**SAMPLE FORM FOR TRACKING INCREASED AVAILABILITY OF SURVIVOR-LED PROGRAMMING**

*This form was designed to complete at baseline and then again on a periodic basis (e.g., monthly or quarterly) to measure change over time*

Today’s Date:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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| **Please list your current**  **programs/services for survivors in the column below.** | **Please list how many survivors are currently participating/receiving services for each.** | **Please list how many (if any) survivors participate in planning services for this program/area (e.g., by serving on a board or team of some kind).** | **Please list how many (if any) survivors participate in setting the goals/ targeted outcomes of this program/service area.** | **Please list how many (if any) survivors help facilitate the delivery of this program/service to other survivors.** | **Please list how many (if any) survivors lead/co-lead groups or provide other services to fellow survivors.** |
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