**SDL Tool Review Checklist**

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| --- | --- | --- | --- |
| **Criteria for Review** | **Staff****Yes/No** | **QAC****Yes/No** | **Comments** |
| Did the action plan support achieving the goal? |  |  |  |
| Last YearGoal 1 | Was the goal related to dietetic practice? |  |  |  |
| Was the goal achieved? |  |  |  |
| If the goal was not achieved, was a suitable replacement goal set? |  |  |  |
| Last YearGoal 2 | Was the goal related to dietetic practice? |  |  |  |
| Was the goal achieved? |  |  |  |
| If the goal was not achieved, was a suitable replacement goal set? |  |  |  |
| If Last Year LG 1 and/or 2 were not achieved, is this a longstanding pattern?  |  |  |  |
| LG1 | Was the goal related to Dietetic Practice? |  |  |  |
| Does the goal impact/improve either knowledge or quality of practice? |  |  |  |
| Is the goal: **S**pecific |  |  |  |
| **M**easurable |  |  |  |
| **A**chievable |  |  |  |
| In a **R**ealistic **T**imeframe |  |  |  |
|  | Does the action plan support the Learning Goal? |  |  |  |
| LG2 | Was the goal related to Dietetic Practice? |  |  |  |
| Does the goal impact/improve either knowledge or quality of practice? |  |  |  |
| Is the goal: **S**pecific |  |  |  |
| **M**easurable |  |  |  |
| **A**chievable |  |  |  |
| In a **R**ealistic **T**imeframe |  |  |  |
|  | Does the action plan support the Learning Goal? |  |  |  |