

TRIP APPENDIX

Appendix 3



Fidelity Resources

PASSPORT

TRIP

TCD INSTITUTE OF BEHAVIORAL RESEARCH

PASSPORT

TRIP

TCD INSTITUTE OF BEHAVIORAL RESEARCH

PASSPORT

TRIP

TCD INSTITUTE OF BEHAVIORAL RESEARCH

PASSPORT

TRIP

TCD INSTITUTE OF BEHAVIORAL RESEARCH

TRIP PASSPORT

Name _____

MAP 1	GAME 1
MAP 2	GAME 2
NUDGE 1	WORK IT 1
NUDGE 2	WORK IT 2

TRIP PASSPORT

Name _____

MAP 1	GAME 1
MAP 2	GAME 2
NUDGE 1	WORK IT 1
NUDGE 2	WORK IT 2

TRIP PASSPORT

Name _____

MAP 1	GAME 1
MAP 2	GAME 2
NUDGE 1	WORK IT 1
NUDGE 2	WORK IT 2

TRIP PASSPORT

Name _____

MAP 1	GAME 1
MAP 2	GAME 2
NUDGE 1	WORK IT 1
NUDGE 2	WORK IT 2

Form

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Counselor ID

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Group ID

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Facility ID

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TRIP Fidelity Checklist

Mapping It Out -- Part 1

Date:

MO	

DAY	

YR	

A. FILL IN ONE ANSWER FOR EACH QUESTION

No (1)	Yes (2)
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B. FILL IN ONE ANSWER FOR EACH QUESTION

Group Interest

Low (1)	Medium (2)	High (3)
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Did you cover ...

1. *Opening Board Brain Map?*
2. *Check-in Thoughts/Issues Map?*
3. *Draw Me Icebreaker (Cognitive Trick)?*
4. *Mapping 101 Instruction/Practice?*
5. *Valuable Friends Guide Map?*
6. *Wrap Up/Review Thoughts/Issues Map?*

<input type="radio"/>	<input type="radio"/>
<input type="radio"/>	<input type="radio"/>
<input type="radio"/>	<input type="radio"/>
<input type="radio"/>	<input type="radio"/>
<input type="radio"/>	<input type="radio"/>
<input type="radio"/>	<input type="radio"/>

<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

C. GENERAL

Almost Never (1)	Very Little (2)	About Average (3)	Very Often (4)
------------------------	-----------------------	-------------------------	----------------------

1. I was able to help the group stay focused and working.
2. I was able to manage group distractions or tensions.
3. I felt confident and self assured.
4. I followed each activity with a brief group discussion.
5. I summarized key points after each activity/discussion.
6. I used board/flip chart to map out group ideas.
7. I used maps effectively to organize group discussions.

<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

Clients in Attendance (Client ID)

ADD COMMENTS ON BACK

Form

Counselor ID

Group ID

Facility ID

TRIP Fidelity Checklist

Mapping It Out -- Part 2

Date:
 MO DAY YR

A. FILL IN ONE ANSWER FOR EACH QUESTION

No Yes
 (1) (2)

Did you cover . . .

1. Opening Board Brain Map?
2. Check-in Thoughts/Issues Map?
3. Ash Adams DVD (Cognitive Trick)?
4. Mapping Practice?
5. Personal Strengths Guide Map?
6. Wrap Up/Review Thoughts/Issues Map?

- | | |
|---|---|
| ○ | ○ |
| ○ | ○ |
| ○ | ○ |
| ○ | ○ |
| ○ | ○ |
| ○ | ○ |

B. FILL IN ONE ANSWER FOR EACH QUESTION

Group Interest

Low Medium High
 (1) (2) (3)

- | | | |
|---|---|---|
| ○ | ○ | ○ |
| ○ | ○ | ○ |
| ○ | ○ | ○ |
| ○ | ○ | ○ |
| ○ | ○ | ○ |
| ○ | ○ | ○ |

C. GENERAL

<u>Almost Never</u>	<u>Very Little</u>	<u>About Average</u>	<u>Very Often</u>
(1)	(2)	(3)	(4)

1. I was able to help the group stay focused and working.
2. I was able to manage group distractions or tensions.
3. I felt confident and self assured.
4. I followed each activity with a brief group discussion.
5. I summarized key points after each activity/discussion.
6. I used board/flip chart to map out group ideas.
7. I used maps effectively to organize group discussions.

