

**Appendix**

**Appendix 3. Fidelity Monitoring: Observation Check-List Tool**

**Observation and Debrief Checklist**

Image

OhioKAN Program Manual

# Appendix 3. Fidelity Monitoring: Observation Check-List Tool

**OBSERVATION AND DEBRIEF  
CHECKLIST**

ohioKAN

File

[DOWNLOAD THIS WORKSHEET](#)

Image



**OhioKAN Program Manual**  
Appendix 3. Fidelity Monitoring: Observation Check-List Tool

**Observation and Debrief Checklist**

Navigator (First & Last Name)	Coach (First & Last Name)	Cohort/Region	Month/Year	Observation Type	Type of Doc. Review
				SACWIS ID: <input type="checkbox"/> Intake/BASICS <input type="checkbox"/> Support plan dev. <input type="checkbox"/> Follow-up	SACWIS ID: <input type="checkbox"/> BASICS + Referral Binder <input type="checkbox"/> BASICS + Support Plan

Engagement	Observation		Debrief		Doc Review		Debrief		Notes
	Observed	Learning Opp.	Observed	Learning Opp.	Observed	Learning Opp.	Observed	Learning Opp.	
<b>E1. Actively listened to the family.</b> For example: - Checked for understanding - Affirmed family's strengths - Reflected observations from last conversation - Paraphrased, repeated, rephrased - Reflected feelings - Asked open ended questions	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
<b>E2. Demonstrated cultural humility during interaction with the family.</b> For example: - Acknowledged and validated family's experience with oppressive systems (when appropriate)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
<b>E3. Conveyed empathy for family's situation.</b> For example: - Perspective taking, listened without judgement, practiced mindfulness	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	

Inclusion	Observation		Debrief		Doc Review		Debrief		Notes
	Observed	Learning Opp.	Observed	Learning Opp.	Observed	Learning Opp.	Observed	Learning Opp.	
<b>I1. Asked about family's preferences regarding interaction and resources.</b> For example: - Offered accommodations based on accessibility needs. - Connected the conversation with interpretive services.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
<b>I2. Used language and phrases the family could relate to and understand in verbal and written communication.</b>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
<b>I3. Understood family's previous experience(s) with local resources and worked through that with them.</b> - Offered different ways of talking about their experience and needs.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	

Image



OhioKAN Program Manual  
Appendix 3. Fidelity Monitoring: Observation Check-List Tool

I4. Partnered with family to co-create a support plan.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
--	--------------------------	--------------------------	--------------------------	--------------------------	--------------------------	--------------------------	--------------------------	--------------------------	--------------------------

Assessment	Observation		Debrief		Doc Review		Debrief		Notes
	Observed	Learning Opp.	Observed	Learning Opp.	Observed	Learning Opp.	Observed	Learning Opp.	
A1. Asked all the BASICS questions.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
A1b. Included notes documenting family strengths, needs and wishes.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
A2. Explored resources family is already receiving.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
A3. Explored family experiences when seeking assistance.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
A3b. Asked about successes, challenges, or gaps in accessing community resources.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	

Intervention	Observation		Debrief		Doc Review		Debrief		Notes
	Observed	Learning Opp.	Observed	Learning Opp.	Observed	Learning Opp.	Observed	Learning Opp.	
V1. Referred family to resources that met their identified needs.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
V2. Referred family to resources that were consistent with the family's preferences.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
V3. Offered family additional collaborate level supports based on their needs and preferences. - Benefits coordination, hard goods, flex funds, warm handoff	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
V4. Support plan aligned with family's needs, preferences and experiences.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
V5. Contacted family according to their preferences, and as frequently as they prefer.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
V6. Identified barriers and facilitated breaking down barriers.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	

Active Learner	Observation		Debrief		Doc Review		Debrief		Notes
	Observed	Learning Opp.	Observed	Learning Opp.	Observed	Learning Opp.	Observed	Learning Opp.	
AL1. Demonstrated curiosity about family's experience.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
AL2. Considered why and how family is marginalized by systems. (Debrief Only)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	

Image



OhioKAN Program Manual  
Appendix 3. Fidelity Monitoring: Observation Check-List Tool

AL3. Considered how intervention could advance equity. (Debrief Only)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
---	--------------------------	--------------------------	--------------------------	--------------------------	--------------------------	--------------------------	--------------------------	--------------------------	--------------------------

Reflection	Observation		Debrief		Doc Review		Debrief		Notes
	Observed	Learning Opp.	Observed	Learning Opp.	Observed	Learning Opp.	Observed	Learning Opp.	
R1. Identified your own strengths, supports, biases, areas for growth, and places where you need help and support. (Debrief Only)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
R2. Considered how personal intersectional identities are similar and different than those of families you're working with. (Debrief Only)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
R3. Processed own bias, power, and privilege and considered how it is being used. (Debrief Only)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	