**Professional Practice**

The Partnership has raised concerns regarding your professional conduct as outlined by the EWC’s Code of Professional Conduct and Practice. This plan will support and guide you to address these concerns.

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| **Name** | **Mentor** | **School** | **Tutor** | **Network Lead Mentor** | **Date** |
|  |  |  |  |  |  |

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| **Has the AT already been on any support programme previously?** Yes / No **If Yes, please give details** |
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**Nature of concern. Please indicate as appropriate in one or more of the following areas**

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| **1 Personal and Professional Responsibility (role modelling, appropriate relationships including communication with learners and social media, non-discrimination, safeguarding, boundaries)** |
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| **2 Professional Integrity (accountability, attendance, punctuality, honesty, confidentiality, conduct in and out of workplace)** |
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| **3 Collaborative Working (professional working relationships with all stakeholders)** |
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| **4,5 Professional Learning, Knowledge and Understanding (compliance with policies, responding to feedback, evaluating practice, updating skills)** |
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| **Targets Set** |
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| **Description and evaluation of support given** |
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| **AT’s reflections and next steps** |
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**2 week review**

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| **Overall progress against the targets (mentor summary)** |
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| **AT’s reflections** |
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A review will take place after a maximum of 2 weeks. Failure to address concerns will result in further action by the Course Director and Network Lead Mentor.

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| **Recommended steps following the Support Action Plan (please delete as appropriate)** |
| **The AT continues with the School Experience / The school placement is withdrawn** |
| **Course Director: Network Lead Mentor:** |