



Derby City Council

My Life, My Journey

# At home I feel

Name .....

Age .....

Today's Date .....



# How I'm feeling at home

Please tick the words that describe how you feel

1. When I think about home I feel



Happy



Ok



Worried

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2. When I think about my family I feel



Happy



Ok



Worried

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3. When I'm with my brothers/sisters I feel



Happy



Ok



Sad

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4. I think my behaviour at home is



Ok



Sometimes Ok



Not Ok

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Is there anything else you would like to tell us about how you feel at home  
– please write below

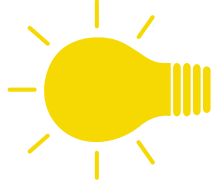
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# Action Plan



Name .....

What is going to help you?	How is it going to help you?	Who is going to help you?	When would you like it to start?
What else might help?			



# Review



Name .....

How much has it helped you?

A lot

A little

Not at all

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