Prevention Activity Sheet

Program/Group		Month		Day		Year	
Location:							
Funding Source/County:							
Start Time:		AM PM	End Time:		AM PM	Contact Hours:	
						Contact Units:	

Priority(ies):

☐ Alcohol/Underage alcohol use ☐ Tobacco/Nicotine-Containing Products/Vaping ☐ Cannabis/Cannabinoids/Marijuana Use
☐ Cocaine ☐ Heroin ☐ Inhalants
☐ Methamphetamine ☐ Fentanyl or Other Synthetic Opioids ☐ Other (Opioid Misuse, Stimulant Misuse, etc.)
☐ Suicide-related substance use ☐ Prescription Medications/Prescription Drug Misuse

Strategy & Billing Code	
☐ Information Dissemination **(H0024)**	☐ Environmental Approaches **(H0025)**
☐ Community-Based Processes **(H0026)**	Education ☐ (**H0027**) ☐ (**H0027:HF**) ☐ (**H0027:HF;HA**)
☐ Problem Identification and Referral **(H0028)**	Alternatives ☐ (**H0029**) ☐ (**H0029:HF**) ☐ (**H0029:HF;HA**)

Strategy Name (i.e., Too Good For Drugs, Compliance Checks, etc.):

_____

Outcome Indicator(s) (i.e., 30-day alcohol use) :

_____

Description:

_____

_____

_____

_____

Check Applicable:

IOM Group Identifier		**Community Size**					
Universal Indirect	_____	0 – 5000	_____	5001 – 10000	_____	10001 – 20000	_____
Universal Direct	_____	20001 – 30000	_____	30001 – 40000	_____	40001 – 50000	_____
Selected	_____	50001 or more	_____	10001-20000	_____	50001 or more	_____
Indicated	_____						

Domain(s)/Contexts:

Individual _____ Family _____ Peer _____ School _____ Community _____ Society/Environmental _____

Priority Population(s)

College Age Individuals (ages 18-26)	_____	Persons Experiencing Homelessness	_____
Older Adults (ages 55 and above)	_____	Native Hawaiian/Pacific Islander	_____
Military Families	_____	Asian	_____
American Indian/Alaska Native	_____	Rural	_____
Hispanic	_____	African American	_____

	Name/Alias	Age	Race	Ethnicity
1		□ 0-5 □ 25-44 □ 6-12 □ 45-64 □ 13-17 □ 65-74 □ 18-20 □ 75+ □ 21-24 ☐ Age Not Available	□ White □ Black/African American □ Asian □ American Indian/Alaska Native □ More than one race □ Native Hawaiian/Other Pacific Islander □ Race Not Available **Sex** ☐ Male ☐ Female ☐ Sex Not Available	☐ Hispanic or Latino ☐ Not Hispanic or Latino ☐ Ethnicity Not Available

	Name/Alias	Age	Race	Ethnicity
2		□ 0-5 □ 25-44 □ 6-12 □ 45-64 □ 13-17 □ 65-74 □ 18-20 □ 75+ □ 21-24 ☐ Age Not Available	□ White □ Black/African American □ Asian □ American Indian/Alaska Native □ More than one race □ Native Hawaiian/Other Pacific Islander □ Race Not Available **Sex** ☐ Male ☐ Female ☐ Sex Not Available	☐ Hispanic or Latino ☐ Not Hispanic or Latino ☐ Ethnicity Not Available
3		□ 0-5 □ 25-44 □ 6-12 □ 45-64 □ 13-17 □ 65-74 □ 18-20 □ 75+ □ 21-24 ☐ Age Not Available	□ White □ Black/African American □ Asian □ American Indian/Alaska Native □ More than one race □ Native Hawaiian/Other Pacific Islander □ Race Not Available **Sex** ☐ Male ☐ Female ☐ Sex Not Available	☐ Hispanic or Latino ☐ Not Hispanic or Latino ☐ Ethnicity Not Available
4		□ 0-5 □ 25-44 □ 6-12 □ 45-64 □ 13-17 □ 65-74 □ 18-20 □ 75+ □ 21-24 ☐ Age Not Available	□ White □ Black/African American □ Asian □ American Indian/Alaska Native □ More than one race □ Native Hawaiian/Other Pacific Islander □ Race Not Available **Sex** ☐ Male ☐ Female ☐ Sex Not Available	☐ Hispanic or Latino ☐ Not Hispanic or Latino ☐ Ethnicity Not Available
5		□ 0-5 □ 25-44 □ 6-12 □ 45-64 □ 13-17 □ 65-74 □ 18-20 □ 75+ □ 21-24 ☐ Age Not Available	□ White □ Black/African American □ Asian □ American Indian/Alaska Native □ More than one race □ Native Hawaiian/Other Pacific Islander □ Race Not Available **Sex** ☐ Male ☐ Female ☐ Sex Not Available	☐ Hispanic or Latino ☐ Not Hispanic or Latino ☐ Ethnicity Not Available
6		□ 0-5 □ 25-44 □ 6-12 □ 45-64 □ 13-17 □ 65-74 □ 18-20 □ 75+ □ 21-24 ☐ Age Not Available	□ White □ Black/African American □ Asian □ American Indian/Alaska Native □ More than one race □ Native Hawaiian/Other Pacific Islander □ Race Not Available **Sex** ☐ Male ☐ Female ☐ Sex Not Available	☐ Hispanic or Latino ☐ Not Hispanic or Latino ☐ Ethnicity Not Available

Totals:

Ages	____ 0-5 ____ 6-12 ____13-17 ____18-20 ____21-24 ____25-44 ____45-64 ____65-74 ____75+ ____ Age Not Available
Race	____ White ____ Black/African American ____Asian ____American Indian/Alaska Native ____ Native Hawaiian/Other Pacific Islander ____ More than one race ____ Race Not Available
Ethnicity	____ Hispanic or Latino ____ Not Hispanic or Latino ____ Ethnicity Not Available
Sex	____ Male ____ Female ____ Sex Not Available

_____ _____

Prev. Provider (Printed Name + Signature) (Signature of individual(s) who provided the actual service) Date

_____ _____

Prev. Specialist (Printed Name + Signature) (Only if the individual above is under supervision and working toward credentialing) Date