Multi- Agency Meeting\_Full Meeting

|  |  |  |  |
| --- | --- | --- | --- |
| **Childs Name**  |  | **DOB**  |  |
| **School**  |  | **Class**  |  | **Year****Group**  |  |
| **Locality**  |  | **Address** |  |
| **Engagement Lead**  |  | **Role**  |  |
| **Organisation**  |  | **Contact details**  |  |
| **Date of Meeting**  |  |  |  |

|  |
| --- |
| Who has been invited? |
| **Name**  | **Role** **(organisation)** | **Reason for invite**  | **Attended**  | **Apologies**  | **copy of minutes** |
|  |  |  |  |  |  |
|  |  |  |  |  |  |

|  |
| --- |
| **Why has the meeting been called?** |
|  |
| **Summary of Key issues** |
|  |
| **What has already been done?** |
|  |

|  |
| --- |
| What do people like and admire about the Person |
|  |
| Whats Important to them now? |
|  |
| Whats important in the future? |
|  |
| How do we best Support them |
|  |
| What’s working well | What’s not working |
| Education |
|  |  |
| Health |
|  |  |
| Home |
|  |  |
| Social and communication development |
|  |  |
| Other |
|  |  |
| **Questions to Answer/ issues to resolve (what do we need to Learn/ find out about?)**  |
|  |

|  |
| --- |
| **Action Plan** |
| **Goal** | **What needs to Happen** | **Who will do it** | **By when** | **Comments** | **Achieved** | **Score**  |
| **Area Of Need**  | **Desired Outcome** |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |

**Short term goals: timescales no more than 4 months**