Building Strength through Coping

Observer Fidelity Checklist

Session One: Introduction and Measurements

Facilitator Name : _____ Date: _____

Pre-Session Activities

	No	Some	Yes
1. Facilitator arrived 15 minutes prior to start of session	No	Some	Yes
Comments:			
2. Facilitator had all the materials for this session	No	Some	Yes
Comments:			
3. Facilitator was friendly and greeted the parents	No	Some	Yes
Comments:			
4. Facilitator took attendance	No	Some	Yes
Comments:			
5. Facilitator made sure parents had a name tag	No	Some	Yes
Comments:			

Introduction **Time for Activity: 3 minutes** **Time Started:**

Did Facilitator do the following:

No Some Yes

1. Introduced self and role with the project No Some Yes
   Comments:

Content
Deleted Changed Added

Icebreaker **Time for Activity: 7 minutes** **Time Started:**

Did Facilitator do the following:

No Some Yes

1. Started with holiday example of his/her own No Some Yes

   Comments:

Content:
Deleted Changed Added

2. Talked about family holidays No Some Yes

   Comments:

Content
Deleted Changed Added

Objectives **Time for Activity: 2 minutes** **Time Started:**

Did Facilitator do the following:

No Some Yes

1. Briefly stated the overall program objectives No Some Yes

   Comments:

Content:
Deleted Changed Added

Consent Form Explanation (If Applicable) **Time for Activity: 10 minutes** **Time Started:**

Did Facilitator do the following:

No Some Yes

1. Reviewed and explained consent form No Some Yes Not Applicable

   Comments:

   Content
   Deleted Changed Added

Assessments Time for Activity: 30 minutes **Time Started:**

Did Facilitator do the following:

No Some Yes

1. Introduced assessments and offered help No Some Yes

   Comments:

   Content
   Deleted Changed Added

2. Identified parents who may need help No Some Yes

   Comments

   Content
   Deleted Changed Added

3. Reviewed first assessment form in large group No Some Yes

   Comments:

   Content
   Deleted Changed Added

Closing/Snacks	**Time for Activity: 10 minutes**	**Time Started:**

Did the Facilitator do the following:

No Some Yes

1. Reminded of next week's session, time, place — No Some Yes

   Comments:

   Content
   Deleted Changed Added

2. Gave overview of next week's objectives — No Some Yes

   Comments:

   Content
   Deleted Changed Added

3. Reviewed parents' contact information — No Some Yes

   Comments

   Content
   Deleted Changed Added

4. Asked if okay with being contacted to remind of next week's session — No Some Yes

   Comments:

   Content
   Deleted Changed Added

5. Invited them to take snacks on way out — No Changed Added

   Comments:

   Content:
   Deleted Changed Added

What went well in this session:

Was there anything unusual in the session?

General Notes: