Thinking it Through Worksheet

**Priority Need/SMART Goal:**

|  |  |  |  |
| --- | --- | --- | --- |
|  | **Action Plan Step/Activity** | **Action Plan Step/Activity** | **Action Plan Step/Activity** |
| What are the potential downsides to this action? |  |  |  |
| Who will be affected? |  |  |  |
| Is there a chance this may be a negative or a positive? |  |  |  |
| What can be done to ease the potential negative outcomes of this activity? |  |  |  |