|  |  |  |
| --- | --- | --- |
| **What are we worried about?** | **What’s working well?** | **What needs to Happen?** |
| Past HarmFuture DangerComplicating Factors | Existing StrengthsExisting Safety | Safety GoalsNext Steps |
| **Child’s Voice** |
|  |  |  |
| On a scale of 0 to 10 …. **0**  **10** |

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