teach	ITEMS	SCORING	SUGGESTIONS
	The therapist does	0	
	not select a session		
	focus based on the		
	probe or selects an		
	inappropriate focus		
	(according to the		
	decision tree).		
	The therapist selects	1	
	an appropriate focus	-	
	based on the probe		
T.1 Session Focused	but does not discuss		
	the decision with the		
	caregiver.		
	Based on the probe,	2	
	the therapist	۷	
	appropriately decides		
	the session focus and		
	discusses the		
	decision with the		
	caregiver.		
	The therapist does	0	
	not review the target	U	
	_		
	strategy.	1	
	The therapist gives a	1	
	cursory review that misses one or more		
T 2 Stratogy Povious	components		
T.2 Strategy Review	(explanation,		
	rationale, and/or		
	examples).	2	
	The therapist gives a	2	
	thorough review		
	including an		
	explanation,		
	rationale, and		
	examples.		
	OR		
	If in the review		
	phase, gives rationale		
	and examples only		
T.2 Chuckasias F	The therapist does	0	
T.3. Strategies Examples	not show the		
	caregiver video clips		
	of the strategy NOR		
	does she give a		
	verbal example.		

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	The therapist shows	1	
	the caregiver a video		
	clip of the strategy		
	but does not		
	encourage the		
	caregiver to reflect		
	on what they		
	observed??.		
	The therapist shows	2	
	the caregiver a video		
	clip of the strategies		
	and encourages the		
	caregiver to reflect		
	on what they		
	observed .		
	OR		
	If the parent has		
	already seen multiple		
	clips or is in the		
	review phase, give		
	verbal examples.		
	the therapist misses	0	
	clear signs of		
	caregiver		
	misunderstanding		
	and/or confusion		
	about the strategy		
	and does not make		
	any attempt to adapt		
T.4. Caregiver Understanding	the instruction to		
1.4. Caregiver Officerstationing			
	clarify.		
	The therapist does	1	
	not do anything to		
	gauge the caregiver's		
	understanding. By		
	the end of the teach		
	portion, it is not		
	known if the		
	caregiver grasps the		
	strategy concepts.		
	The therapist gauges	2	
	the caregiver's		
	understanding and		
	adapts instruction if		
	the caregiver		
	_		
	misunderstands or		
	appears confused. By		

