 

Children’s Speech and Language Therapy Progress Record

To be used to record speech and language therapy target practice. Please attach to referral or re-referral to act as a record of progress and practice.

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| Name of child | DoB | Setting name | Intervention Package used |

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| **Date** | **Staff name/role** | **Section/activity as****identified in SaLT targets or intervention package** | **Session notes/progress** |
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| **Date** | **Staff name/role** | **Section/activity as identified in SaLT targets****or intervention package** | **Session notes/progress** |
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| **Date** | **Staff name/role** | **Section/activity as identified in SaLT targets****or intervention package** | **Session notes/progress** |
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