# ACTIVITY PARTICIPATION RECORD

| FACILITY: | ROOM NO: |
|---|---|
| | SURNAME: |
| | FIRST NAME: |
| | DATE OF BIRTH: |

| MONTH: | NV | Responded non-verbally | O | Observed | U | Unwell or in bed | D | Declined to participate |
|---|---|---|---|---|---|---|---|---|
| | NR | No Response | P | Participated | A | Assisted | B | Unusual Behaviour |
| | H | Half Session Only | E | Encouragement needed | V | Visitors or Out | L | ADL's in Progress |

| ACTIVITY | 1 | 2 | 3 | 4 | 5 | 6 | 7 | 8 | 9 | 10 | 11 | 12 | 13 | 14 | 15 | 16 | 17 | 18 | 19 | 20 | 21 | 22 | 23 | 24 | 25 | 26 | 27 | 28 | 29 | 30 | 31 |
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Created by Quality Aging 2014