

FOLLOW-UP ACTION PLANNING (FORM 5.1)

N	BEHAVIOUR	YES/NO/ PARTIALLY	OBSTRUCTING FACTORS	FACILITATING FACTORS	POSSIBLE SOLUTIONS
1					
2					
3					
4					
5					
6					

N	BEHAVIOUR	YES/NO/ PARTIALLY	OBSTRUCTING FACTORS	FACILITATING FACTORS	POSSIBLE SOLUTIONS
7					
8					
9					
10					

NAME _____

SURNAME _____

DATE _____