

Fidelity In Practice for Mentor Coaching

Description

The *Fidelity in Practice – Mentor Coaching (FIP-MC)* is an observation guide for Early Intervention Fidelity Coaches (EIFC) to use when observing mentor coaching. The tool was developed using an evidence-based framework for coaching adults in professional settings (Rush & Shelden, 2006, 2019; Wilson & Dunst, 2006). The Tool contains two checklists, the *Coaching Practices Checklist* and the *Relational Helpgiving Practices Checklist*. Each checklist was streamlined to include the fewest number of items without duplicating constructs from each of the other checklists (e.g., participatory helpgiving items covered by coaching practices were removed from the Family-Centered Practices Checklist). The checklists contained within the *FIP-MC*, therefore, should not be considered all-inclusive, but representative of key indicators that when present indicate fidelity to a coaching interaction style and effective relational helpgiving behaviors. Each checklist includes 5-10 individual indicators that describe key aspects of each evidence-based practice area.

Although each checklist can be used individually, it is recommended that they be used together for a complete picture of professional helpgiving practices. The Coaching Practices checklist describes an evidence-based framework for implementing participatory helpgiving practices while the Relational Helpgiving Practices checklist describes evidence-based relational helpgiving practices. The *FIP-MC* can be used to help a mentor coach learn and master the key characteristics of evidence-based coaching practices.

The checklists can be used for a number of different purposes.

- Early Intervention Fidelity Coaches can use the checklists as an observational tool for determining the extent to which a mentor coach implements evidence-based helpgiving practices while coaching an early intervention caregiver coach.
- A mentor coach can use the checklists to conduct a self-assessment of his/her own practices. A self-assessment could be accompanied by reflection on the practices with a peer mentor coach or EIFC.
- The checklists can be used for program evaluation to determine the extent to which all mentor coaches within an organization are implementing evidence-based coaching supports when supporting the fidelity of early intervention Mentor coaches.
- Programs can use the checklists to track and ensure mentor coaches are using effective helpgiving practices across mentor coach characteristics, environmental circumstances, and diverse situations.

Early Intervention Fidelity Coaches should expect that mentor coaches have expertise in natural learning environment practices, a coaching interaction style, and family-centered practices.

Directions

Each program or professional should determine the frequency with which observations/self-assessments should be conducted. When used as an observation tool, the observer should:

- Plan with the mentor coach prior to the observation so the EIFC knows how the mentor coach intends to focus the conversation. The observer prompts reflection and provides feedback to ensure the mentor coach has a specific and sound plan.
- Complete the identifying information at the top of each scale to be used. Check each item that characterizes the observation.
- Be familiar with the checklists and the description of each indicator (pp. 7-9).
- Observe for the entire interaction between the mentor coach and caregiver coach.
- Take detailed notes during the observation. Many of the indicators can only be scored when the observer considers the observation in its entirety. One brief or partial interaction may not provide enough evidence to demonstrate the mentor coach's consistent use of an indicator.
- Use notes from the observation to score each of the indicators on the relevant checklists after the interaction. The observer selects "observed" when the mentor coach demonstrates an indicator consistent with the description (pp. 6-8). The observer selects "not observed" when the practice described in the indicator was not observed regardless of whether the opportunity to demonstrate the indicator presented or the indicator was inconsistently or inaccurately attempted.
- Include a note as to how the mentor coach demonstrated the practice for each indicator present.
- Refer to the *FIP-MC* Descriptions (pp. 7-9) for guidance.

When used as a self-assessment tool, the mentor coach should:

- Complete the identifying information at the top of each scale to be used. Check each item that characterizes the observation.
- Be familiar with the checklists and the description of each indicator (pp. 7-9).
- Score each of the indicators on the relevant checklists after the interaction. The mentor coach selects "observed" when the mentor coach demonstrates an indicator consistent with the description (pp. 7-9). The mentor coach selects "not observed" when the practice described in the indicator was not observed regardless of whether the opportunity to demonstrate the indicator presented or the indicator was inconsistently or inaccurately attempted.
- Include a notes as to how he/she demonstrated the practice for each indicator present or how he/she could have demonstrated the practice for each indicator present.
- Refer to the *FIP-MC* Descriptions (pp. 7-9) for guidance.

