

Summary of Observations

Child's Name:	DOB:	Age in Months:
Date:	People involved in completing this	
Reasons for gathering more information: <i>Focus on the areas you are concerned about, consider using observation styles appropriate to the child's needs</i>		
What types of observation have been used? e.g. timed, tracking, narrative etc.	How many observations have been undertaken before completing this summary?	
Summary of Targeted Observations		
What strengths and interests have been observed?	Do you have any concerns as a result of these observations?	
Have any barriers to learning been identified?		
What do you feel the child was communicating? (this may be through words, actions and behaviours)		
Any Other Comments: (including input from parents/ carers)		
Next Actions:		