs to be completed?</i>	<b>Contingency</b> <i>If there is an issue or barrier, what are next steps?</i>