

Date: Child's name:

Hospital ID: Clinician:

In coming to our service today, what are some of the goals you want to achieve?

Goal 1

Our Goal is:

.....

Made by:



How close are you to reaching this goal?

0 1 2 3 4 5 6 7 8 9 10



Not at all close

Halfway

Goal reached!

Goal 2

Our Goal is:

.....

Made by:



How close are you to reaching this goal?

0 1 2 3 4 5 6 7 8 9 10



Not at all close

Halfway

Goal reached!

Goal 3

Our Goal is:

.....

Made by:



How close are you to reaching this goal?

0 1 2 3 4 5 6 7 8 9 10



Not at all close

Halfway

Goal reached!