<u>Intervention Integrity</u>

The term 'treatment integrity is interchangeable with 'treatment fidelity' when used to describe the delivery of an intervention. Both terms are receiving more attention and focus in the areas of education, psychology, and medicine. Without knowing how well an intervention[1] was delivered, how can one know the obtained results are a reflection of the practice or the delivery? Treatment integrity is a concept that is becoming more familiar to school psychologists but continued attention is needed to ensure students receive the highest quality instruction. Even in research, few studies documented the level of implementation and the impact on outcomes (Dane & Schneider, 1998).

Definition and Basic Considerations: The original definition of treatment integrity involved the "methodological strategies used to monitor and enhance the reliability and validity of behavioral interventions" (Bellg et al., 2004, p. 443). There have been several researchers and workgroups that have provided definitions and categories of intervention integrity (Bellg et al., 2004; Dane & Schneider, 1998; Perepletchikova, Treat, & Kazdin, 2007). Dane and Schneider (1998) provided five components of intervention integrity and is cited in Best Practices in School Psychology: 6th Edition (2015). The five components provided by Dane and Schneider are:
- *Adherence*: how closely an educator attends to and follows specified procedures in the intervention. Was training adequate?
- *Quality of Delivery*: includes consideration of the educator's skill, decisions, timing, choice-making and judgment when implementing the intervention
- *Program Differentiation*: the degree that the proposed intervention differs and is distinct from other practices
- *Exposure or dosage*: refers to the number, length, frequency, or duration of intervention sessions
- Participant responsiveness: the level of educator and student engagement in the intervention. Is student behavior a factor in the receipt of the intervention?

Interventionists must have adequate initial and continuing training to deliver the intervention with adherence. To ensure continued quality and to highlight critical components of the intervention, the development of checklists may help to maintain and increase intervention integrity. According to Gawande (2010), checklists remind us of the minimum necessary steps and make them explicit. Gawande (2010) continues that checklists instill a kind of discipline of higher performance. Development of intervention integrity checklists could provide frequent reminders and verification that what was intended was actually delivered in a high-quality manner. The checklist is meant as a quick check, not a replacement for quality training and support.

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[1] For the sake of simplicity, the term "intervention" is used but is intended to encompass any additional instruction a student receives that is not provided to all students in core instruction.

Theoretical Proposal to Evaluate Intervention Integrity through Intervention Integrity Checklist:
The following items could be used to develop a tailored checklist for a specific intervention, points are suggestions only.

1. Reliable and valid assessment data is present to correctly target skill and Stage of Learning (Acquisition, Fluency, Generalization: Haring & Eaton, 1978), 0 or 1
2. The intervention is defined in specific terms: What specific skill(s) does the intervention target? Based on question 1, is this the best intervention? 0 or 1
3. Broad categories of strategies, procedures, and tasks required during the intervention are developed for each intervention (Perepletchikova, 2016).
4. Broad categories are subdivided and subcategories are explicitly defined as to which areas are necessary each time the intervention is delivered. Discriminate between behaviors that are necessary each session or those that are used as needed. Provide examples (Perepletchikova, 2016).
5. For each item, the following scale will be used:
   - 0-not done, not required; 1-required, not done; 2-required, done
   - Using the 0-2 scale, interventionists will strive for 80% on each self-report checklist (Perepletchikova, 2016).

Use of the Checklist:
In theory, checklists would be developed for every intervention delivered by a school. The main purpose of the checklist would be a reminder to the interventionist of the critical components used for self-reflection. Another purpose would be to provide a clear, objective method for teachers or administrators to observe and provide feedback to the interventionist if critical components are evident. However, this feedback would be intended to be "low stakes" and not of an evaluative nature. Peer observation or observation by teachers or administrators would be conducted in more of a 'walk-through' format. The desired outcome is improved student outcomes through increased intervention integrity.

References:
Bellg, A. J., Borrelli, B., Resnick, B., Hecht, J., Minicucci, D. S., Ory, M.,& Czajkowski, S. (2004). Enhancing treatment fidelity in health behavior change studies: best practices and recommendations from the NIH Behavior Change Consortium. Health Psychology, 23(5), 443.

Dane, A. V., & Schneider, B. H. (1998). Program integrity in primary and early secondary prevention: Are implementation effects out of control? Clinical Psychology Review, 18(1), 23.

Gawande, A. (2010) The checklist manifesto: How to get things right. New York, NY: Holt, Henry & Company.

Haring, N. G., & Eaton, M. D. (1978). Systematic instructional procedures: An instructional hierarchy. The fourth R: Research in the classroom, 23-40.
Perepletchikova, F. (email correspondence, 4/5/2016).

RECOMMENDED PROCESS
For Intervention Fidelity

Perepletchikova, F., Treat, T. A., & Kazdin, A. E. (2007). Treatment integrity in psychotherapy research: analysis of the studies and examination of the associated factors. *Journal of consulting and clinical psychology*, 75(6), 829.

Roach, A. T., Lawton, K., & Elliott, S. N., (2014). Best practices in facilitating and evaluating the integrity of school-based intervention. In A. Thomas and P. Harrison (Eds.), *Best Practices in School Psychology VI*. Bethesda, MD: NASP.

Sanetti, L.H.M., & Kratochwill, T.R., Eds. (2013). *Treatment integrity: A foundation for evidence-based practice in applied psychology*. United States: Magination Press, (American Psychological Association).