



# TEAM MEETINGS PLANNING FORM

This document is intended to help the physician establish and maintain a quality improvement team within their clinic. Please contact your Practice Facilitator if you would like support with this form or with facilitating team meetings.

**Physician(s) Name:**

**1. Identify your team:**

**2. Set a consistent meeting time.**

Establish a regular meeting date and time during the workday that the team meetings are occurring. *(Tip: Meeting first thing in the morning results in fewer distractions. When possible, the meeting should occur during the workday and away from the clinic area to minimize interruptions.)*

**Indicate how often and when will meetings take place:**

**3. List the roles that will be assigned to team members during a meeting.**

**4. Establish ground rules.**

To form a supportive and respectful environment for your team meeting, establish ground rules from the beginning. Create your own set of ground rules to create buy-in on team-meetings and strengthen teamwork.

**Please list your ground rules:**

**5. Set a consistent meeting agenda.**

**List the standing items that will be part of your agenda template:**

**6. Indicate how you and your team will ensure that action items are followed through.**

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Physician Name

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Physician Signature

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Date