Fidelity Checklist

Program Components	Data Source(s)
Staffing and Supervision	
 Interventionists receive training prior to starting the program Interventionists meet with investigators on a monthly basis RAs receive training prior to interviews and administering questionnaires 	Record of attendance
Home Visits	
 Initial home visit conducted by the RN & RD Follow up interim visit by RN or RD Follow up visit by the RN or RD at 5 months 	Provider Log sheet
 Screening for diabetes-related complications and comorbidities Review of medications 	Home Visit Record
 Assessment of self-management of T2DM Use of motivational interviewing and problem-solving to foster behavioural change and encourage self-care 	Home Visit Record
Monthly Group Sessions	
Participation in the program	Provider Log sheet
Content of the program	Program Documentation
Provision of transportation (if needed)	Coordinator's notes
Care Coordination	
 RN helps clients access necessary supports and services in the community as needed 	Client Care-plan
Monthly Case Conferences	
Collaboration and coordination of program components	Team Meeting Record
Case conference discussions help the intervention team develop and implement a client-centred care-plan for the group program	Client Care-plan