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| --- | --- | --- | --- | --- |
|  | **Strengths:**  How am I currently providing this? | **Needs:**  What’s missing/needed/ challenging/frustrating? | **Goals:**  What do I want for the children/families/myself? | **Strategies:**  List of specific actions to take or resources to find |
| **Safety** |  |  |  |  |
| **Health** |  |  |  |  |
| **Comfort** |  |  |  |  |
| **Convenience** |  |  |  |  |
| **Child-sized furnishings** |  |  |  |  |
| **Flexibility** |  |  |  |  |
| **Movement** |  |  |  |  |
| **Choice** |  |  |  |  |