Terms Used in the FIP-MC

Between-Visit Plan—The plan the coach and coachee make for what will be practiced/accomplished between conversations.

Caregiver Coach—An early intervention coach (therapist, teacher, nurse, service coordinator, evaluator, etc.) who uses a coaching interaction style to provide early intervention services and supports.

Coachee—The person being coached. Mentor coaches are the coachee when coached by an EIFC. Caregiver coaches are the coachee when coached by the mentor coach.

Debrief—A conversation that takes place between the coach and coachee after an observation, where the coach prompts the coachee to reflect on his/her practices and develop a plan for continuous improvement.

Family-Centered Practices (FCP)—The beliefs and practices used by early interventionists that treat families with dignity and respect characterized by individualized, flexible, and responsive practices; information sharing so that families can make informed decisions; family choice regarding interventions; parent-professional collaboration and partnership, and the provision and mobilization of resources and supports necessary for families to care for their children in ways that produce optimal child, parent, and family outcomes (Dunst, 1995; Dunst, 2002; Dunst & Espe-Sherwindt, 2016).

Feedback—Information shared by the coach, based on an observation of the coachee, actions reported by the coachee, or information shared by the coachee. Types include affirmative, directive, evaluative, and informative (Rush & Shelden, 2011, pp. 70-71).

Fidelity—Adherence to both the proper execution of specific practices and the effective coordination of all the practices as they are intended to be combined (Fixsen, Naoom, Blase, Friedman, & Wallace, 2005).

Fidelity Coach—An advanced level coach who has been certified to support mentor coaches and caregiver coaches with the implementation of a coaching interaction style, natural learning environment practices, resource-based practices, and other evidence-based practices in the field of early intervention.

Hopeful Modeling—When a mentor coach demonstrates a skill or strategy for a caregiver coach without explicitly drawing the caregiver coach's attention to the demonstration and without providing the caregiver coach an opportunity to reflect on or practice what was demonstrated. The mentor coach demonstrates with the "hope" the caregiver coach is watching and will be able and willing to replicate the action (Rush & Shelden, 2011, p. 61).

Information—In these checklists, the term refers specifically to the sharing of accurate and evidence-based information (informative feedback).

Intentional Modeling—The mentor coach models a skill or strategy for the caregiver coach using specific steps that include (1) explaining what will be modeled and why or, in the case of a sudden time-limited opportunity to model, describing what is being modeled; (2) ensuring the caregiver coach is observing (i.e., by prompting, getting the caregiver coach's attention, giving the caregiver coach a job, etc.); (3) modeling a strategy or a skill; (4) prompting the caregiver coach to reflect on the model; (5) inviting the caregiver coach to try; (6) prompting the caregiver coach to reflect on his/her attempt; and (7) prompting the caregiver coach to plan how the parent will do it when the coach is not present (Rush & Shelden, 2011, pp. 62-63).

Mentor Coach (a.k.a. master coach)—A trained (NLEP, RBIP, FCP, coaching interaction style) coach who provides support to a caregiver coach.

Next-Visit Plan—The plan the coach and the coachee make together for what they will focus on during the next conversation.

Natural Learning Environment Practices (NLEP)— Practices that support parents and other care providers of children with disabilities in understanding the critical role of and using everyday activity settings and child interests as the foundation of children's learning opportunities (Dunst, Bruder, Trivette, & Hamby, 2006; Dunst, Bruder, Trivette, Raab, & McLean, 2001).

On-the-Spot Support—Modeling, observation, and/or reflection prompting provided by the coach **during** a visit.

Reflective Questioning— Methods of providing the coachee opportunities to analyze knowledge, skills or strategies, to generate alternatives when desired, and develop action plans to improve knowledge and skills. Examples include awareness, analysis, alternatives, and action questions (See Rush & Shelden, 2011 pp. 66-67 for detailed descriptions).

