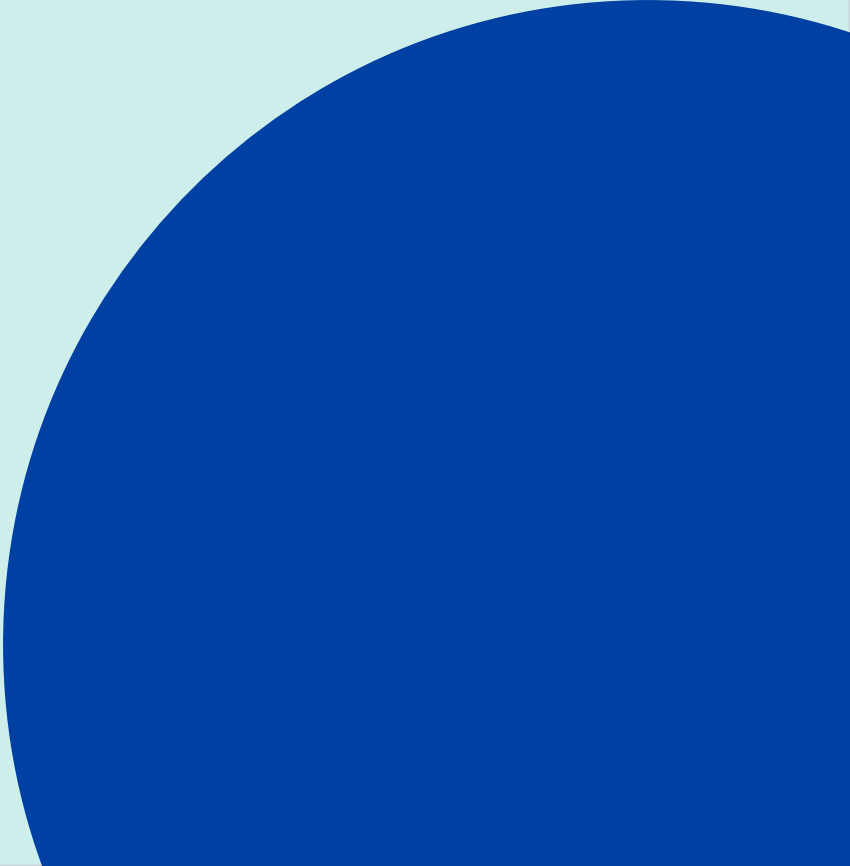
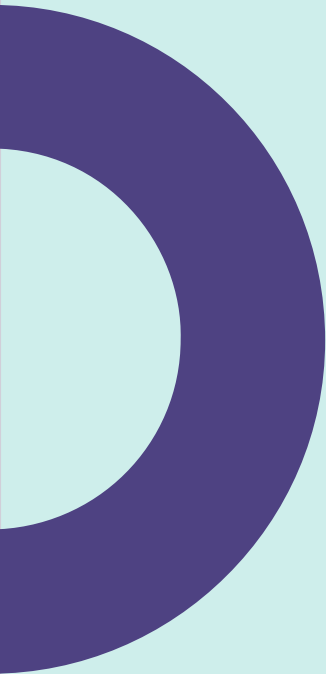


Child's name

's plan



Written consent given Date _____

Information about me

All shared information must be:

- Necessary
- Relevant
- Proportionate

Name

Home address

Current address (if different)



Name

Contact details

Workplace

Relationship to the child

Name

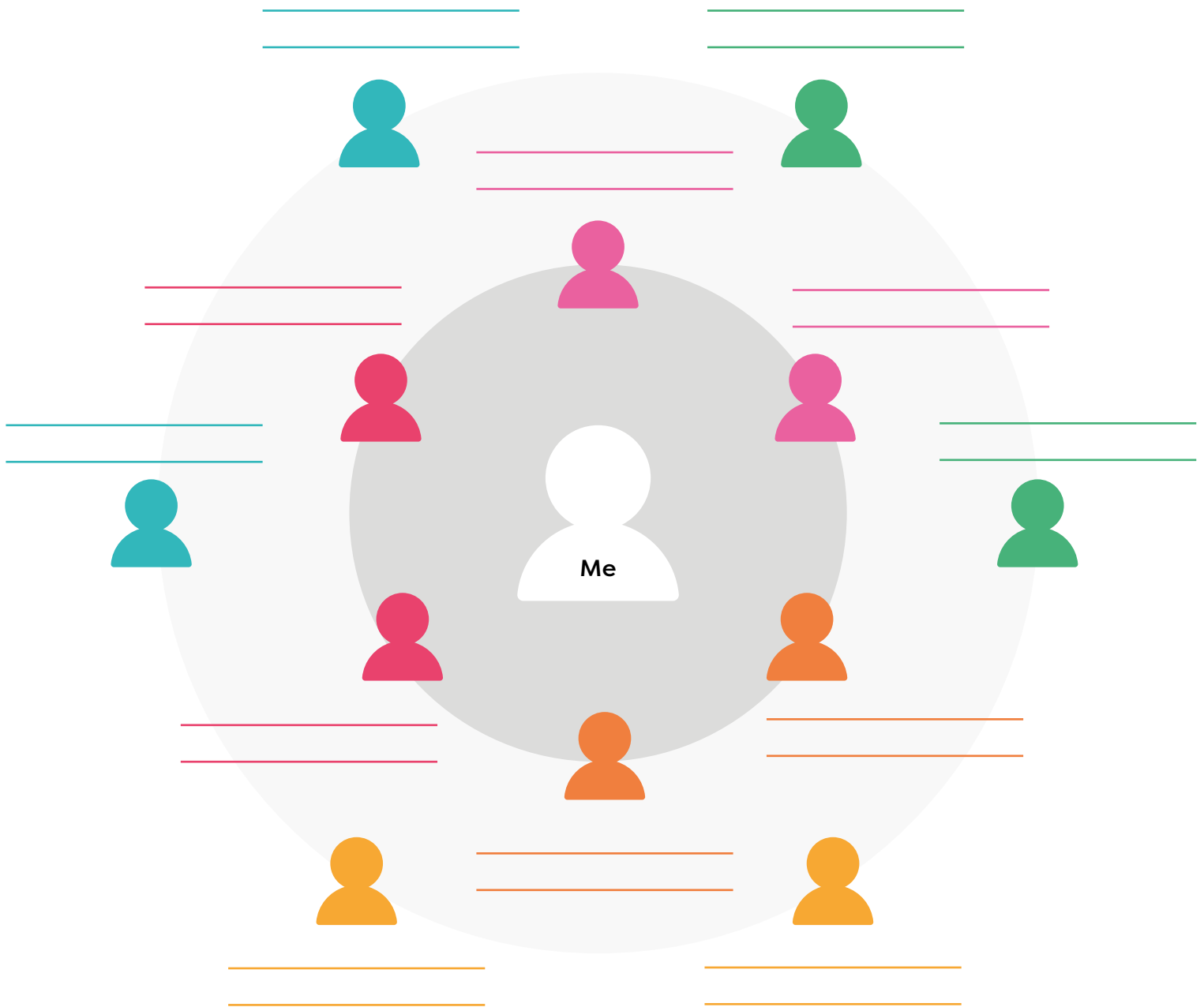
Contact details

Workplace

Relationship to the child

Who is there for me. Who is closest to me.

Fill in name and relationship to you.



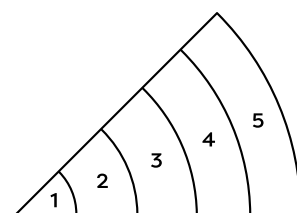
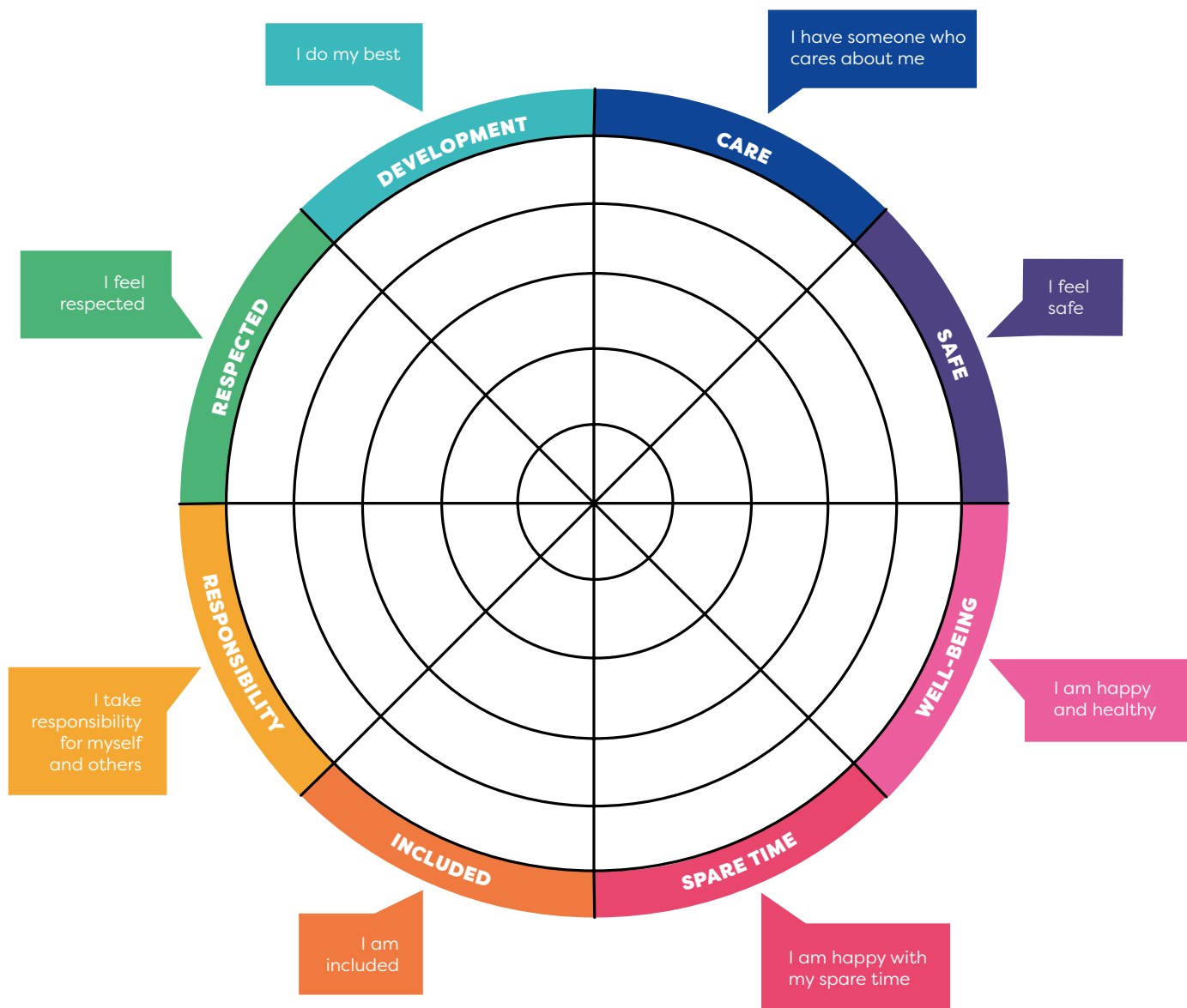
My goals are to...

