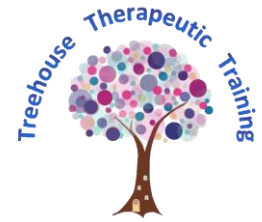


Treehouse



Therapeutic Training

BDA Journal

Before

Day _____ Month _____ Year _____ Time : AM ___:___ PM ___:___

Place: town _____ building _____ room _____

Weather (circle): Sunny/Cloudy/Cold/Warm/Rain/Snow/Windy other _____

Witnesses:	Who? _____	Relationship? _____
	Who? _____	Relationship? _____
	Who? _____	Relationship? _____
	Who? _____	Relationship? _____

What can be seen? _____

What can be heard _____

What can be smelt? _____

What can be felt? _____

Other relevant information.

During.

Length of incident: from _____:_____ to _____:_____

Place: town _____ building _____ room _____

Witnesses: Who: _____ Relationship: _____

Who: _____ Relationship: _____

Who: _____ Relationship: _____

Who: _____ Relationship: _____

Therapeutic tools used, was the tool effective?

Playfulness: _____

Acceptance: _____

Curiosity: _____

Empathy: _____

Other relevant information. _____

After:

Who did the repair? _____ Relationship: _____

What did the repair look like? _____

If the repair wasn't done, why not? _____

Could you have done anything different? _____

Can you connect this incident to a previous one? If so what was it? _____

Next steps:
