**Young Person – My Lived Experience**

**All about me**

|  |  |  |  |
| --- | --- | --- | --- |
| **My Name Is** |  | | |
| **I was born on** |  | **My Age** |  |

**This is me (what do I want people know)**

**My Family/Friendships – Who are they, what are they like and how do we get on?**

**Education Information**

|  |  |  |  |
| --- | --- | --- | --- |
| **My School** | |  | |
|  | **Teacher who knows me well is?** | |  |
| **What I would like you to know about school and how I am doing?** | | | |
|  | | | |

**Interesting information about me?**

If I were to describe myself I would say that I am?

I have lots of interests and enjoy activities including?

I am not so keen on?

I am particularly good at?

Things are struggle with and may need some help with?

I can sometimes be afraid of and get upset by?

If I am upset/afraid I find these things help me calm down or feel ok?

Where do I see myself in 6 months, 1 year and 5 years’ time?

Anything else that is important to know about me?

**Aim’s for the Future (Target)**

**One thing I would like to personally achieve during the time I am being supported by the CATCH Team?**

**One thing I would like my family to achieve that would have a positive impact on me/us?**

**What is the most helpful thing professionals could do for me or my family?**

**Young Person’s Exploration**

**What areas of family life am I finding difficult and struggling with?**

**What areas of family life I am happy, content and confident in and feel I am doing well with?**

**What change/s do I think will have the most positive impact on my family?**

**What is stopping me (us) making these changes?**

**What my Day Looks Like?**

**What is my routine? What do I do from when I wake up until I go to bed?**

**Weekdays Weekends**

**AM**

**PM**

**What parts of my routines are easy?**

**What parts of my routines are difficult?**

**Anything that needs to change?**

**Doodle my Thoughts**