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	the end of the teach		
	portion, the caregiver		
	has demonstrated an		
	understanding of the		
	_		
	strategy concepts.		
	The therapist does	0	
	not discuss the plan		
	for session activities		
	with the caregiver.		
	The therapist informs	1	
	the caregiver of the	_	
	_		
T F Country Div	plan for session		
T.5 Session Plan	activities without the		
	caregiver's input.		
	The therapist jointly	2	
	plans the session		
	activities with the		
	caregiver by either		
	proposing an idea		
	and asking for input		
	or by asking the		
į .			
	caregiver for an idea		
	caregiver for an idea or preference.		
LANGUAGE MODELING	caregiver for an idea	SCORING	SUGGESTIONS
LANGUAGE MODELING	caregiver for an idea or preference.	SCORING 0	SUGGESTIONS
LANGUAGE MODELING	caregiver for an idea or preference.  ITEMS  The therapist never		SUGGESTIONS
LANGUAGE MODELING	caregiver for an idea or preference.  ITEMS  The therapist never models examples of		SUGGESTIONS
LANGUAGE MODELING	caregiver for an idea or preference.  ITEMS  The therapist never models examples of target-level		SUGGESTIONS
LANGUAGE MODELING	caregiver for an idea or preference.  ITEMS  The therapist never models examples of target-level language.	0	SUGGESTIONS
LANGUAGE MODELING	caregiver for an idea or preference.  ITEMS  The therapist never models examples of target-level language.  The therapist rarely		SUGGESTIONS
LANGUAGE MODELING	caregiver for an idea or preference.  ITEMS  The therapist never models examples of target-level language.  The therapist rarely (1-3x) models	0	SUGGESTIONS
LANGUAGE MODELING	caregiver for an idea or preference.  ITEMS  The therapist never models examples of target-level language.  The therapist rarely (1-3x) models examples of target-	0	SUGGESTIONS
LANGUAGE MODELING	caregiver for an idea or preference.  ITEMS  The therapist never models examples of target-level language.  The therapist rarely (1-3x) models examples of target-level language.	1	SUGGESTIONS
LANGUAGE MODELING	caregiver for an idea or preference.  ITEMS  The therapist never models examples of target-level language.  The therapist rarely (1-3x) models examples of target-	0	SUGGESTIONS
LANGUAGE MODELING	caregiver for an idea or preference.  ITEMS  The therapist never models examples of target-level language.  The therapist rarely (1-3x) models examples of target-level language.	1	SUGGESTIONS
LANGUAGE MODELING  1. Therapist Use of Strategies	caregiver for an idea or preference.  ITEMS  The therapist never models examples of target-level language.  The therapist rarely (1-3x) models examples of target-level language.  The therapist sometimes (4-6x)	1	SUGGESTIONS
	caregiver for an idea or preference.  ITEMS  The therapist never models examples of target-level language.  The therapist rarely (1-3x) models examples of target-level language.  The therapist sometimes (4-6x) models examples of	1	SUGGESTIONS
	caregiver for an idea or preference.  ITEMS  The therapist never models examples of target-level language.  The therapist rarely (1-3x) models examples of target-level language.  The therapist sometimes (4-6x) models examples of target-level	1	SUGGESTIONS
	caregiver for an idea or preference.  ITEMS  The therapist never models examples of target-level language.  The therapist rarely (1-3x) models examples of target-level language.  The therapist sometimes (4-6x) models examples of target-level language.	2	SUGGESTIONS
	caregiver for an idea or preference.  ITEMS  The therapist never models examples of target-level language.  The therapist rarely (1-3x) models examples of target-level language.  The therapist sometimes (4-6x) models examples of target-level language.  The therapist soften	1	SUGGESTIONS
	caregiver for an idea or preference.  ITEMS  The therapist never models examples of target-level language.  The therapist rarely (1-3x) models examples of target-level language.  The therapist sometimes (4-6x) models examples of target-level language.  The therapist of target-level language.  The therapist often (7-9x) models	2	SUGGESTIONS
	caregiver for an idea or preference.  ITEMS  The therapist never models examples of target-level language.  The therapist rarely (1-3x) models examples of target-level language.  The therapist sometimes (4-6x) models examples of target-level language.  The therapist sometimes (4-6x) models examples of target-level language.  The therapist often (7-9x) models examples of target-	2	SUGGESTIONS
	caregiver for an idea or preference.  ITEMS  The therapist never models examples of target-level language.  The therapist rarely (1-3x) models examples of target-level language.  The therapist sometimes (4-6x) models examples of target-level language.  The therapist of target-level language.  The therapist often (7-9x) models examples of target-level language.	2	SUGGESTIONS
	caregiver for an idea or preference.  ITEMS  The therapist never models examples of target-level language.  The therapist rarely (1-3x) models examples of target-level language.  The therapist sometimes (4-6x) models examples of target-level language.  The therapist sometimes (4-6x) models examples of target-level language.  The therapist often (7-9x) models examples of target-	2	SUGGESTIONS

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	examples of target- level language.		
	The therapist never highlights his/her use of target-level language.	0	
2. Therapist Narration of Strategy	The therapist rarely (1x) highlights his/her use of target-level language.	1	
	The therapist at least occasionally (≥2x) highlights his/her use of target-level language.	2	
Coach	ITEMS	SCORING	SUGGESTIONS
	The therapist's feedback is rarely or never (~0-25%) specific (i.e., nearly	0	
C.1. Specificity Of Feedback	always vague) The therapist's feedback is occasionally (~25- 75%) specific.	1	
	The therapist's feedback is often (~75-100%) specific	2	
	The therapist's feedback is often or always (~75-100%) wordy (i.e., rarely succinct)	0	
C.2. Succinctness Of Feedback	The therapist's feedback is occasionally (~25-75%) wordy.	1	
	The therapist's feedback is rarely or never (~0-25%) wordy (i.e., nearly always succinct).	2	
C.3. Pacing of Feedback	The therapist's feedback is very poorly paced. This	0	

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	includes providing feedback only at the beginning or end of the interaction.		
	The therapist's feedback is somewhat poorly paced. This includes providing feedback primarily at the beginning or end of the interaction and/or providing too infrequent feedback.	1	
	The therapist's feedback is well-paced throughout the interaction.	2	
	The therapist never explains the rationale for a strategy based on the child's behavior.	0	
C.4. Salience of feedback	The therapist rarely (1x) provides feedback about the caregiver's use of the strategy of the day.	1	
C.4. Suileffee of recubuck	The therapist at least occasionally (≥2x) provides feedback about the caregiver's use of the strategy of the day.	2	
	The therapist was unable to provide feedback about the chosen strategy.	N/A	
	The therapist never explains the rationale for a strategy based on the child's behavior.	0	
C.5. Feedback On Rationale	The therapist rarely (1x) explains the	1	

