**Silent Conversation**

Number ID \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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| **Box 1:**  **Write one problem of practice that you would like to brainstorm with colleagues. Write this challenge in the form of a question.** | **Box 2:**  **Respond to the question, offering support and at least one valid suggestion.** |
| **Box 3:**  **Respond to the original question, your thoughts on the suggestion in Box 2, and at least one more suggestion.** | **Box 4:**  **Respond to the original question, your thoughts on the suggestion in Boxes 2 and 3, and at least one more suggestion.** |
| **Box 5: First, write your reaction to the suggestions. Secondly, create a 3-5 step plan of action to resolve the problem of practice.** | |