 **Six Month Review Form**.

**Name:**

**Date:**

1. **Tell me about your experiences as a QIP member over the last 6 months?**
2. **What have you done about your personal development since the last review and feedback?**
3. **Where do you feel you have impacted change for the better and for whom?**
4. **Is the QIP meeting your expectations and why?**
5. **What further development do you feel you need that we can support you with, within the role?**
6. **Do you still wish to commit to being a QIP member, if no, what has made you change your mind?**

**Notes:**