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Form
Activity Log
Residential Care and Transition Services

Client name	D.O.B.
Click here to enter text.	enter text
Click here to enter text.	enter text
Click here to enter text.	enter text

Entry date	Click here to enter a date.	Hierarchy	Click here to enter text.
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Activity information			
Activity date	Click here to enter a date.		
Time from	enter text AM / PM	Time to	enter text AM / PM
Duration of activity	Click here to enter text.		
Duration of engagement	Click here to enter text.		
Location	Click here to enter text.		
Person/s attending	Click here to enter text.		
Activity scheduled?	<input type="checkbox"/> Planned <input type="checkbox"/> Unplanned		
If required, has an Activity Risk Assessment been completed and saved to documents?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A		

Activity		
<input type="checkbox"/> Centre-based program <input type="checkbox"/> Daily planning meeting <input type="checkbox"/> Family contact face-to-face <input type="checkbox"/> Legal/Government appt. <input type="checkbox"/> Medical <input type="checkbox"/> Social skills <input type="checkbox"/> Volunteering	<input type="checkbox"/> Community participation <input type="checkbox"/> Education <input type="checkbox"/> Identity development <input type="checkbox"/> Leisure, sport, recreation <input type="checkbox"/> Respite <input type="checkbox"/> Therapy session <input type="checkbox"/> Other (specify): Click here to enter text.	<input type="checkbox"/> Culture engagement <input type="checkbox"/> Employment <input type="checkbox"/> Leaving/transitioning care <input type="checkbox"/> Living skills <input type="checkbox"/> Reference person meeting <input type="checkbox"/> Vocational

Outcomes
Specify activity purpose
Click here to enter text.
Describe outcomes
Click here to enter text.
Issues and follow up required
Click here to enter text.

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Completion and sign off			
Name of worker preparing report		Click here to enter text.	
Date/time report prepared		Date: Click here to enter a date. Time: enter text AM / PM	
Signature		Date	Click here to enter a date.