

# PEAK 2.0 Mentor Home Point Guidelines

<b>Mentor Home Activities completed with PEAK homes</b>	<b>Points earned for 1 to 4 hours</b>	<b>Points earned for more than 4 hours</b>
One Day Experience	100	200
Facility Tours	100	200
Forming or participating in a Mentor Home Alliance	50	100
Onsite Presentations on PCC	50	100
Offsite Presentations on PCC	50	100
Facilitation of PEAK Workgroups	50	100
PEAK Resource Development Projects	50	100
Peer Group Meetings	50	100
<b>Mentor Home Activities not associated with PEAK homes</b>	<b>Points earned for 1 to 4 hours</b>	<b>Points earned for more than 4 hours</b>
In-Person community and consumer training	25	50
Authoring articles for the benefit of the community. (EX: letters to the editor, newspaper, civic organization)	25	50
<b>Ongoing Mentor Activities</b>	<b>Points earned per activity</b>	<b>Points earned per activity</b>
Serve on boards	100 (per person, per board)	100 (per person, per board)
Hosting Clinicals	100 (per completed course)	100 (per completed course)
Hosting Interns	100 (per student, per semester)	100 (per student, per semester)

**Note: This is not an exclusive list. Please List any other activities you have engaged in that help further person centered care.**



**This electronic log must be turned into the PEAK 2.0 team (ksucoa@gmail.com) by March 30th of the PEAK year. The points should be recorded and calculated from April 1st—March 30th of the PEAK year. Any combination of Mentor Home Activities totaling 1000 points must be completed each PEAK year in order to comply with KDADS requirements.**

# PEAK 2.0 Mentor Home Point Log

Facility Name	
---------------	--

EX

Activity Completed	Date	Points Earned	Home(s) Worked With, Board/Clinical/Intern	Cumulative pts Earned	Other Details
Onsite Presentation	5/12/14	5 hours 100 pts	Meadow Valley Shady Oaks	100	Presented on liberalized di- ets



# PEAK 2.0 Mentor Home Point Log

Facility Name	
---------------	--

Activity Completed	Date	Points Earned	Home(s) Worked With, Board/Clinical/Intern	Cumulative pts Earned	Other Details



# PEAK 2.0 Mentor Home Point Log

Facility Name	
---------------	--

Activity Completed	Date	Points Earned	Home(s) Worked With, Board/Clinical/Intern	Cumulative pts Earned	Other Details

**Note: This is not an exclusive list. Below please List any other activities you have engaged in that help further person centered care.**

---



---



---