To be filled in by the Child Contact during the Discussion

My assessment

My needs and my situation

To be filled in based on the discussion points after individual support with a Child Team has been granted



Statements

1 = Not at all accurate
5 = Very accurate

My description of my needs and my situation

| | |
|---|--|
| I have someone who cares about me | |
| I feel safe | |
| I am happy and healthy | |
| I am happy with my spare time | |
| I am included | |
| I take responsibility for myself and others | |
| I feel respected | |
| I do my best | |

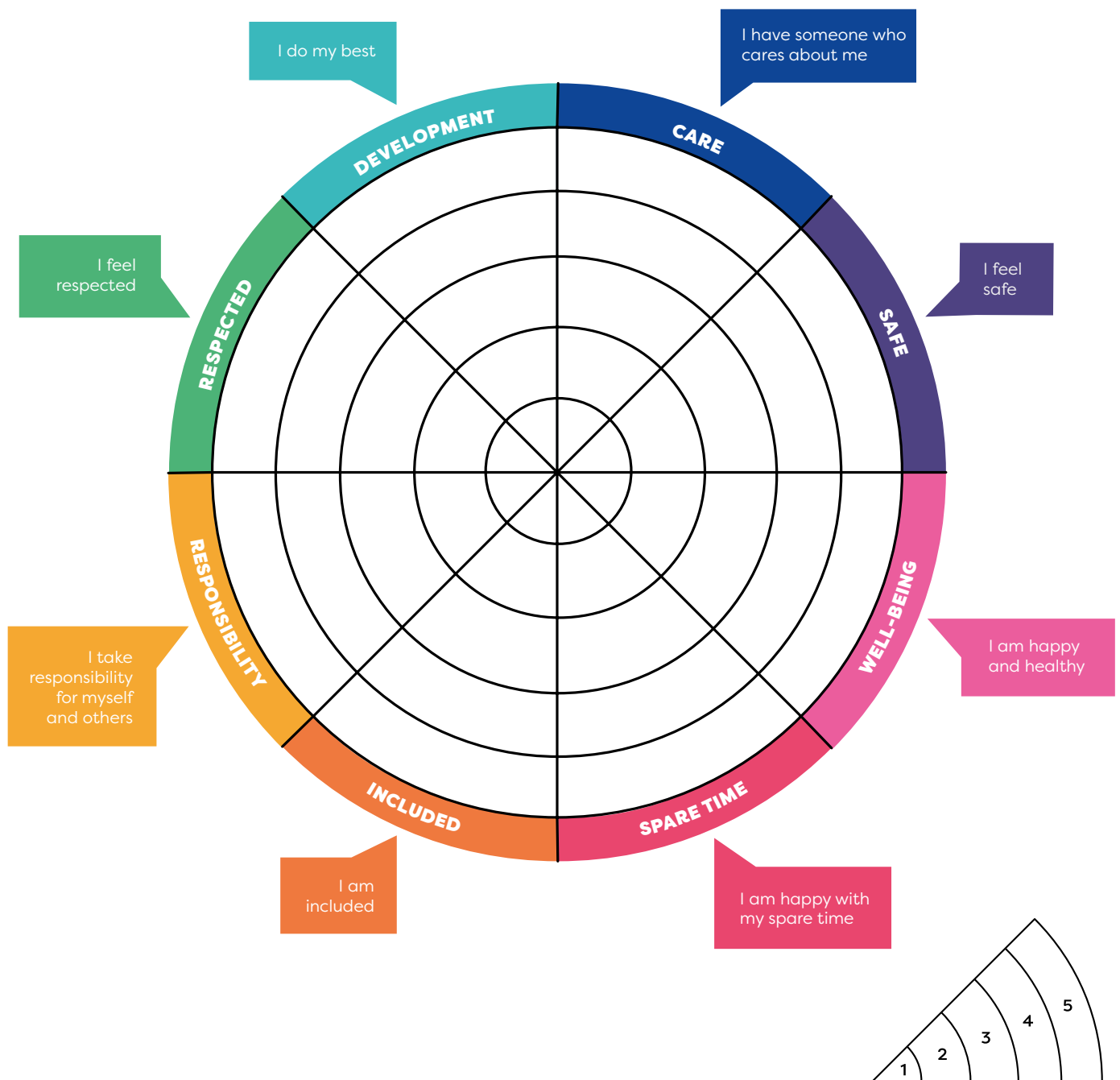
SUMMARY: What needs do we need to work with right now?

