Action Planning Tool

**Colorado Multi-Tiered System of Supports**

Office of Learning Supports

 April 2024, Version 1

**Team Members Present:**

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| **Planning date** | **Precise Problem Statement** | **Root Cause/Contributing Factors** | **Goal (Outcome/Target)** | **Review Date(s)** |
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| **Fidelity data to be collected****(How will we know we implemented our plan as intended?)** |  |
| **Who will collect the data?** |  |
| **When will the data be collected?** |  |

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| **Outcome data to be collected****(How will we know we implemented our plan as intended?)** |  |
| **Who will collect the data?** |  |
| **When will the data be collected?** |  |

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| **Action Step** | **Person(s) Responsible** | **Resource(s) Needed** | **Target Date** | **Date Completed** |
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