- | | | | |
|---|---|---|---|
| ○ | ○ | ○ | ○ |
| ○ | ○ | ○ | ○ |
| ○ | ○ | ○ | ○ |
| ○ | ○ | ○ | ○ |
| ○ | ○ | ○ | ○ |
| ○ | ○ | ○ | ○ |

Clients in Attendance (Client ID)

ADD COMMENTS ON BACK

Form Counselor ID Group ID Facility ID

TRIP Fidelity Checklist

The Art of Nudge -- Part 1

Date:
MO DAY YR

	A. FILL IN ONE ANSWER FOR EACH QUESTION		B. FILL IN ONE ANSWER FOR EACH QUESTION		
	<u>No</u> (1)	<u>Yes</u> (2)	<u>Group Interest</u>		
<u>Did you cover . . .</u>			<u>Low</u> (1)	<u>Medium</u> (2)	<u>High</u> (3)
1. Opening Board Brain Map?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
2. Check-in Thoughts/Issues Map?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
3. Slap Jack Icebreaker (Cognitive Trick)?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
4. Inner/Outer Nudge Guide Map?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
5. Positive/Negative Guide Map?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
6. Nudge Game Plan Guide Map?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
7. Wrap Up/Review Thoughts/Issues Map?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

C. GENERAL

<u>Almost Never</u> (1)	<u>Very Little</u> (2)	<u>About Average</u> (3)	<u>Very Often</u> (4)
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1. I was able to help the group stay focused and working.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
2. I was able to manage group distractions or tensions.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
3. I felt confident and self assured.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
4. I followed each activity with a brief group discussion.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
5. I summarized key points after each activity/discussion.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
6. I used board/flip chart to map out group ideas.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
7. I used maps effectively to organize group discussions.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

Clients in Attendance (Client ID)

ADD COMMENTS ON BACK

Form

Counselor ID

Group ID

Facility ID

TRIP Fidelity Checklist

The Art of Nudge -- Part 2

Date:
 MO DAY YR

A. FILL IN ONE ANSWER FOR EACH QUESTION

No Yes

(1) (2)

B. FILL IN ONE ANSWER FOR EACH QUESTION

Group Interest

Low Medium High

(1) (2) (3)

Did you cover ...

1. Opening Board Brain Map?
2. Check-in Thoughts/Issues Map?
3. Ash Adams DVD (Cognitive Trick)?
4. Nudge Case Studies?
5. Negative Nudge Guide Maps?
6. Wrap Up/Review Thoughts/Issues Map?

○	○
○	○
○	○
○	○
○	○
○	○

○	○	○
○	○	○
○	○	○
○	○	○
○	○	○
○	○	○

C. GENERAL

Almost Never	Very Little	About Average	Very Often
(1)	(2)	(3)	(4)

1. I was able to help the group stay focused and working.
2. I was able to manage group distractions or tensions.
3. I felt confident and self assured.
4. I followed each activity with a brief group discussion.
5. I summarized key points after each activity/discussion.
6. I used board/flip chart to map out group ideas.
7. I used maps effectively to organize group discussions.

○	○	○	○
○	○	○	○
○	○	○	○
○	○	○	○
○	○	○	○
○	○	○	○

Clients in Attendance (Client ID)

ADD COMMENTS ON BACK

Form Counselor ID Group ID Facility ID

TRIP Fidelity Checklist

Downward Spiral -- Part 1

Date:
MO DAY YR

Did Peer Mentor(s) Participate? No Yes

	A. FILL IN ONE ANSWER FOR EACH QUESTION		B. FILL IN ONE ANSWER FOR EACH QUESTION		
	No (1)	Yes (2)	Group Interest		
<u>Did you cover . . .</u>			Low (1)	Medium (2)	High (3)
1. Opening Board Brain Map?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
2. Check-in Thoughts/Issues Map?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
3. Game Introduction Senior Peers?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
4. Downward Spiral Game Session?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
5. Reflection Cards Activity?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
6. Wrap Up/Review Thoughts/Issues Map?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

	Almost Never (1)	Very Little (2)	About Average (3)	Very Often (4)
	C. GENERAL			
1. I was able to help the group stay focused and working.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
2. I was able to manage group distractions or tensions.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
3. I felt confident and self assured.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
4. I followed each activity with a brief group discussion.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
5. I summarized key points after each activity/discussion.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
6. I used board/flip chart to map out group ideas.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
7. I used maps effectively to organize group discussions.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

Clients in Attendance -- Client ID

Peer Mentor(s) in Attendance -- Client ID

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ADD COMMENTS/ADDITIONAL IDs ON BACK
Appendix 3 – Fidelity Resources

Form Counselor ID Group ID Facility ID

TRIP Fidelity Checklist

Downward Spiral -- Part 2

Date:
MO DAY YR

Did Peer Mentor(s) Participate? No Yes

	A. FILL IN ONE ANSWER FOR EACH QUESTION		B. FILL IN ONE ANSWER FOR EACH QUESTION		
	No (1)	Yes (2)	Group Interest		
			Low (1)	Medium (2)	High (3)
Did you cover . . .					
1. Opening Board Brain Map?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
2. Check-in Thoughts/Issues Map?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
3. Triangle Icebreaker (Cognitive Trick)?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
4. Personal Spirals Game Card Creation?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
5. Writing on the Wall Group Map?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
6. Wrap Up/Review Thoughts/Issues Map?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

C. GENERAL

Almost Never (1)	Very Little (2)	About Average (3)	Very Often (4)
------------------------	-----------------------	-------------------------	----------------------

1. I was able to help the group stay focused and working.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
2. I was able to manage group distractions or tensions.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
3. I felt confident and self assured.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
4. I followed each activity with a brief group discussion.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
5. I summarized key points after each activity/discussion.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
6. I used board/flip chart to map out group ideas.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
7. I used maps effectively to organize group discussions.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