| |
|--|
| |
|--|

The Child Team's and the parent or guardian's assessment

The child's needs and situation

To be filled in based in part on the discussion points after individual support with a Child Team has been granted



- ✓ = Child Team
- ✗ = Parent or guardian

Statements
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Joint description of the child's needs and situation

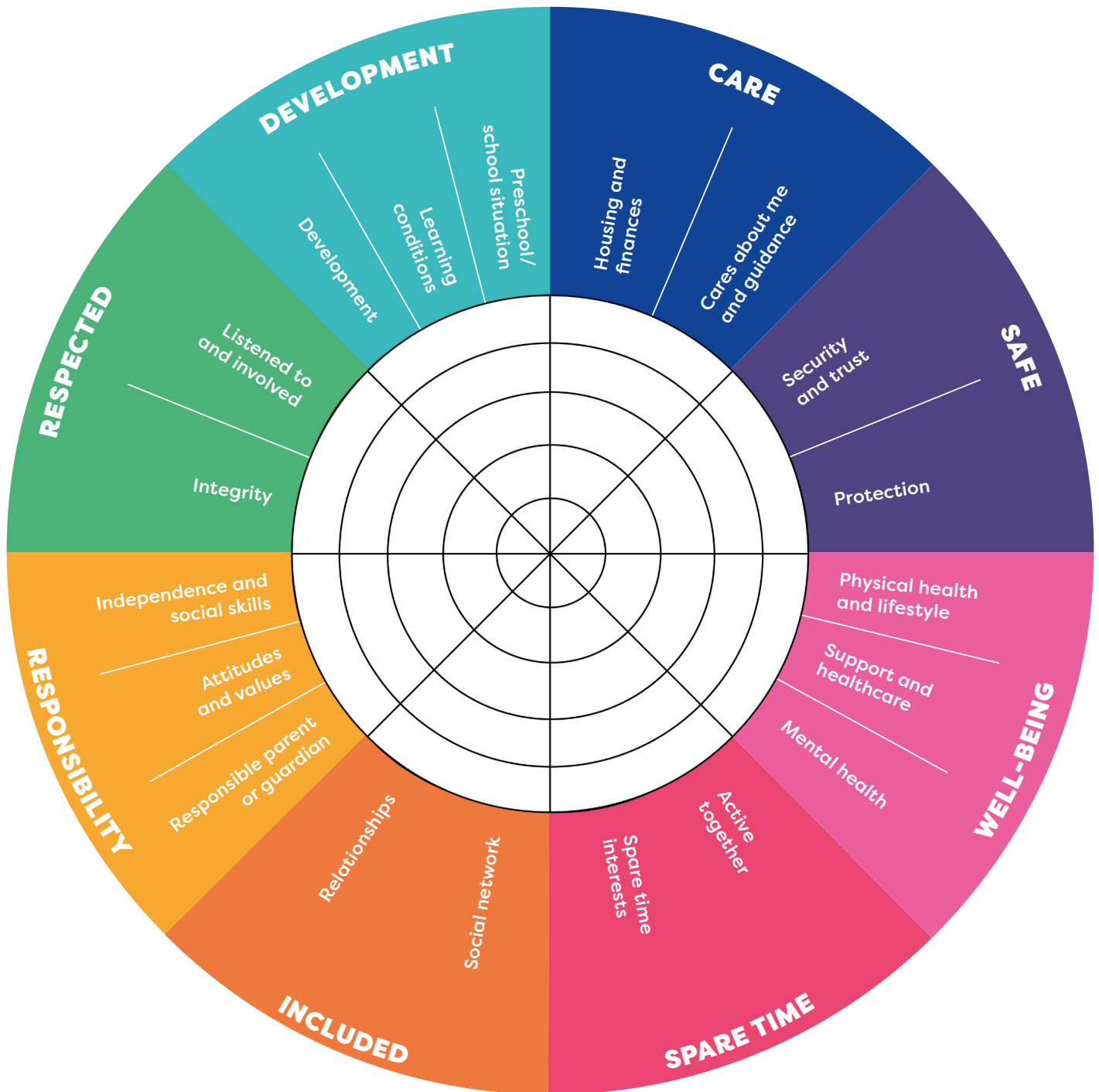
| | |
|---|--|
| I have someone who cares about me | |
| I feel safe | |
| I am happy and healthy | |
| I am happy with my spare time | |
| I am included | |
| I take responsibility for myself and others | |
| I feel respected | |
| I do my best | |
| Other info | |

