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| --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **Group Interaction Record** | | | | | | | | |
| **Date** |  | | **Time** |  | | **Location** | |  |
| **Staff/Volunteers Present** |  | |  |  | | | | |
| **Participants- Please provide initials only**  **1.**  **2.**  **3.**  **4.**  **5.** | | | | | | | | |
| **Activity Overview-** record what the activity is and what it’s purpose is | | | | | | | | |
| **Participation** | | | | | | | | |
| **Contribution Levels:** who contributed and how (e.g., verbal input, active listening, leading activities). | | | | | | | | |
|  | | | | | | | | |
| **Engagement Levels:** Describe the level of engagement of participants (e.g., highly engaged, partially engaged, disengaged) | | | | | | | | |
|  | | | | | | | | |
| **Support Provided:** Document any additional support provided to participants (e.g., communication aids, emotional support). | | | | | | | | |
|  | | | | | | | | |
| **Interaction** | | | | | | | | |
| **Group Dynamics:** Observe and record how the group interacted (e.g., cooperation, conflict, respect) | | | | | | | | |
|  | | | | | | | | |
| **Social Aspects** | | | | | | | | |
| **Social Interactions:** Record any notable social interactions, such as supportive gestures, disagreements, or bonding moments. | | | | | | | | |
|  | | | | | | | | |
| **Challenges and Issues** | | | | | | | | |
| **Barriers to Participation/ engagement/interaction:** Note any barriers that affected participation (e.g., language difficulties, physical accessibility). | | | | | | | | |
|  | | | | | | | | |
| **Observations and Reflections** | | | | | | | | |
| **Staff Observations**: Include any observations regarding group dynamics or individual progress | | | | | | | | |
|  | | | | | | | | |
| **Participant Feedback:** Record any feedback received from participants about the interaction. | | | | | | | | |
|  | | | | | | | | |
| **Reflections on the Interaction:** Note any reflections on what went well and what could be improved for future interactions. | | | | | | | | |
|  | | | | | | | | |
| **Support Worker Name** | |  | | | **Signature** | |  | |
| **Supervisor Name** | |  | | | **Signature** | |  | |