

Appendix S2: Examples of operationalization adherence item 1 and competence item 7.

Item 1: The TOP interventionist names the child's behavioral cues and gives information about the interpretation of the behavior.

This item represents key strategy 1 of the TOC; Assist parents in observing, understanding, and interpreting their child's behavioral cues. Behavioral cues are classified in different behavioral systems; autonomic, motoric, state, and attention/interaction.

The interpretation of the behavioral cues gives meaning to the child's goals. We interpret the behavior according to the categories used in the TOP program, approaching behavior, regulation behavior, or dysbalance/stress behavior. For this item, the provision of adequate information of the TOP therapist counts. If the interventionist occasionally uses a misinterpretation and adapts or corrects, this does not alter the rating since this can be informative for parents.

ITEM 1 Scoring guidelines

Score 0: No or insufficient use of the strategy (item 1)

Criteria:

- The interventionist does not use the key strategy or does not give accurate information or
- The interventionist only mentions single behavioral cues or
- The interventionist only gives interpretation separate from behavioral cues.

Score 1: Sufficient use of the strategy (item 1)

Criteria:

- The interventionist names only single behavioral cues linked to the interpretation.

Score 2: Good use of the strategy (item 1)

Criteria:

- The interventionist names behavioral cues linked to the interpretation in more than one behavioral system or more behavioral cues in the same behavioral system.

Examples scoring item 1

Score 0

"Did you see that he places his feet together"

"He seeks support with his feet against the edge of his crib."

Or confirming parents:

The parent mentioned, *"I see in his eyes that he is tired."* The therapist's reaction: *"you can bring him to bed if you think he is tired"* This is scored as insufficient use of the strategy because the interventionist does not mention concrete behavioral signs and only confirms the interpretation.

Score 1

“He is attentive to his toys even when they roll out of sight. It looks like he would like to try to get them again.

Or confirming

“What do you know his behavior well? You describe that he is rubbing his eyes, and this is how you see he is getting tired.

Score 2

" Now he is on his tummy; you can see he is turning red; he groans and grumbles. It looks a bit too strenuous at this moment, do you think that also?

Or confirming: *" He takes your hand with his finger and focuses on your face while he is drinking his bottle. Because you give him so much support and he can hold on to your finger, he is successful in coordinating his sucking, breathing, and swallowing”.*

Item 7: The interventionist works according to the strength-based approach

This item is about the extent to which the interventionist uses the strength-based approach in the TOP intervention. Besides using the approach in the actual intervention, this also has a concrete application in the parent report given after each intervention session. Elements required for the parent report are Positive, Rationale, Functional, Open, and Individual.

The child and the parent's protective factors, possibilities, and developmental chances are the core of this approach and form the port of entry in the TOP intervention. The strength-based approach adds to parents' feelings of competence and regards the parents as experts. Enhancing parental feelings of confidence and joy in the interaction ensures parental responsiveness that is more consistent.

The strength-based approach is audible in the information transfer during the home visit and scored with the following aspects:

- a) The interventionist formulates positive and non-judgmental.
- b) The interventionist gives open suggestions and recommendations that support the responsive relationship or development.
- c) The interventionist connects to the child's possibilities and works from the strengths of the child.
- d) The interventionist connects to the support the parent can provide at that moment.
- e) The interventionist is confirming in the communication about the parental efforts.

- f) The interventionist has an open attitude towards parental upbringing.
- g) The interventionist uses the ideas and suggestions from the parent during the intervention.

The strength-based approach is different from the more traditional problem-based approach and norm-based testing for delays. The TOP program is a preventive program, and early detection of problems or delays is essential and additional support (key strategy 7) or treatment (item 3) will be applied if indicated.

ITEM 7 scoring guidelines

Score 0: No or insufficient execution of the TOP competence.

Criteria

- The interventionist does not work according to the strength-based approach or
- The interventionist uses only 1 or 2 aspects (a-e)

Score 1: Sufficient execution of the TOP competence.

Criteria

- The interventionist uses at least three aspects (a-e)

Score 2: Good execution of the TOP competence.

Criteria

- The interventionist uses all described aspects (a-e) and
- The interventionist has an open attitude towards the parental upbringing and
- The interventionist uses the ideas and suggestions from the parent during the intervention.