There are many ways that the NH Partners in Health Program may be able to assist you. We want you to be in charge of deciding what kind of support you use. To help you think about how you might want to use family support, we have listed below different goals which may be helpful as you prioritize your family’s needs.

Please review the list and put a check next to any item which matches the goals that are important to you. You may have needs which are not included on the list; please write them down in the spaces provided at the bottom of this form. After completing the checklist, please circle two to three items which are your top priorities right now. Together we will develop a plan to help you meet your goals.

1. Having enough food for my family
2. Paying household bills
3. Having heat and electricity
4. Finding a place to live
5. Getting furniture, clothes, toys etc. for my family
6. Completing household repairs
7. Getting medical insurance for my child or family
8. Paying medical bills
9. Getting medical care for my child or family
10. Getting information about my child’s condition or treatment
11. Getting dental care for my child or family
12. Finding equipment, supplies or therapy for my child
13. Adapting our home for my child
14. Educating my child about his or her condition and treatment
15. Arranging occasional child care
16. Getting regular day care or child care
17. Getting my child involved in recreational activities in the community.
18. Getting summer activities (job, camp) for my child
19. Planning and obtaining medical or physical support for my child at school
20. Getting the appropriate educational plan for my child at school
21. Educating school staff about my child’s needs
22. Preparing for my child’s future (in a new school, health care setting, independent living, employment, college, etc.)
23. Managing the daily needs of my child at home
24. Managing my child’s behavior
25. Transporting my child
26. Traveling/vacationing with my child
27. Promoting my child’s independence
28. Helping my child handle problems associated with having a chronic health condition
29. Helping my child make friends
30. Introducing my child to another child or an adult with a similar challenge
31. Meeting other parents with similar challenges
32. Finding out what services my child is entitled to and how to access them.
33. Finding programs or organizations in my community that may be helpful to my child or family.
34. Explaining my needs to other people or organizations
35. Taking care of myself
36. Finding a satisfying job
37. Expanding my education and interests
38. Spending time with friends
39. Doing things I enjoy
40. Managing stress
41. Having time with my spouse / significant other
42. Meeting the needs of my other children
43. Managing concerns about marital strain or relationships in our family
44. Finding a counselor for my child or family

Other goals or needs I have for my child, myself or my family:

__________________________________________________________________________
__________________________________________________________________________
__________________________________________________________________________

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