



# Teen Star™

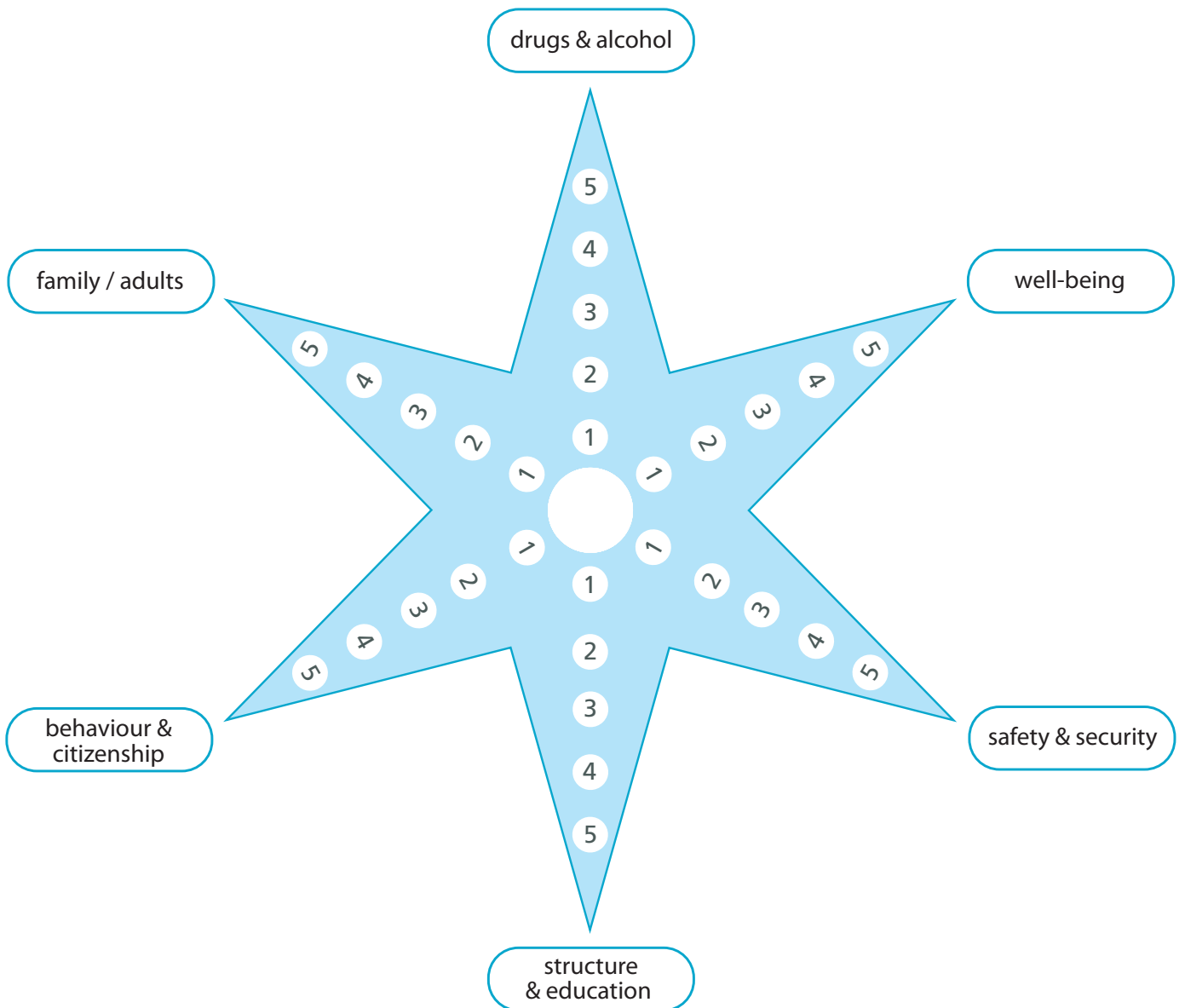
The Outcomes Star for teenagers

Client

Date of completion

First  Review  Retrospective

Completed by  
 Worker and client   
 Worker alone   
 Client



Client: I was involved in completing this Star Chart

# Star Notes

**Drugs and alcohol**

**Well-being**

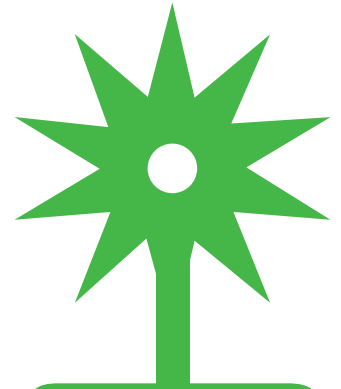
**Safety and security**

**Structure and education**

**Behaviour and citizenship**

**Family and other key adults**

# Where are you - on the Journey of Change?



## Safe and well

Things are fine and when I need support I know where to find it

5

## Alright

I'm doing alright but sometimes there are problems

4

## Making changes

I'm making changes but it's hard – things happen

3

## Want change

Things are bad and I want them to change

2

## Not safe

I don't want to think about this

1

# Action Plan

Priority area and stage/step	Goal	Action	By who?	By when? (date)

Signatures:

Client

\_\_\_\_\_

Date

DD/MM/YY

Worker

\_\_\_\_\_

Date

DD/MM/YY

Other agency /advocate

\_\_\_\_\_

Date

DD/MM/YY

Worker

\_\_\_\_\_

Date

DD/MM/YY