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	rationale for a strategy based on the child's behavior.		
	The therapist at least occasionally (≥2x) explains the rationale for a strategy based on the child's behavior.	2	
	The therapist never highlights the outcome of the caregiver's strategy use on the child's behavior.	0	
C.6.Feedback on The Impact Of Strategies	The therapist rarely (1x) highlights the outcome of the caregiver's strategy used on the child's behavior.	1	
	The therapist at least occasionally (≥2x) highlights the outcome of the caregiver's strategy use on the child's behavior.	2	
C.7. Constructiveness Of	The therapist provides solely positive or solely constructive feedback.	0	
Feedback	The therapist provides an inappropriate ratio of positive versus corrective feedback based on the caregiver.	1	
	The therapist provides an appropriate balance of positive and constructive	2	

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	feedback based on the caregiver.		
	A) The therapist provides significantly too little support for the caregiver. This includes not helping when the caregiver is struggling.  B) The therapist provides significantly too much support. This includes giving excessive support despite caregiver competence.	0	
C.8. Caregiver Support	A) The therapist provides somewhat too little support for the caregiver . B) The therapist provides somewhat too much support for the caregiver.	1	
	The therapist provides an appropriate amount of either physical or verbal support for the caregiver.	2	
REVIEW	ITEMS	SCORING	SUGGESTIONS
R.1. Caregiver Reflection	The therapist is dismissive of the caregiver's attempts at reflection. This may include responding negatively to the caregiver's reflection or changing the topic when the caregiver attempts to reflect.	0	
	The therapist does not encourage the caregiver's reflection.	1	

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	This includes not asking a probing		
	question or not responding to the		
	caregiver's		
	spontaneous reflection with		
	further reflective		
	feedback.		
	The therapist actively encourages the caregiver to engage in a reflective discussion. This includes probing the caregiver to reflect and/or responding to their spontaneous reflection with further reflective feedback.	2	
	A) The therapist does not discuss or provide feedback about the caregiver's use of the strategies B) The therapist's feedback is negative or condescending.	0	
R.2.Caregiver Evaluation	•The therapist discusses how the caregiver used the strategies before encouraging the caregiver's reflection. •AND/OR doesn't link	1	
	caregiver and child behavior •AND/OR feedback is only general or cursory.		
	•The therapist discusses how the caregiver used the strategies after the reflection	2	

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	<ul> <li>AND notes a connection between caregiver and child behavior.</li> <li>AND provides helpful, specific feedback.</li> </ul>		
	The therapist does not discuss ways the caregiver can use the strategies during the week.	0	
R.3. Home Carry Over	The therapist gives instructions to the caregiver about how they can use strategies throughout the week but does not discuss the caregiver	1	
	The therapist solicits the caregiver's perspectives and ideas about appropriate and helpful ways to carry over strategies throughout the week.	2	
Overall interaction	ITEMS	SCORING	SUGGESTIONS
	The therapist appears uncomfortable or standoffish. The therapist may avoid or deter the caregiver's attempts to engage in discussion.	0	
I.1. Ease Of Interaction	The therapist appears relatively at ease. While the therapist does not avoid or actively deter the caregiver's attempts to engage	1	

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	in discussion, she does not make an effort to encourage discussion or ensure that the caregiver is at ease.		
	The therapist appears at ease throughout the interaction and readily engages in discussion and conversation with the caregiver. The therapist makes efforts to ensure that the caregiver is also at ease.	2	
	The therapist often appears disinterested, cold, and/or critical.	0	
I.2. Positive Tone	The therapist's tone and effect are primarily neutral. She does not appear to especially enjoy the visit or interacting with the caregiver/child.	1	
	The therapist appears to enjoy the visit, including showing warmth and humor. The therapist smiles frequently.	2	
I.3. Respect of Family	The therapist makes one or more comments that minimize the caregiver's experiences, preferences, beliefs, or lifestyle. The therapist may make "should/shouldn't"	0	

comments regarding parenting/lifestyle choices.  The therapist does not make any judgmental or minimizing comments, but not	1	
does not actively demonstrate respect and appreciation for the caregiver's experiences and perspective.		
The therapist demonstrates understanding, respect, and appreciation toward the caregiver. The therapist appears interested in the caregiver's perspective.	2	