



PERSONAL PRACTICE REFLECTIONS (PBIL) IMPACT ON MY PRACTICE

(to be completed immediately after reviewing the module)

Name: _____

Date: _____
day / month / year

Name of Module: _____

The most useful information for me was:

This highlighted the following gap in my current practice:

Please fill in one or more of the practice change options below:

A. I <u>will change</u> my current practice in the following way: -	The barrier(s) that I am anticipating include the following:
B. I am <u>considering</u> making the following changes to my current practice: -	What would enable me to change my current practice?
C. These current practice(s) were confirmed: -	What supports my current practice?
D. I am <u>not convinced</u> there is a need to change my current practice because:	

I will review this statement of impact on my practice in:

1 month 3 months 6 months n/a

Please keep a copy of the reflection and review for your records. Complete the first practice reflection and set a date for several months later to review. Immediately following completion of your review, either (1) return the original practice reflection 1 and review 2 to the Foundation office in the envelope provided or **(2) fax to (905) 540-4988** to the attention of the Practice Based Individual Learning Program.

The information from this PRT (log sheet) will be handled in a confidential manner and used only in summarized form for research purposes and to improve the Practice Based Learning Programs. For more details on the privacy policy, please visit: www.fmpe.org

PERSONAL PRACTICE REFLECTIONS (PBIL)
IMPACT ON MY PRACTICE– Review Session
(to be completed immediately after reviewing the module - several months later)

Name: _____

Date: _____
day / month / year

Name of Module: _____

Please fill in all of the practice change options that apply:

<p>A. I <u>made</u> the following planned change(s) in my practice:</p> <p style="text-align: right;">—</p>	<p>What assisted me in making these practice changes:</p>
<p>B. I was <u>unable</u> to make the following planned changes:</p> <p style="text-align: right;">—</p>	<p>What prevented me from making these changes:</p>
<p>C. I <u>made</u> the following practice change(s) that I did <u>not anticipate</u> initially:</p>	
<p>D. I now plan to make the following changes to my practice:</p>	

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