

Your Review – your views (10-12 year olds)

My name is:

Filled in on:

Where I live.

Are you happy where you are living?

Yes

No

What's good about it?

What's not so good about it?

People I have contact with.

Are you OK with the people that you see?

Yes

No

Is there anything about contact that you would want changed?

Has anyone talked to you about your care plan?

(This is the day to day things that have been organised for you and the plans that are being made for your future)

Yes

No

What do you think ...

Is there anything else you want to talk about?

(Are you healthy, is everything OK at school, do you have any interests or clubs you would like to do?)

Yes

No

Your Review Meetings

Is there anything we can do to make your meetings better for you?

Yes

No

You can bring this to your Review meeting, or give it to your Independent Reviewing Officer, Social Worker or carers.