Resource-Based Intervention Practices (RBIP)— Practices that include a set of strategies used by early intervention providers focused on the provision and mobilization of resources in order to achieve family outcomes (Dunst, Trivette, & Deal, 1994; Mott, 2005).

Self-Attribution—Coachee self-reflects on and acknowledges the effectiveness of his/her own capabilities (Wilson, Holbert & Sexton, 2006, p.6).

Planning for an Observation

Prior to the observation, the EIFC and the mentor coach should plan (Shelden & Rush, 2013). The joint planning should focus on the role of the mentor coach during the visit and the supports the mentor may need from the observer before and during the visit.

The focus of the joint planning should be to ensure the mentor coach has assessed the practices (either through an observation or coaching log analysis) of the early intervention mentor coach he/she is coaching and has prioritized areas for continuous improvement on which the EIFC can coach the mentor coach. The EIFC can use the guidance below to support the mentor coach through the pre-observation planning process.

Joint Planning Questions	Guidance and Prompts
What was your previous joint plan?	The observer should listen for an indication that there was a previous plan for continuous improvement with the use of a coaching interaction style and/or relational helpgiving practices and that the mentor coach has been practicing the plan. If the above characteristics are not evident, the observer should ask more probing questions, such as: • What opportunities have you had to practice coaching and relational helpgiving practices since we last met? • How has your practice changed your competence and confidence? • What was your previous plan with this coachee?
What do you plan to focus on with the mentor coach?	Listen for evidence that the mentor coach has assessed the caregiver coach's coaching practices as well as the caregiver coach's use of natural learning environment practices and/or resource-based practices, and has identified areas for coaching. If the mentor coach does not appear to have assessed the caregiver coach and/or identified areas for coaching, consider using additional probes, such as: • How did you decide what the focus of the conversation should be? • What do you think the caregiver coach knows and doesn't know about NLEP/RBIP? • What are the caregiver coach's strengths and weakness with use of a coaching interaction style? • What do you think you need to accomplish with this conversation?
How will you help the mentor coach reflect on those things?	Listen for evidence that the mentor coach has a plan for prompting caregiver coach reflection around the areas of focus and has ideas for what informative feedback may be appropriate to share. If the mentor coach does not seem to have a plan, the observer should ask more probing questions, such as: • How are you planning to begin the conversation? • What questions will you use to prompt reflection? • How will you know what feedback the caregiver coach needs? • What tools will you use to support increasing the caregiver coach's knowledge and reflection?
What challenges do you think you might have during the conversation?	Listen for a detailed description of potential challenges that match your knowledge of the mentor coach's strengths and weaknesses. If the mentor coach does not describe potential challenges or omits known challenges, the coach should ask more probing questions, such as: • What challenges have you had in the past? • What will you do if...?
What kind of support do you want from me prior to the conversation?	Listen for a detailed description of the circumstances that would prompt intervention and the type of intervention needed for each circumstance. If the mentor coach's request is not sufficiently detailed, the observer should ask more probing questions, such as: • What else do we need to talk about prior to the observation? • How do you want me to focus my observation? • What would you like me to do if...? • How else would you like me to support you during this visit?
When do you have time to debrief the observation?	Listen for a time of day and a length of time appropriate for debriefing the visit. Typical debriefing meetings take between 15 and 30 minutes and should occur on the same day or within a few days of the observation.