All information from _____'s team

Child's name

Expanded needs compass with the child's latest assessment.

Pages 9-18 are to be filled in by the Support Coordinator under/after the Individual Child Team





CARES ABOUT ME AND GUIDANCE

- Cares about me and guidance
- Care—such as food, clothes, sleep, routines, and stimulation
- Guidance—guiding the child, handling conflicts and boundaries
- Parent or guardian to turn to—support, love, warmth and tenderness
- Parent or guardian's and siblings' health and behavior—mental health, stress, impairments, behavioral problems

HOUSING AND FINANCES

- Family situation—background, conflicts, and events
- Housing adapted to the child's needs
- Income that ensures the child's needs are met



Safe

I FEEL SAFE

SECURITY AND TRUST

- Security and trust in the home—protection from danger and fear
- Security and trust in preschool/school and home environment
- Safety online and relationships online

PROTECTION

- Protection from injuries, accidents, violence, and abuse
- Protection from victimization, drug abuse, crime, illegal activity and being taken advantage of by adults around them
- Managing risks



PHYSICAL HEALTH AND LIFESTYLE

- Physical health—growth and development
- Lifestyle—food, exercise, addictions, recovery, sleep
- Diseases and impairments

MENTAL HEALTH

- Faith in the future and self-esteem
- Behavior, hyperactivity, impulsivity
- Psychosomatic symptoms, such as depression, annoyance, worry, stress, headache, stomach ache, anger
- Separation issues

SUPPORT AND HEALTHCARE

- Participates in checkups
- Accepts support and healthcare based on needs
- Knows where to turn for support and help
- Professional contacts

ACTIVE TOGETHER

- Active together and has fun
- Play and activity
- Friends at home

SPARE TIME INTERESTS

- Opportunities for spare time interests
- Opportunities for recovery
- Obstacles to participating in activities



RELATIONSHIPS

- Interactions—parent or guardian, siblings, peers
- Problem solving and conflicts
- Relationships with friends—making and keeping friends

SOCIAL NETWORK

- Relationships with relatives and friends
- Feels important and appreciated



Responsibility

I TAKE RESPONSIBILITY FOR MYSELF AND OTHERS

INDEPENDENCE AND SOCIAL SKILLS

- Makes an effort in preschool/school
- Demeanor and behavior—considerate, responsible, understands consequences
- Can take care of themselves and deal with difficulties
- Rules and responsibilities at home

ATTITUDES AND VALUES

- Violence, delinquency, and hostility
- Cares about other people and animals
- Can show remorse and guilt

RESPONSIBLE PARENT OR GUARDIAN

- The child's responsibilities—home, siblings and parent or guardian
- Involved parent or guardian at preschool/school/after-school center
- The child's role in conflicts



Respected

I FEEL RESPECTED

LISTENED TO AND INVOLVED

- Expresses themselves and wants to be heard
- Is listened to, taken seriously and involved
- Receives age-appropriate information
- Has the support and faith of others

INTEGRITY

- Child's integrity is respected
- Stands for their opinion
- Identity and faith in their own ability
- Bullying, exclusion, and/or discrimination



