

**Illinois Association of School Nurses**

**Approved Provider Unit**

**GAP ANALYSIS WORKSHEET**

***Instructions:*** Type directly into blank cells of the tables. Save the completed form to your computer.

|  |  |
| --- | --- |
| **Educational Activity Title:** |  |

**Professional Practice Gap(s)**

| **current state** | **desired state** | **IDENTIFIED GAP** | **type of gap** | **Learning outcome(s)** |
| --- | --- | --- | --- | --- |
| Describe the current state of practice including the problem, if known. | Describe the desired state that the educational activity is designed to promote. | Difference in current state and desired state. | Check which type of gap has been identified. | List learning outcome(s) in behavioral term using a single measurable verb for each. Learning outcomes should fit into one of Miller’s zones2: |
|  |  |  | ☐ Knowledge  ☐ Skills  ☐ Practice |  |
|  |  |  | ☐ Knowledge  ☐ Skills  ☐ Practice |  |