Clients in Attendance -- Client ID

Peer Mentor(s) in Attendance -- Client ID

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ADD COMMENTS/ADDITIONAL IDs ON BACK

Form Counselor ID Group ID Facility ID

TRIP Fidelity Checklist

Work It -- Part 1

Date:
MO DAY YR

	A. FILL IN ONE ANSWER FOR EACH QUESTION		B. FILL IN ONE ANSWER FOR EACH QUESTION		
	No (1)	Yes (2)	Group Interest		
<u>Did you cover ...</u>			Low (1)	Medium (2)	High (3)
1. Opening Board Brain Map?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
2. Check-in Thoughts/Issues Map?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
3. Ash Adams DVD (Cognitive Trick)?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
4. Work It Instruction/Mapping?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
5. Work It Guide Map?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
6. Wrap Up/Review Thoughts/Issues Map?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

<u>C. GENERAL</u>	Almost Never (1)	Very Little (2)	About Average (3)	Very Often (4)
1. I was able to help the group stay focused and working.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
2. I was able to manage group distractions or tensions.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
3. I felt confident and self assured.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
4. I followed each activity with a brief group discussion.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
5. I summarized key points after each activity/discussion.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
6. I used board/flip chart to map out group ideas.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
7. I used maps effectively to organize group discussions.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

Clients in Attendance (Client ID)

ADD COMMENTS ON BACK
Appendix 3 – Fidelity Resources

Form Counselor ID Group ID Facility ID

TRIP Fidelity Checklist

Work It -- Part 2

Date:
 MO DAY YR

Did you cover ...

1. *Opening Board Brain Map?*
2. *Check-in Thoughts/Issues Map?*
3. *Alphabet Icebreaker (Cognitive Trick)?*
4. *Work It Review/Paired Activity?*
5. *Work It Yourself Mapping?*
6. *Wrap Up/Review Thoughts/Issues Map?*

A. FILL IN ONE ANSWER FOR EACH QUESTION		B. FILL IN ONE ANSWER FOR EACH QUESTION		
No	Yes	Group Interest		
(1)	(2)	Low	Medium	High
(1)	(2)	(1)	(2)	(3)
<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

C. GENERAL

1. I was able to help the group stay focused and working.
2. I was able to manage group distractions or tensions.
3. I felt confident and self assured.
4. I followed each activity with a brief group discussion.
5. I summarized key points after each activity/discussion.
6. I used board/flip chart to map out group ideas.
7. I used maps effectively to organize group discussions.

Almost Never	Very Little	About Average	Very Often
(1)	(2)	(3)	(4)
<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

Clients in Attendance (Client ID)

<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

ADD COMMENTS ON BACK

Form

Counselor ID

Group ID

Facility ID

TRIP Fidelity Checklist

Peer Mentor

Date:
 MO DAY YR

A. FILL IN ONE ANSWER FOR EACH QUESTION

	No	Yes
	(1)	(2)

Did you cover ...

1. *Game Introduction?*
2. *Downward Spiral Game Session?*
3. *Reflection Cards Activity?*
4. *Triangle Icebreaker (Cognitive Trick)?*
5. *Personal Spirals Game Card Creation?*
6. *Role of peer mentor?*

- | | |
|-----------------------|-----------------------|
| <input type="radio"/> | <input type="radio"/> |
| <input type="radio"/> | <input type="radio"/> |
| <input type="radio"/> | <input type="radio"/> |
| <input type="radio"/> | <input type="radio"/> |
| <input type="radio"/> | <input type="radio"/> |
| <input type="radio"/> | <input type="radio"/> |

B. FILL IN ONE ANSWER FOR EACH QUESTION

Group Interest

Low	Medium	High
(1)	(2)	(3)

- | | | |
|-----------------------|-----------------------|-----------------------|
| <input type="radio"/> | <input type="radio"/> | <input type="radio"/> |
| <input type="radio"/> | <input type="radio"/> | <input type="radio"/> |
| <input type="radio"/> | <input type="radio"/> | <input type="radio"/> |
| <input type="radio"/> | <input type="radio"/> | <input type="radio"/> |
| <input type="radio"/> | <input type="radio"/> | <input type="radio"/> |
| <input type="radio"/> | <input type="radio"/> | <input type="radio"/> |

C. GENERAL

Almost Never	Very Little	About Average	Very Often
(1)	(2)	(3)	(4)

1. I was able to help the group stay focused and working.
2. I was able to manage group distractions or tensions.
3. I felt confident and self assured.
4. I followed each activity with a brief group discussion.
5. I summarized key points after each activity/discussion.
6. I used board/flip chart to map out group ideas.
7. I used maps effectively to organize group discussions.

- | | | | |
|-----------------------|-----------------------|-----------------------|-----------------------|
| <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> |
| <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> |
| <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> |
| <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> |
| <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> |
| <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> |

Clients in Attendance (Client ID)

<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>

ADD COMMENTS ON BACK