LEARNING CONDITIONS

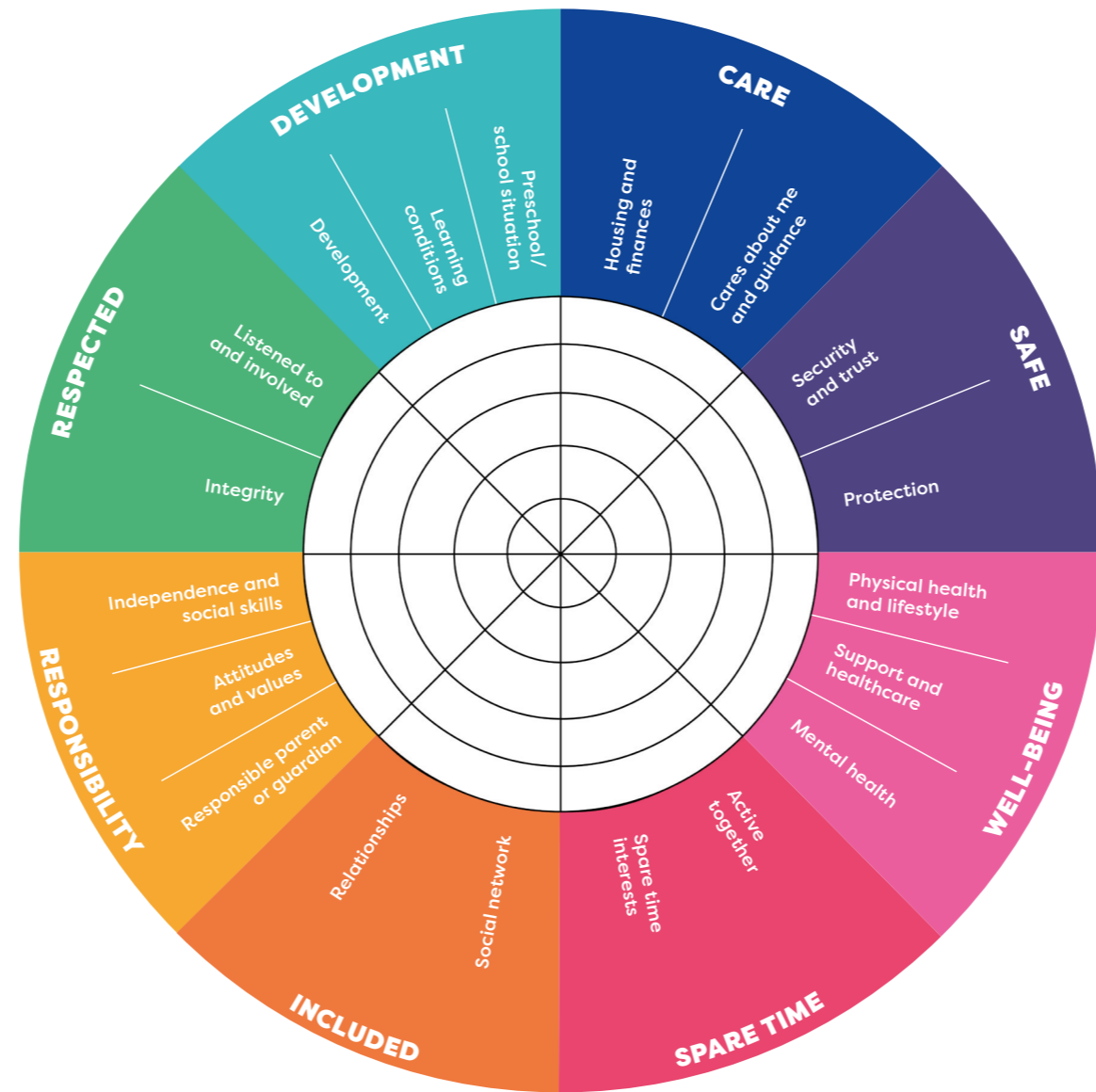
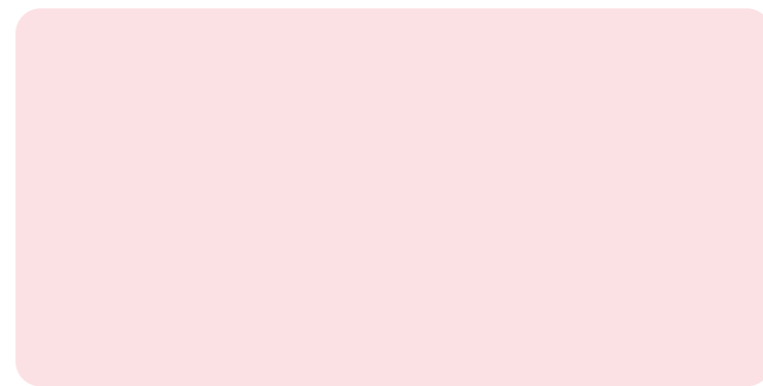
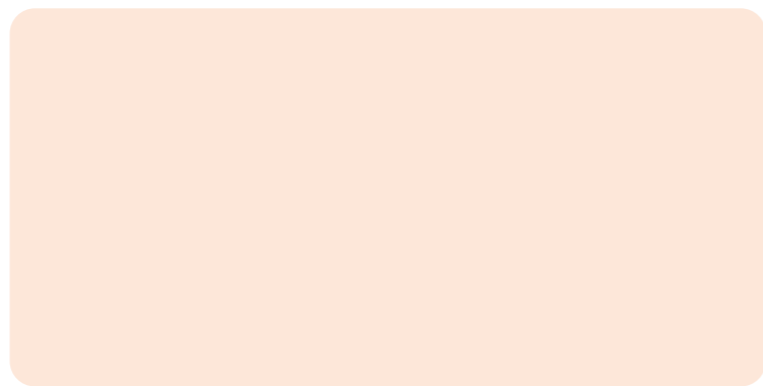
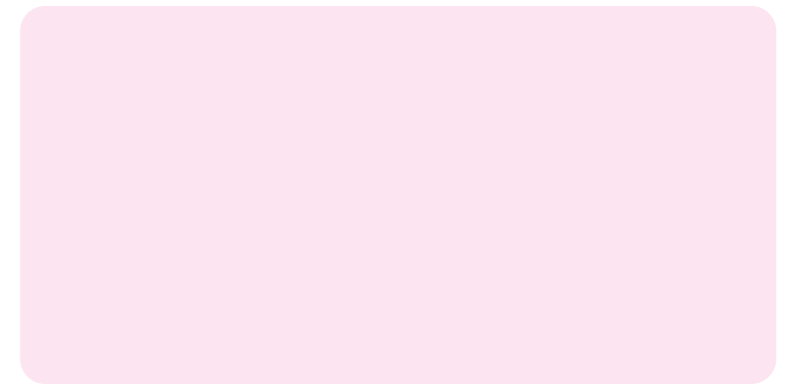
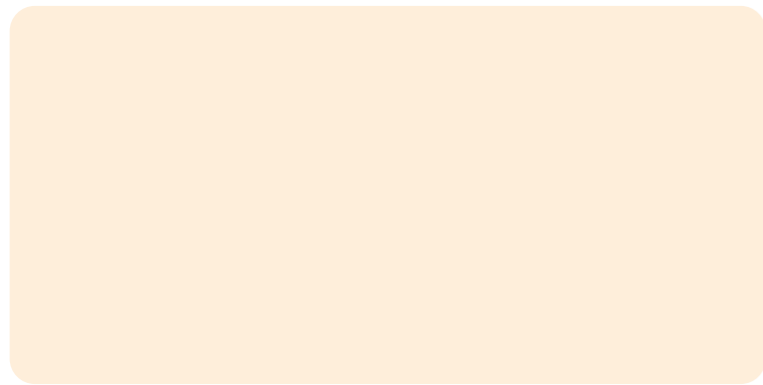
