

Partnership Conversation Starters

Anybody in the family-professional partnership can use this form to guide collaborative conversations. Fill out as much information as you can before the conversation. Complete the rest during the conversation.

Child's Name: _____

Caregiver's Name: _____

Provider's Name: _____

Conversation Date: _____

What is going well for your family or child?

Celebrations:

What have we been working on?

Family/child goal:

Strategies tried:

Resources used:

What do we want to discuss today?

Questions:

Priorities:

Resources needed:

Based on our conversation, what are our next steps?

Family

Strategies to try:

Resources to use:

Other:

Provider

Strategies to try:

Resources to use:

Other:

Our next conversation will be on this date: _____