 **Day & Date**

**Evening Routine**

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| **Time** **State the time of the action**  | **Action****What is happening now, i.e. pyjamas, tooth brushing, tea, tv, ipad, fell asleep etc** | **Foods/Liquids** | **Behaviours** * **How is your child responding to the action**
* **Who instigated the action, i.e. child decided to watch TV, mum asked child to brush teeth**
* **How long did this last**
 | **Environmental Issues****Are there any other factors, is this particular action new to routine, illness, visitors,**  |
|  |  |  |  |  |