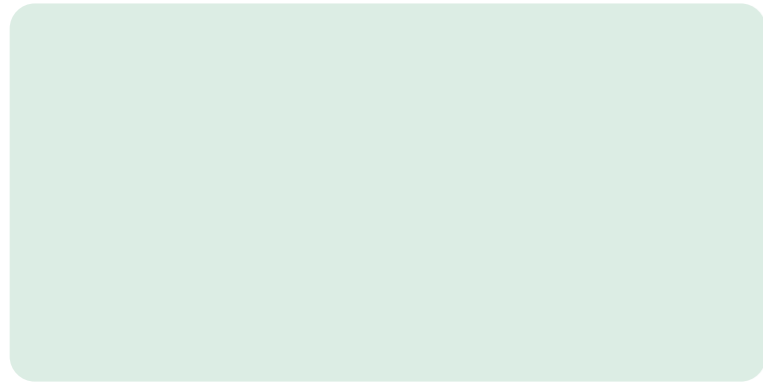
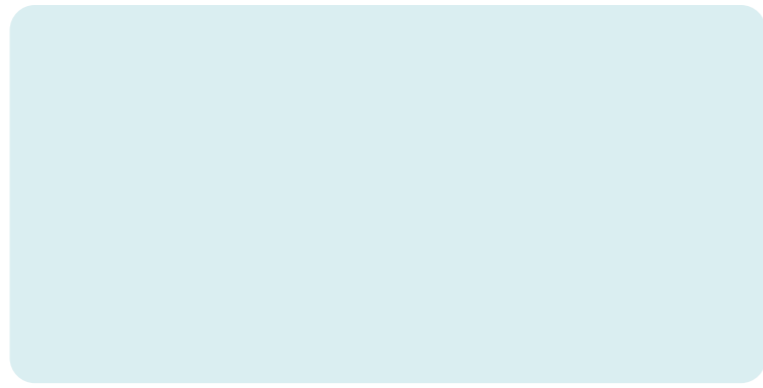
- Motor control, perception, speech, language
- Inquisitiveness and desire to learn new things
- Following instructions, organizing tasks, moving from one activity to another

DEVELOPMENT

- Play skills and ability to take turns
- Empathic ability
- Achieves proficiency requirements

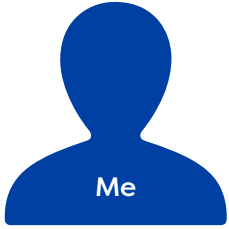
PRESCHOOL/SCHOOL SITUATION

- Attendance and enjoyment
- Interactions with children/pupils and adults
- Extra adaptations and support
- Changed preschool/school, dropped out



Previous incidents

To be started by the Child Contact and then updated regularly by the Support Coordinator



The support I got

What has happened

Empty box for incident description

Empty box for support received

Five horizontal lines for notes

Empty box for incident description

Empty box for support received

Five horizontal lines for notes

Empty box for incident description

Empty box for support received

Five horizontal lines for notes

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Empty box for incident description

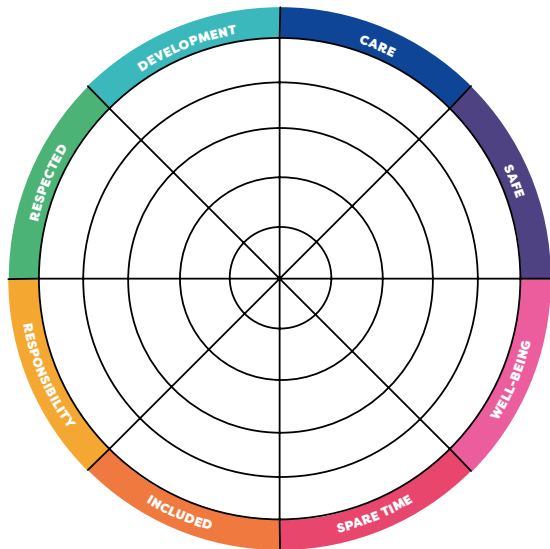
Empty box for support received

Five horizontal lines for notes

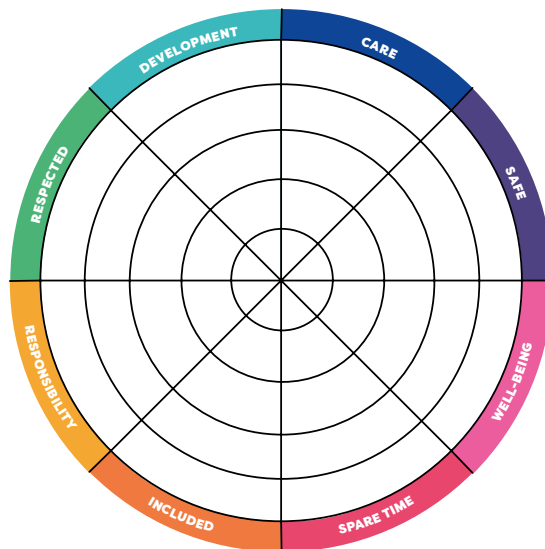


Follow-up:

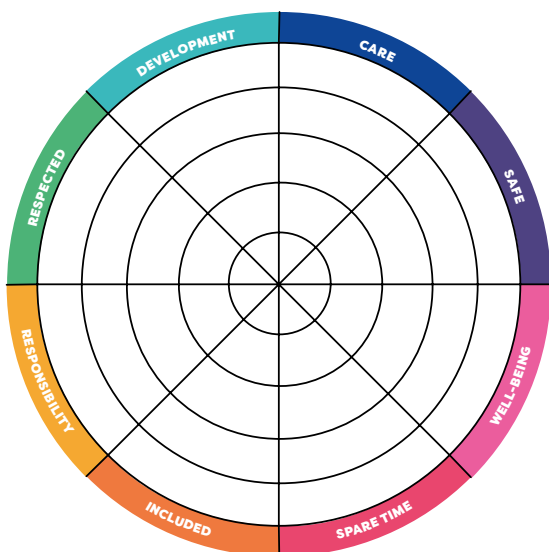
Assessment of my needs and situation



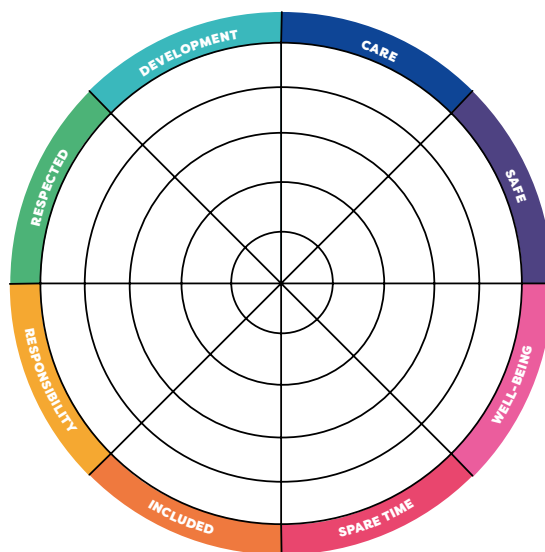
Date _____



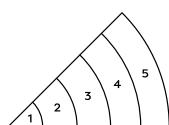
Date _____



Date _____



Date _____



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