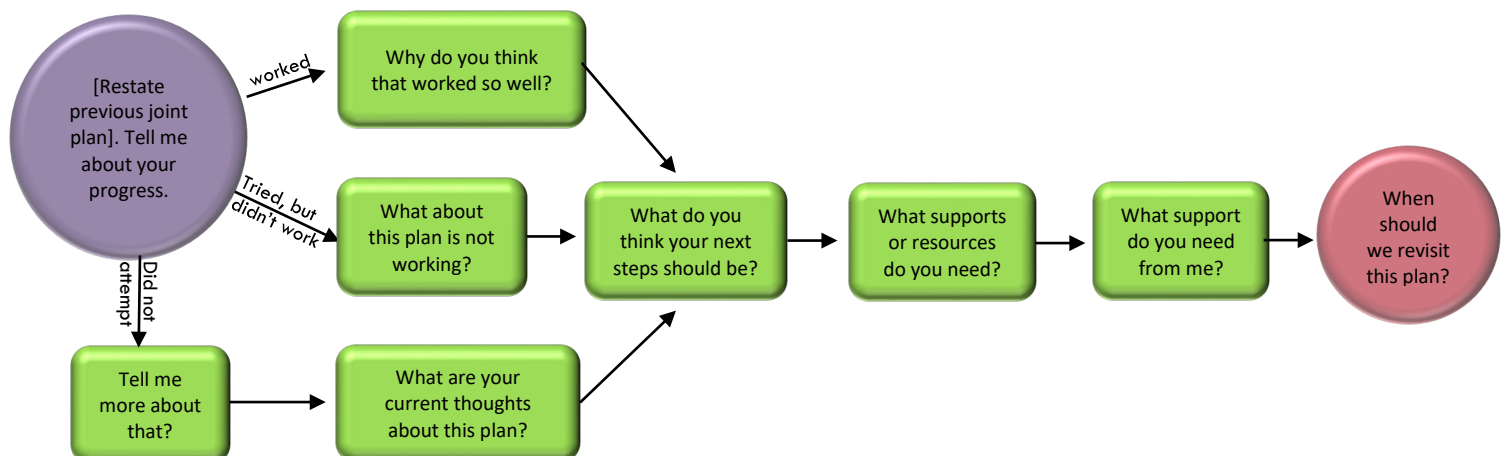
Debriefing the Observation

Every observation should be debriefed by the EIFC and mentor coach, preferably on the same or next day. The debriefing conversation is an opportunity for the mentor coach to reflect on his/her experiences during the conversation, learn more about the use of coaching in the context of supporting a caregiver coach, and talk with the observer about the intensity and helpfulness of his/her supports. During the debriefing, the observer should gather information about the mentor coach's understanding of and use of evidence-based coaching to support caregiver coach's and partner with the mentor coach to develop a plan for continued improvement. The EIFC can use the following questions to guide the conversation:

How did that conversation match your plan?	Listen for the mentor coach to describe elements of the planned conversation and an analysis of the actual conversation. If the mentor coach does not discuss the plan, or does not compare and contrast the plan to the actual conversation, the observer should ask more probing questions, such as: - What parts of the conversation do you think were a match with the plan you had during our joint planning conversation? - What parts of the visit deviated from your plan? How did you choose to do that? The observer may choose to provide feedback (additional information or his/her own feedback about the visit) after the mentor coach reflects.
What was your role in impacting that?	Listen for the mentor coach to attribute successes and challenges to his/her role during the visit. If the mentor coach does not self-attribute, the coach should ask more probing questions, such as: - What did you do to make that happen? - What was your contribution to the caregiver coach's learning?
What else do you think you could have done to...(highlight an area the mentor coach mentioned)?	Listen for multiple alternative ideas from the mentor coach. If the mentor coach is unable to describe an alternative idea, the observer should provide a prompt, such as: - What evidence-based strategies have you seen other caregiver coaches use? - What information does the literature/tools/policies provide that could help you develop some ideas for supporting a caregiver coach's use of the target practices? After the mentor coach has an opportunity to reflect, the observer may choose to provide additional ideas for the mentor coach to consider, show the mentor coach where he/she can find additional information/resources, or affirm the mentor coach's ideas.
How would those ideas have changed the outcome of the visit?	Listen for the mentor coach's analysis of the ideas. If the mentor coach does not analyze the ideas, the observer should provide more probing questions, such as: - How would you use that idea if the same thing were to happen next time? - What do you think the caregiver coach's response would be? - How would you respond to the caregiver coach? After the mentor coach has an opportunity to reflect, the observer may choose to provide additional information, affirmation, or provide the mentor coach with an opportunity to role play his/her ideas.
What will you do between conversations or during the next conversation to improve the outcome?	Listen for specific strategies (beyond the mentor coach's support of this specific caregiver coach) the mentor coach will use to support the mentor coach's increased knowledge, skills, and/or self-attribution. - By when? - What additional supports do you need?

