**Action Plan**

**Farm: Date:**

|  |  |  |
| --- | --- | --- |
| **Action** | **Timescale** | **Person Responsible** |
| *e.g. Improve hoof shape: Implement preventive hoof inspections of all cows at dry off and 60-80DIM* | *ASAP* | *Huw* |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |