



Participant Monthly Activity Tracking Form

Purpose:

To track the individual activities of each Parent Partner to enable reporting site activity quarterly.

Who completes form?

Each Parent Partner completes the form each month.

When is form to be completed?

The form should be completed throughout the month following any activity with an assigned participant or outreach activities pertaining to the Parent Partner Program or Child Welfare. Upon completion of this form it must be entered into the database within 30 days.

Instructions for completing the form – Activities with each participant mentored

- Parent Partner may use one form per month and include all activities with all participants; or they may choose to use one form for each family they are working with and combine the information for a monthly report to be turned in to the Local Coordinator.
- **Other face-to-face contact column** is to be used only if the contact does not fit another category listed on the form. For example, attending a Family Focused Meeting (FFM) does not count as both — FFM and — Other face-to-face contact — just FFM
- **Phone conversations** is to be used to record conversations with each participant.
- **Text or email** is to be used to record the separate conversations with each participant.

Instructions for completing the form – Program activities

- Parent Partner should record involvement in all meetings, trainings and other activities specific to Parent Partners and child welfare in general.
- Indicate if local, state, or service area.
- Describe involvement—presenter, participant, guest, etc.

NOTE: If you are recording individual participants on separate Monthly Tracking Forms, be sure to fill out your program activities only ONCE on one of the forms.

What to do with form?

The Local Coordinator will enter the information into the database and keep the form in a secured locked location once it has been completed.

How is the information used?

The Local Coordinator uses the information to report quarterly site activity on standard reporting form to the state coordinator.

Where is this information kept after the participant is no longer involved?

This information remains in a secured locked location for ten years following a participant's exiting the program, and then this form is destroyed.

Parent Partner Program
Participant Monthly Activity Tracking Form

This form should be completed each month by the Parent Partner.

PP Name: _____ Month/Year: _____

Activities With Each Participant Mentored	Supported participant in connecting to informal supports (i.e., AA, NA, church, neighbors)	Supported participant before or after family interaction (visitation)	Helped participant access needed services	Attended Family Focused Meeting (FFM)	Attended Child Safety Conference (CSC)	Supported at court	Attended other meeting related to participant	Face-to-face contact with participant	Had phone conversation with participant	Had text or email conversation with participant related to their case
Participant Name (first name, last name, initial)	If these are checked, also indicate face-to-face, phone or email.			Face-to-face				Phone/email		

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**Parent Partner Program
Participant Monthly Activity Tracking Form (Continued)**

Parent Partner Program Activities	Committees related to child welfare	Child welfare new worker orientation	Community Partnerships for Protecting Children	Speaking engagements and program awareness	Other meetings, trainings and activities	Clinical and/or coordination	State and/or service area	Describe participation (name committee, group, organization, etc.)