



Alabama Safe Sleep Outreach Project Activity Tracking Form

Public reporting burden for this collection of information is estimated to average up to 30 minutes, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. An agency may not conduct or sponsor, and a person is not required to respond to, a collection of information unless it displays a currently valid OMB control number. Send comments regarding this burden estimate or any other aspect of this collection of information, including suggestions for reducing this burden, to: NIH, Project Clearance Branch, 6705 Rockledge Drive, MSC 7974, Bethesda, MD 20892-7974, ATTN: PRA (0925-0701). Do not return the completed form to this address.

Organization:	
Date of Report: (Month/Day/Year)	
Contact Person:	
Telephone:	
Email:	
Address:	

1. **What geographic area did the project activity serve? (include county and ZIP code for each area)**
2. **Please describe all of the SIDS/safe infant sleep outreach activities that you conducted during this grant cycle (January 9, 2017, through July 31, 2017). Be as specific as possible. Please use additional pages if needed.**
 - **Total Number of Events:**
 - **Total Number of Participants Who Attended Events:**

All Activity Tracking Forms must be turned in at the Closing Meeting on August 4, 2017.

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3. Which safe infant sleep messages were the hardest for training participants to understand? Please explain.
4. What parts of this project worked well and would you do again to make your outreach successful? Please explain.
5. Do you feel you have the information and resources you need to raise awareness about ways to reduce the risk of SIDS and to promote safe infant sleep in your community?
- Yes
- No

If no, what types of information or resources would be most helpful to you?

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6. With 1 being not at all helpful and 5 being very helpful, check a box to describe how helpful you felt the following materials were in your outreach work.

a. Promotion materials (such as flyer template, sample social media posts, sample advertisement)

1 Not at all helpful	2	3	4	5 Very helpful
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

b. Educational presentations

1 Not at all helpful	2	3	4	5 Very helpful
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

c. Event planning materials (such as tips and tricks handout, planning checklist)

1 Not at all helpful	2	3	4	5 Very helpful
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

d. Educational materials (such as educational flipbook, safe sleep brochure, one-page handout)

1 Not at all helpful	2	3	4	5 Very helpful
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

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