



## Physiotherapy Training Record

**Child's name:**

**School's name:**

*Please keep this training record with the physiotherapy programme and guidance for staff.*

Please record below all staff who have been trained by the physiotherapist to carry out physiotherapy on the above pupil.

The physiotherapist is certifying that the below members of school staff have been trained and are competent to deliver the physiotherapy programme within school to the above pupil.

If the pupil's physical ability changes or staff have any concerns carrying out physiotherapy, the school should contact the physiotherapy department at Hafan Y Mor immediately on 01792 200400.

<b>Date</b>	<b>Staff Member Name</b>	<b>Physiotherapist Name</b>	<b>Physiotherapy Signature</b>	<b>Comments (if necessary)</b>