

# MONTHLY STATISTICAL REPORT – ACTIVITIES COMPLETED THIS MONTH ONLY

Counselor \_\_\_\_\_ PSID \_\_\_\_\_ Counselor Email \_\_\_\_\_

Month \_\_\_\_\_ Year \_\_\_\_\_ Scheduled SAP Days Per Week: 1  2  3  4  5

<b>Unduplicated Student Count – This Month Only</b>	<b>Total</b>
Total unique students seen one on one or in prevention/intervention groups <b>(Count each student only once)</b>	
Of the total students, number students new this month	
Of the total, number of students referred for ATOD assessment services	
Of the total, # students referred for Mental Health Services	
Of the total, # students referred to other out of school services (physician, self-help, etc)	
Of the total, # students having policy violations (any school policy) within the month	
Of the total, # students returned from ATOD Treatment for follow up/recovery services	

Use only one category for each activity – choose the one that best represents the activity completed. Shaded areas indicate that no response is required. Provide total HOURS spent on the activity in the month, people and times are options. **You may count the same person more than once.**

<b>Category (PD = Prevention Deliverable)</b>	<b>Activity</b>	<b>(REQUIRED) Total Hours Required for this activity</b>	<b>(Optional) Total times the Activity was Done</b>	<b>(Optional) Total People/ Contacts</b>
Intervention	Individual One-on-One Closed Door Contacts with Students			
Intervention	Parent/Guardian Meeting or Call			
Intervention	Tobacco Cessation Groups			
Intervention	Formal Group or Support Sessions			
Intervention	Policy Violation Initial Contact Only			
Intervention	Follow-up on Referrals Made by SAP Counselor (internal & External)			
PD 1	<b>School Board Policy-development, review, training/ATOD policies</b>			
PD 2	<b>Staff development</b>			
	Educational/Training Presentations to teaching and support staff			
	Development of school ATOD communications materials			
PD 3	<b>Program awareness</b>			
	Parent/community education and awareness			
	Program Development ex.:Wellness Week, Recovery Week, Project Graduation, Project Prom, etc.			
PD 4	<b>Internal referral process–SAP participation in student support team</b>			
PD 5	<b>Follow up with student support team-identified recommendations</b>			
PD 6	<b>Program evaluation - meet with supervisors, develop and evaluate goals</b>			
PD 7	<b>Educational Programs</b>			
	Evidence-based curriculum ie Botvin’s Life Skills, NOT, Know Your Body, Michigan Model, Tobacco Cessation, etc			
	Teaching ATOD in classrooms/assemblies			
	Facilitate/Advise Peer Leadership Programs ex: VTLSP/SADD			
	Any other integrated school-based program			
PD 8	<b>Cooperation and collaboration with community agencies and other in and out of school resources</b>			
PD 9	<b>Integration with other school-based programs ie MH, drivers Ed, classroom, health, etc</b>			
Admin	SAP Paperwork/Documentation (Monthly Stat, Tracking)			
Admin	Attending Training/ Workshops			
Admin	Staff Meetings			
Admin	Outside Clinical Consultation/Peer Supervision; Other SAP Counselors			
Admin	Consultations with School Staff and or Teams / In-House Supervision			
Other	Informal Contacts with Student or Groups of Students			

<b>Number of times SAP services were requested and services not delivered due to lack of SAP Time (meetings, groups, sessions, etc.)</b>	
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