

D/HH Adult Involvement Evaluation Tool Cross-Walk

Name of Tool: _____

Program name/ Author & Publisher: _____

Name of Reviewer: _____

Child Age Range: (All, B-3, school age): _____

Type of Tool: (Parent self-report; provider observation, other):

Family Outcome	Item #'s	Comments
• Increased knowledge re: resources		
• Increased knowledge about rights/self advocacy		
• Increased knowledge re: D/HH culture		
• Increased awareness of everyday life for D/HH person		
• Increased competence in nurturing child's development		
• Reduced stress re: child's future & caregiving		
• Greater social supports		
Increased competence in sign lang. (if chosen)		
• Satisfaction with provider and program services		
• Other (describe below)		

(see back re: Child Outcomes)

Child Outcome	Item #'s	Comments
Greater inclusion in family & community activities		
Increased communication skills		
Increase overall development		
Increased social skills		
Increased self esteem		
Increased sense of belonging		
Other		

SAMPLE