**Reason for Assessment**

Summary of what is working well and what you are worried about – start from the centre column to reinforce the positives

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| **What are you worried/concerned about?** | **What is working well/strengths?** | **What will well-being look like? (What outcomes do you want for the child/yp?)** |
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| **Worry Statement** *
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 | **Well-being Goal (s)***
*
*
*
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| Scaling - ***On a scale of 0 to 10 - where10 means that everything that needs to happen for the child in order for them to have wellbeing is happening and no additional support is needed.*** ***0 means that the TAF are worried there is nothing in place to improve well-being and reduce the worries.******Where would you rate the situation right now? What could be put in place to increase the score?***  |
| **0** | **1** | **2** | **3** | **4** | **5** | **6** | **7** | **8** | **9** | **10** |
|  |  |  |  |  |  |  |  |  |  |  |

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| **What are the child/young person’s view?** |
|  |
| **What are the parent/carer’s views?** |
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