

DIRECT OBSERVATION: FIDELITY CHECK

Name: _____ Program site: _____

Date of observation: _____ Start time: _____ End time: _____

Name and Title of the observer: _____

This tool should be utilized to directly observe staff for quality assurance. This tool should match a person's plan and verify that direct support professionals that are implementing plans are following all strategies/methods developed within a functional behavioral assessment, positive support transition plan, positive behavior support plan, etc.

<u>Affect level/Phase:</u>	<u>Interventions described in person's plan:</u>	<u>Was intervention observed?</u>	<u>If Yes, was intervention effective?</u>
Calm/Ideal		<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No
		<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No
		<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No
		<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No
		<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No
Triggers		<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No
		<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No
		<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No
		<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No
		<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No
Escalation		<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No
		<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No
		<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No
		<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No
		<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No
Crisis		<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No
		<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No
		<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No
		<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No
		<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No
Recovery		<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No
		<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No
		<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No
		<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No
		<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No

Describe any discrepancies between person's plan and staff interventions and corrective action plan if necessary.

Post Intervention Fidelity Checklist:

<u>Questions (use as needed):</u>	<u>DSP Response:</u>	<u>Training needed/guidance given:</u>
What intervention was used from plan?		
What tools from the Calm/Ideal stage were used to keep the person in this stage?		
Describe the trigger/antecedents the person displayed?		
What methods did you use to support the person?		
What methods did you use to support the person as they were escalating?		
What methods did you use during the crisis situation?		
What methods did you use to assist the person to recover?		

DSP Understanding of PSTP: Fidelity Checklist:

<u>Questions (use as needed):</u>	<u>DSP Response:</u>	<u>Training needed/given during conversation:</u>
What target interventions can be utilized? If says EUMR, according to our agency policy and procedures what should you be using? Demonstrate how to? (this is because I think as a supervisor it's so important to know that a staff knows how to do an escort, etc. not just tell me what they should be doing?)		
What are the positive support strategies listed in the PSTP?		
What's your understanding of how to implement each positive support strategy?		
What are the Target Behaviors being targeted for elimination?		
How do these Target Behaviors affect the person's quality of life?		
What does the Calm/Ideal stage look like for the person?		
What methods can you use to assist the person to stay in this stage?		
What are Triggers the person may show?		

What are methods you can do to support the person to avoid or cope with these triggers?		
What is the person's affect/behavior when escalated?		
How can you best support the person when escalated?		
What does crisis stage look like?		
What interventions can you use when person is in crisis stage?		
What does it look like when the person is coming out of the behavior/Recovery stage?		
How can you support the person to continue to recover?		
What are the Quality of Life Indicators in the plan?		
What are ways listed that we can support the person to support their quality of life?		