|  |  |  |  |
| --- | --- | --- | --- |
| **Child’s initials**  |  | **Mosaic ref:**  |  |
| **Keyworker**  |  | **Date**  |  |

|  |
| --- |
| **Update on actions from last time:** * *Review progress of actions agreed at last meeting*

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|  |
| **How do the child’s previous experiences and history impact on their day to day needs?** *(consider reasons for coming into care; family history and patterns and how these help our understanding of their presentation and behaviour)* |
|  |
| **Progress on objectives:** * *Analysis of what we are worried about, including are the concerns reducing? Are there any obstacles preventing positive change? Do we need to do something different?*
* *What’s working well? (Strengths, safety)*
 |
|   |
| **Next Steps** * *What do we need to do next to reduce things we are still worried about?*
* *Any other actions agreed*
 |
|  |
| Action plan  |
| Task  | Who  | Due date  |
|  |  |  |
|  |  |  |
|  |  |  |

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| --- | --- | --- | --- |
| Signed (Keyworker) |  | Date |  |
| Signed (Line Manager) |  | Date  |  |