Developing a Continuous Improvement Plan

Every mentor coach should have a continuous improvement plan to guide the mentor coach's ongoing professional development and use of evidence-based practices. The continuous improvement plan is often developed or revised at the end of debriefing an observation visit. The continuous improvement plan includes specific steps the mentor coach will take to increase his/her knowledge, skills, and use of coaching practices. The back of each observation checklist includes a place to document the mentor coach's agreed upon plan for continuous improvement. Both the observer and the mentor coach are responsible for monitoring the continuous improvement plan each time they discuss a new observation. The observer can use the following *Roadmap for Reflection* to guide the development/revision of the continuous improvement plan.



Helpful Hints

Early intervention fidelity coaches who have used the FIP-MC recommend the following helpful hints. The observer should:

- Take notes during the observation. Focus on transcribing what the mentor coach says and does, with a few notes about what the caregiver coach being coached shared. The detailed notes about the mentor coach will help you gather the evidence needed to support a rating for each indicator.
- Debrief with the mentor coach as soon after the observation as possible to ensure both the observer and mentor coach have a working memory of the interaction and that mentor coach has a timely opportunity to make a plan for continuous improvement.
- Ask the mentor coach to complete the scales on him/herself to increase self-reflection and promote development of more detailed action/improvement plans.
- Consider that some mentor coaches, depending on their learning style, may benefit from video or audio-recording the interaction for their own reflection.
- Keep in mind that a single interaction during a visit may be used to indicate the presence of multiple indicators on one or more checklists.
- Explain to the mentor coach that all indicators may not be present during every interaction. A “no” rating simply means the indicator was not observed regardless of whether or not the indicator should have been present given the context and circumstances of the conversation.
- Consider sitting down with the mentor coach and determining the rating together.
- Consider having the mentor coach use a coaching log to analyze the conversation for additional support.
- The guidance for each indicator describes the minimum standard for implementing the indicator to achieve intended outcomes. Fidelity coaches should help mentor coaches practice exceeding the standards.

References

- Dunst, C. J. (1995). Key characteristics and features of community-based family support programs. Chicago: Family Resource Coalition.
- Dunst, C. J. (2002). Family-centered practices: Birth through high school. *Journal of Special Education*, 36(3), 139-147.
- Dunst C.J., Espe-Sherwindt M. (2016) Family-Centered Practices in Early Childhood Intervention. In: Reichow B., Boyd B., Barton E., Odom S. (eds) *Handbook of Early Childhood Special Education*. Springer, Cham
- Dunst, C. J., Bruder, M. B., Trivette, C. M., & Hamby, D. W. (2006). Everyday activity settings, natural learning environments, and early intervention practices. *Journal of Policy and Practice in Intellectual Disabilities*, 3, 3-10.
- Dunst, C. J., Bruder, M. B., Trivette, C. M., Raab, M., & McLean, M. (2001). Natural learning opportunities for infants, toddlers, and preschoolers. *Young Exceptional Children*, 4(3), 18-25.
- Dunst, C. J., Trivette, C. M. & Deal, A.G. (1994). Supporting and strengthening families: Methods strategies and practices. Brookline, MA: Brookline Books.
- Fixsen, D. L., Naoom, S. F., Blase, K. A., Friedman, R. M. & Wallace, F. (2005). Implementation research: A synthesis of the literature. Tampa, FL: University of South Florida, Louis de la Parte Florida Mental Health Institute, The National Implementation Research Network (FMHI Publication #231).
- Mott, D. W. (2005). Conceptual and empirical foundations of resource-based intervention practices. *CASEinPoint*, 1(5), 1-6.
- Rush D. & Shelden, M. (2006). Coaching practices rating scale for assessing adherence to evidence-based early childhood intervention practices. *CASEtools* 2(2), 1-7. Available at http://fipp.org/static/media/uploads/casetools/casetools_vol2_no2.pdf.
- Rush & Shelden (2011). *The early childhood coaching handbook*. Baltimore, MD: Paul. H. Brookes.
- Shelden & Rush (2013). *The early intervention teaming handbook: The primary service provider approach*. Baltimore, MD: Paul. H. Brookes.
- Wilson, Holbert, & Sexton (2006). A capacity-building approach to parenting education. *CASEinPoint* 2(7). Available at http://fipp.org/static/media/uploads/caseinpoint/caseinpoint_vol2_no7.pdf.

Indicator Descriptions

Coaching Practices Checklist

	Select “Observed” when the practices look like this:	Select “Not Observed During the Visit” when the practices look like this:
1 Mentor coach engages the coachee in a discussion of the between meeting plan (if a previous conversation occurred).	Mentor coach and caregiver coach review the previous plan by asking questions such as, “You were planning to ... how well did that go?” They discuss in enough detail to identify what worked (e.g., What worked?), barriers to implementing the plan (e.g., Why do you think that happened?) and/or determining modifications needed in the plan (i.e., what would make it work better?), or create a new plan to achieve the desired outcomes.	Mentor coach does not engage caregiver coach in conversation about the previous joint plan OR only tells the caregiver coach what their plan was. OR It appears that no previous joint plan was developed. OR Mentor coach and caregiver coach discuss the previous plan, but don’t follow up on the effectiveness of the plan AND/OR discuss modifications needed in the plan to achieve desired outcomes.
2 Mentor coach discovers evidence that the coachee acted on the plan between meetings.	Mentor coach recognizes that the caregiver coach completed part or all of the previous plan between meetings. OR Mentor coach learns that the caregiver coach revised the plan and completed part or all of the revised plan.	Mentor coach does not engage the caregiver coach in a discussion of the previous joint plan. OR Mentor coach discovers caregiver coach did not implement plan or does not remember plan and the mentor coach does not engage in a follow-up discussion about it.
3 Mentor coach and caregiver coach create an opportunity for the caregiver coach to practice a specific strategy or characteristic of practice (i.e. NLEP, RBIP, FCP, Coaching, discipline-specific evidence-based practice).	Mentor coach creates an opportunity for the caregiver coach to role play a scenario the caregiver coach is interested in practicing during a coaching conversation. OR Mentor coach and caregiver coach plan for an observation of the caregiver coach to demonstrate a specific strategy or practice during a real-life visit. OR Mentor coach demonstrates a coaching interaction for the caregiver coach to analyze and try and invites the caregiver coach to try it (either during a coaching conversation or a real-life visit).	Mentor coach and caregiver coach did not create a plan for the coach to observe the caregiver coach demonstrate a specific strategy or practice characteristic. OR Mentor coach lacks flexibility to capitalize on serendipitous opportunities created when the caregiver coach asks for what a specific coaching interaction should look like. OR Mentor coach models for the caregiver coach, but does not provide an opportunity for the caregiver coach to analyze and try. OR Mentor coach demonstrates non-evidence-based practice or misrepresents coaching
4 Mentor coach promotes the coachee’s reflection on the knowledge, abilities, and actions related to the skills or outcomes desired and evidence-based practice standards.	Mentor coach promotes reflection using a variety of open-ended questions including awareness, analysis, alternatives, and action questions. AND Mentor coach prompts caregiver coach’s reflection after informative feedback is shared (if informative feedback is used) (i.e., “What are your thoughts about that?”) AND Mentor coach uses “yes/no” questions intentionally to avoid assumptions and/or ask for permission. AND Mentor coach asks questions in a conversational manner that evolves the caregiver coach’s level of understanding and/or skill to build the caregiver coach’s capacity to develop a new plan of action.	Mentor coach uses too many “yes/no” questions (more than 20% of the total questions asked) that do not ask permission or avoid assumptions or the number of “yes/no” questions limits the caregiver coach’s ability to analyze, consider alternatives, and/or develop his/her own plan. OR Mentor coach asks mostly awareness questions with very few, if any, other types of questions. OR Mentor coach asks questions in a way that disrupts the flow of progress of the conversation (i.e., asking too many questions, jumping topics, asking questions unrelated to the caregiver coach’s priority). • More than 50% of the questions were awareness. • Less than 25% of the questions were analysis. • Less than 5% of the questions were alternatives. • Less than 5% of the questions were action.

