# Semi-Annual Community Progress Report

This report will cover a review of progress and a description of activities for each six-month period of Rooted in Relationships. It should be submitted with the required budget forms by the date specified in your contract. Please work with the community stakeholder team, Rooted in Relationships evaluator, community Pyramid Model coaches, and others as needed to complete this report. Submit both the written report and budget expenditures to Jamie Anthony, [janthony@nebraskachildren.org](mailto:janthony@nebraskachildren.org).

|  |  |
| --- | --- |
| **Community Name** |  |
| **Person Completing Report** |  |
| **Date Completed** |  |
| **Reporting Period** |  |

## Collaborative Team

In this section, please include information about the vision/purpose of the Rooted Stakeholder Team/Collaborative Group. Also include one or two statements regarding the structure of the group including agency/initiative representation.

## Children and Families Reached

Provide a summary of the children and families served **as part of Rooted in Relationships** during the previous 6 months. This should include any family or child that was active at any point in this period.

**As Guidance:**

“Served Directly” - Include sustained contact with children or families such as Pyramid Model implementation in the child’s center or home childcare, participation in Circle of Security-Parenting, etc.

“Served Indirectly” – Typically reflect short-term activities with children and families, such as numbers at health fairs, a parent training, etc.

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| --- | --- | --- | --- |
| **Summary of Children & Families Reached** | | | |
| Number of Families Served Directly |  | Number of Families Served Indirectly |  |
| Number of Children Served Directly |  | Number of Children Served Indirectly |  |

## Training Activities

Please document any training conducted or completed during the past 6 months that was coordinated through Rooted in Relationships.

|  |  |  |  |
| --- | --- | --- | --- |
| **Training related to Social and Emotional Development** | | | |
| Date(s) | Training Topic/Description | # in attendance | Audience (Parent, Professional, etc.) |
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|  |  |  |  |
|  |  |  |  |
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|  |  |  |  |

Provide a summary of each training offered in the following space. Please include a summary of your training evaluation data, when available.

## Events

Please document any events (such as movie nights, fairs, parades, etc.) conducted or completed during the past 6 months that was coordinated through Rooted in Relationships. If you did not hold any events, please leave blank.

|  |  |  |  |
| --- | --- | --- | --- |
| **Events related to Social and Emotional Development** | | | |
| Date(s) | Event Topic/Description | # in attendance | Audience (Parent, Professional, etc.) |
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Provide a summary of each event offered in the following space. Please include a summary of your training evaluation data, when available.

## Community Work Plan Updates

In the following section, please identify your work plan objectives and then describe your recent challenges, successes and next steps for each of the objectives identified in your work plan. If your community has more than three objectives, you can copy and paste below.

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| **Objective 1:** |
| Accomplishments |
|  |
| Challenges |
|  |
| Next Steps |
|  |

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| **Objective 2:** |
| Accomplishments |
|  |
| Challenges |
|  |
| Next Steps |
|  |

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| --- |
| **Objective 3:** |
| Accomplishments |
|  |
| Challenges |
|  |
| Next Steps |
|  |