**Support Activities Record Sheet**

|  |  |  |  |
| --- | --- | --- | --- |
| Participant name |  | Shift date |  |
|  |  |  |  |
| Staff name |  | Shift time |  |

|  |
| --- |
| What occurred on shift today? |
| Home-based Supports | Community and Social ParticipationSupports | Capacity Building and SkillDevelopment |
| Domestic Assistance / Cleaning | [ ]  | Social Outing | [ ]  | Public Transport Training | [ ]  |
| Yard Maintenance | [ ]  | Details: | Independent Living Skills | [ ]  |
| Personal Care | [ ]  |  | Cooking Skills | [ ]  |
| Cooking | [ ]  |  | Employment/Work Experience | [ ]  |
| Play/Respite | [ ]  | Attending Appointment/s | [ ]  | Attending Community Groups | [ ]  |
|  |  | Please provide details below: | Please provide details below: |
|  |  |  |  |
|  |  |  |  |

|  |
| --- |
| Please provide brief comments, concerns or issues |
|  |

|  |  |
| --- | --- |
| Staff signature |  |
|  |  |
| Date complete |  |

Once complete, please return completed form to admin@allaboutyou.org.au