Coaching Practices Checklist

	Select “Observed” when the practices look like this:	Select “Not Observed During the Visit” when the practices look like this:
5 Mentor coach provides feedback to the coachee in a way that builds coachee’s knowledge and understanding.	Mentor coach provides a variety of types of feedback, (except directive feedback). AND Mentor coach uses accurate informative feedback only after the mentor coach provides an opportunity for the caregiver coach to reflect (if informative feedback is used). For example, the mentor coach asks, “What do you already know about...” and provides information that builds on the caregiver coach’s preexisting knowledge. Mentor coach checks for caregiver coach understanding after providing informative feedback (i.e., What are your thoughts about that? or How does that match your understanding?) AND Mentor coach matches the context and the amount of feedback to the caregiver coach’s expressed needs and responses.	Mentor coach does not provide any feedback. OR Mentor coach uses any amount of directive feedback. OR Mentor coach uses an overabundance of or a lack of informative feedback (e.g., caregiver coach looks disengaged, disinterested, overwhelmed, or confused). OR Mentor coach provides inaccurate informative feedback OR Mentor coach gives informative feedback prior to prompting caregiver coach reflection. OR Mentor coach primarily uses evaluative feedback.
6 Mentor coach promotes the coachee’s self-attribution for using effective early intervention practices.	Mentor coach asks caregiver coach to reflect on the role he/she had in attaining a positive outcome (e.g., What did you do to support your learner’s outcome?) OR Mentor coach makes an observation about a positive outcome and asks the caregiver coach to reflect on his/her role (e.g., “How did you support that to happen?”). OR Mentor coach capitalizes on the caregiver coach’s serendipitous self-attribution and asks the caregiver coach to elaborate (e.g., “How did you know to do that?”).	Mentor coach tells the caregiver coach what his/her role was in attaining a positive outcome with the learner. OR Mentor coach elaborates on caregiver coach’s self-attribution without prompting the caregiver coach to reflect additionally. OR Mentor coach does not ask the caregiver coach to reflect on his/her role in promoting a positive outcome at all.
7 Mentor coach engages the coachee in developing a new plan between meeting plan.	Mentor coach uses action questions to help the caregiver coach develop a new joint plan for supporting the use of coaching, NLEP, RBIP, or FCP by other coaches. AND Mentor coach ensures the caregiver coach develops a plan that includes the resources that will be used by the caregiver coach, how often, in what context(s), and what the follow-up will be.	Mentor coach does not help the caregiver coach make a plan. OR Mentor coach develops the plan for the caregiver coach. OR Mentor coach and caregiver coach do not develop a joint plan with enough specificity for the mentor coach to be able to act on the plan between conversations (i.e., resources needed, how often practice will occur and in what context(s), and what the follow-up will be).

Adapted from: Rush D. & Shelden, M. (2006). Coaching practices rating scale for assessing adherence to evidence-based early childhood intervention practices. CASEtools 2(2), 1-7. Available at http://fipp.org/static/media/uploads/casetools/casetools_vol2_no2.pdf.

