

This report is to be completed within one week of the first session you observe. After completing the report, please email the report to your Team Lead and to the Training Director at Families & Schools Together at <mailto:fasttrainers@familiesandschools.org>.

Trainer: \_\_\_\_\_

Trainer Contact Information: \_\_\_\_\_

Trainer Email: \_\_\_\_\_

Intern (If applicable): \_\_\_\_\_

Intern Contact Information: \_\_\_\_\_

Intern Email: \_\_\_\_\_

**SCHOOL AND/OR SITE DEMOGRAPHICS:**

Program Dates Phase I: \_\_\_\_\_ Site Visit III \_\_\_\_\_

School/Site: \_\_\_\_\_

Principal/Director: \_\_\_\_\_

Team Contact: \_\_\_\_\_

**ATTENDANCE:**

For each category listed below, please indicate the number of people in attendance at this session.  
**NOTE:** Remember that the site must graduate a minimum of five families to be eligible for Team Certification.

Families: \_\_\_\_\_

Parents/Care-giver: \_\_\_\_\_

Children: \_\_\_\_\_

Team Members: \_\_\_\_\_

Volunteers: \_\_\_\_\_

School Personnel: \_\_\_\_\_

Other Visitors: \_\_\_\_\_ Who were the visitors? \_\_\_\_\_

Please comment on the level of ethnic and socio-economic matching between the team members and the attending families. Do families appear comfortable interacting with the team? Does the team appear comfortable interacting with families? Please share your observations.

Retention:

What retention strategies were successful?

What were the challenges to successfully retain families if any?

How were team members involved in retention and recruitment?

**SITE & FACILITIES OVERVIEW:**

Indicate with a ✓ where the following areas are provided and if each area meets the needs of all families participating at this FAST® site.

<b>Facilities</b>	<b>N/A</b>	<b>Meets Needs</b>
Signage & Welcome Area		
Kitchen/Dinner Area		
Family Tables		
Kid's Time Area		
Childcare Area		
Special Play Area		
Special Reading		
Main Room		
Resource Table		
Playground		
Bathrooms		
Transportation		
Parking		
Safe Environment		

If anything in the above list was not found to “meet needs,” how will that change in the future? Please describe what the team plans to do to ensure that all facilities “meet needs.”

**OVERVIEW OF QUALITY OF IMPLEMENTATION:**

When completing this section of the site visit report, be mindful of the details outlined within the Quality of Implementation Checklist (QIC). It is important to review the details and document them based on trainer observations during the site visit. Strengths and challenges should be assessed according to the core components outlined under each section within the QIC and within integrity outlined within the Program Integrity Checklist.

**FAST Welcome**

Strengths of Implementation

Challenges of Implementation

Comments or suggestions to support ideal implementation

**Meal**

Strengths of Implementation

Challenges of Implementation

Comments or suggestions to support ideal implementation

**FAST® TRADITIONS: FAST Hello**

Strengths of Implementation

Challenges of Implementation

Comments or suggestions to support ideal implementation

**Music/FUN Song**

Strengths of Implementation

Challenges of Implementation

Comments or suggestions to support ideal implementation

**Buddy Time**

Strengths of Implementation

Challenges of Implementation

Comments or suggestions to support ideal implementation

**Parent Group(s)**

Strengths of Implementation

Challenges of Implementation

Comments or suggestions to support ideal implementation

**Grandparent Group(If applicable)**

Strengths of Implementation

Challenges of Implementation

Comments or suggestions to support ideal implementation

**Kids Time**

Strengths of Implementation

Challenges of Implementation

Comments or suggestions to support ideal implementation

**Special Play/One on One Time**

Strengths of Implementation

Challenges of Implementation

Comments or suggestions to support ideal implementation

**Special Reading**

Strengths of Implementation

Challenges of Implementation

Comments or suggestions to support ideal implementation

**Lottery**

Strengths of Implementation

Challenges of Implementation

Comments or suggestions to support ideal implementation

**Graduation Night:**

Was this a graduation night?

If no, when will graduation occur?

How many families graduated?

Were affirmations read in the Parent Group?

Did parents write affirmations for their children?

Did children present appreciations for their parents?

Strengths of the graduation

Challenges to the graduation

**Announcements, Closing Circle & Rain**

Strengths of Implementation

Challenges of Implementation

Comments or suggestions to support ideal implementation

**Parent Empowerment**

Did the team effectively empower parents? If yes how was this demonstrated?

Challenges of parent empowerment

Comments or suggestions to support parent empowerment by the team

**PROGRAMATIC TEAM INFORMATION:**

For each of the areas listed below, please describe the team as a whole by outlining their strengths and challenges and give your observations and recommendations for sessions two through graduation.

- Team Characteristics: Has the team changed? If so, why did it change?
  
- Team Cohesion: If there were changes in the team, how did the team incorporate the new member(s)? In what ways did having a new member affect team cohesion?
  
- Integrating Feedback: Does the team actively solicit and listen to the feedback given by team members? Are they able to “integrate” the feedback given into the program?

**Debriefing**

Please list the team members present for debriefing.

Was anyone missing? If so, please explain.

Was adequate time given to debrief with the team?

When was debriefing conducted (i.e. evening of FAST, next day)?

**The following areas must be discussed with the team during debriefing. Initial each area to verify they were discussed.**

- Review of paperwork to be turned into the FAST Office (Refer to link sent from FAST Office)\_\_\_\_\_
- Remind team to complete Implementation Review together as a team, individually complete Team Member Survey, FAST Funding Survey, and School Information Survey (To be completed by Principal or Site Director\_\_\_\_\_
- Determine when and how Parent Surveys will be completed (Should be completed within 2 weeks of graduation)\_\_\_\_\_
- Explain that Phase III usually is conducted within 2 months after all surveys and paperwork are received by FAST Office.\_\_\_\_\_

**Reminder: Please email this form to the Team Lead and to the Training Director at <mailto:fasttrainers@familiesandschools.org>**