

Coaches Observational Report

Agency/SPOE: _____	Home Visitor Name: _____
Agency/SPOE Coach Name: _____	IU Coach Name: _____
Number of Minutes Recorded: _____	Meeting Type (Circle): Initial Ongoing
Other Notes to remember Meeting: _____	

Instructions: *Coaches, please use this report to guide your coaching sessions with your coaches. These data come from the observational checklist of Provider Behaviors documented during a Home Visit Observation for your coachee. Through conversation, compare this form to their self-assessments. They may have two self-assessments to refer to, or they may have zero— One would be from the training days folder, and the other would be if they took a Home Visit Self-Assessment with them to a Home Visit. If they don't have one with them, have them quickly fill out a blank version to guide your first coaching session.*

*For detailed explanations of the Home Visiting Practices listed here, refer to the **Home Visiting Practice Descriptions** worksheet.*

Home Visiting Practices In your video, did the Home Visitor:	Was this practice present?	Comments? Did this happen once in the session or regularly throughout? Write examples to help remember. What other thoughts do you have about this practice?
Checking-In		
Check in with the family/caregiver to find out how their week is going to get a feel for whether or not family priorities have shifted since last visit?	Yes No	
Remind the caregiver of the action plan from the previous session and see how the action plan went for their family?	Yes No	
Use open-ended questions to assess the multiple perspectives of family members/caregivers?	Yes No	
Use follow-up questions to assess the multiple perspectives of family members/caregivers?	Yes No	

Used while you watch the video of who you are coaching for the first session.

Feedback		
Provide supportive feedback to caregiver based on caregiver-child interactions?	Yes	No
Provide informational feedback to caregivers based on questions or caregiver-child interactions?	Yes	No
PAUSE Framework		
Adjust the session activities and conversation based on family/caregiver response (i.e. family seeming disengaged)?	Yes	No
Modeling		
Model or demonstrate an idea of strategy that they and the caregiver developed together, so that the caregiver can see it in action?	Yes	No
Co-Creating Action Plans		
Check in with the family at the end of the session to see if the session went well for the family, or if there are adjustments that can be made?	Yes	No
Work with family to co-create an action plan for the next session, including activities to do during the time until then?	Yes	No
Setting Expectations		
Effectively set the stage for families regarding involvement in First Steps, including descriptions of provider roles, service coordinator roles, and family roles?	Yes	No

Used while you watch the video of who you are coaching for the first session.