Relational Helpgiving Practices Checklist

	Select "Observed" when the practices look like this:	Select "Not Observed During the Visit" when the practices look like this:
1 Mentor coach is conscientious in his/her work with the caregiver coach.	Mentor coach schedules the visit with the caregiver coach, is available on time, and is prepared for the conversation. AND Mentor coach listens to the caregiver coach without judgement. AND Mentor coach matches support to the caregiver coach's preferred pace of learning. AND Mentor coach uses a system of communication created in partnership with the caregiver coach that is comfortable for both parties. AND Mentor coach discovers the family coach's expectations by asking questions such as "How would you like me to communicate with you?" "What are your expectation from me?"	Mentor coach schedules conversations at his/her own convenience, tries to meet unannounced, and/or arrives unprepared. OR Mentor coach's verbal/non-verbal language demonstrates judgement of the caregiver coach. OR Mentor coach provides support based on his/her own preferred pace without regard for the caregiver coach's preferred pace. OR Mentor coach uses a communication style without regard for the caregiver coach's preference or uses no systems of communication. OR Mentor coach is unaware of/assumes the caregiver coach's expectations.
2 Mentor coach is responsive to the priorities of the caregiver coach.	Mentor coach demonstrates a warm, friendly and sociable disposition. AND Mentor coach employs active listening techniques such as: smiling, nodding, paraphrasing, and seeking clarification. AND Mentor coach promotes a mutual respect and understanding by acknowledging the caregiver coach's perspective. AND Mentor coach demonstrates compassion and empathy when the caregiver coach shares challenges and/or concerns.	Mentor coach is perceived as unfriendly, distant, and unsociable by the caregiver coach. OR Mentor coach looks disinterested, talks more than he/she listens, or makes assumptions without clarifying. OR Mentor coach is unaware of/disregards the caregiver coach's perspectives. OR Mentor coach overlooks the caregiver coach's frustrations, challenges, concerns, and provides little or no emotional support.
3 Mentor coach maintains strong professional relationships by promoting an atmosphere of mutual respect.	Mentor coach listens for/asks the caregiver coach about his/her strengths they feel will help them reach their goals. AND Mentor coach engages the caregiver coach in the teaming process. AND Mentor coach affirms and/or acknowledges the caregiver coach's observations, behaviors and ideas. AND Mentor coach prompts a discussion with the caregiver coach to evaluate the helpfulness of the relationship. AND Mentor coach ensure the caregiver coach has access to information to make informed decisions.	Mentor coach overlooks the caregiver coach's strengths or existing abilities that could help him/her reach his/her goals. OR Mentor coach makes decisions for the caregiver coach. OR Mentor coach evaluates the helpfulness of the relationship without input from the caregiver coach or does not investigate or evaluate the helpfulness of the relationship at all.
4 Mentor coach is open and adaptable to diverse situations.	Mentor coach adapts, adjusts and modifies strategies to meet the needs of the caregiver coach. AND Mentor coach maintains a calm presence in the face of disruptions and chaos. AND Mentor coach demonstrates the ability to interpret a situation through the caregiver coach perspective (e.g. "It seems like you are thinking...").	Mentor coach rigidly adheres to an agenda, despite the emerging needs of the caregiver coach. OR Mentor coach becomes flustered, agitated, or upset when the conversation does not go as planned. OR Mentor coach tells the caregiver coach what he/she is thinking about a situation without asking the caregiver coach about his/her perspective.

Relational Helpgiving Practices Checklist

	Select “Observed” when the practices look like this:	Select “Not Observed During the Visit” when the practices look like this:
5 Mentor coach exhibits a stable demeanor in all situations.	MC exhibits a calm and even-tempered manner. AND Mentor coach maintain control of his/her emotions. AND Mentor coach uses a calm voice. AND Mentor coach works toward a solution. AND Mentor coach has a positive and encouraging demeanor.	Mentor coach demonstrates demeaning or offensive verbal communication that interferes with the productivity of the conversation (e.g., yelling, cussing, using derogatory terms, or venting in the presence of the caregiver coach). OR Mentor coach demonstrates derogatory or offensive nonverbal communications (e.g. eye-rolling, rude gesturing, sighing, groaning).

Adapted from: McCrae, R. R. & Costa, P. T. (1987). Validation of the five-factor model of personality across instruments and observers. *Journal of Personality and Social Psychology*, 52, 81-90.

Notes

Notes



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