**Feedback Template - Talking Mats**

**Information about the thinker** (person giving their feedback by completing Talking Mats)

|  |  |
| --- | --- |
| 1. Post code (initial 3 letters will do) |  |
| 2. Please circle country | **England Scotland Wales**  **Northern Ireland Other** |
| 3 Relationship of the Talking Mats listener to thinker  e.g. teaching assistant, therapist on different case load**,** relative |  |
| 4. Reason for Speech and Language therapy – tick as appropriate | **Help with speech and language and communication**  **Help with eating and drinking** |
| 5 Why is speech and language therapy involved – tick as appropriate | **Autism**  **Brain injury**  **Cleft lip and palate**  **Hearing loss / deafness**  **Developmental delay**  **Developmental language disorder or language disorder**  **Stammer**  **Learning disability**  **Mental health**  **Selective mutism**  **ADHD**  **Waiting for diagnosis**  **Do not know**  **Other** |

**Please insert photo of mat**

**Topic**: Please circle which mat you used – remote / face to face/ my life

**Additional Comments** - include wider comments and additional information gained through doing the Talking Mat. This maybe from either verbal or non-verbal information.

**Summary Key points of feedback**

**Please email completed form to peter.just@rcslt.org**