

Journeying through Dementia: Training Delivery checklist for trainees

Dates of training	
Your role (e.g. Facilitator/Supervisor)	

We would like to ask you to take part in the fidelity assessment for the trial. This will help us to find out whether the results of the trial are due to the intervention or due to other influences outside the intervention. One aspect that could affect the intervention is the quality of the training provided. We would therefore like to ask you to take a few minutes at the end of your 2 day training to complete the questions below about the trainer(s) and the training you received. Thank you.

Questions	
1. Did the trainer use a range of group work skills, for example teaching, peer sharing, interactive activities?	Yes <input type="checkbox"/> No <input type="checkbox"/>
2. Were presentations and training materials related to the objectives of the training?	Yes <input type="checkbox"/> No <input type="checkbox"/>
3. Did you feel the training was tailored to your understanding and/or experience?	Yes <input type="checkbox"/> No <input type="checkbox"/>
4. Did the trainer(s) respond to feedback from the trainees during the sessions?	Yes <input type="checkbox"/> No <input type="checkbox"/>
5. Were examples of topics covered from the manual?	Yes <input type="checkbox"/> No <input type="checkbox"/>
6. Did the trainer discuss the individual sessions including their purpose, goal setting and relationships (between participant and carer)?	Yes <input type="checkbox"/> No <input type="checkbox"/>
7. Did the trainer discuss the supporter attended sessions and relationship dynamics?	Yes <input type="checkbox"/> No <input type="checkbox"/>
8. Were you able to discuss the content of the manual and how to apply it?	Yes <input type="checkbox"/> No <input type="checkbox"/>
9. Were you able to share your expertise with the group and your expectations of the training?	Yes <input type="checkbox"/> No <input type="checkbox"/>
10. Were you able to share your own perceptions of dementia and how this may impact on delivering the intervention?	Yes <input type="checkbox"/> No <input type="checkbox"/>
11. Were you able to reflect on and share their own facilitation style and skills?	Yes <input type="checkbox"/> No <input type="checkbox"/>
12. Did you use the JtD manual to practice planning sessions?	Yes <input type="checkbox"/> No <input type="checkbox"/>
13. Did you discuss strategies for peer support?	Yes <input type="checkbox"/> No <input type="checkbox"/>
14. Did you discuss how to manage group dynamics?	Yes <input type="checkbox"/> No <input type="checkbox"/>
15. Did you discuss how to tailor the intervention to the needs and choices of group members?	Yes <input type="checkbox"/> No <input type="checkbox"/>
16. Did you explore the value of 1:1 sessions and potential activities to use in these?	Yes <input type="checkbox"/> No <input type="checkbox"/>
17. Did you discuss the value and principles of supervision?	Yes <input type="checkbox"/> No <input type="checkbox"/>