Appendix S1
Revisions after pilot testing and description FITT items fase III

Pilot FITT item	Problems with the pilot item	Adaptations to current item	Current item	Description current FITT item
1. TOP therapist helps the parent to observe and interpret child's behavioral cues 2. TOP therapist provides the parent with information about behavioral cues that indicate dysbalance and/or stress 4. TOP therapist provides parents with information about self-regulatory behavioral cues. 6. TOP therapist gives information about behavioral cues.	 Item 1, 2, 4 and 6 were separate items of the same key strategy and were too detailed for scoring. Scoring was unclear regarding the frequency and completeness of the execution of the strategy and when parents already reacted sensitive and only confirmation of parental behavior is appropriate. Raters had different views on description "providing information". 	 These items were merged to current item 1, reflecting key strategy 1 (TOC). Scoring guidelines were re-defined. More detailed description and diverse examples of item 1 were given in the instruction manual. Clarification of "providing information" was given for this item and distinguished with providing information included in other items. 	1	The TOP therapist names child's behavioral cues and gives information about the interpretation of the behavioral cues.
3. TOP therapist facilitates parental responsive reaction: support comfort and safety5. TOP therapist facilitates responsive reaction: coregulation.	 Item 3, 5 and 7 were separate items of the same TOC key strategy and too detailed for scoring. Scoring was unclear, since "facilitating" can be done in 	 These items were merged to current item 2, reflecting key strategy 2 and 3 (TOC). The term "facilitate" was replaced with the term "support" and a more detailed description of the interpretation was added. 	2	The TOP therapist supports the parent to apply the adequate responsive reaction

7. TOP therapist facilitates responsive reactions: adding information/ Scaffolding.	different ways (verbal cues, practical guidance).	Rating of the use of various facilitating techniques by the observed therapist was transferred to a new competence item 9.	
		This item was added because in the TOP program there is attention for delays in motor development which can cause stagnation in other developmental areas. Additional exercises can be indicated and carried out by the TOP therapist.	TOP therapist supports parent in creating conditions to enhance development.
 9. TOP interventionist provides information about current developmental stage and gives relevant information about next stage. 10. TOP therapist gives information about impact preterm birth on parenthood 	 These items represent the key strategies 5 and 6 from the TOC and needed more detailed scoring guidelines Raters had different views on description "providing information". 	 Item 9 and 10 were combined. Clarification of "providing information" was given for this item and distinguished with providing information included in other items. The possibility to check off the addressed developmental domains was added. 	The TOP therapist informs the parent about developmental domains and parental well-being after preterm birth
11. TOP therapist aligns care plan with parents and other caregivers.	This item was related to an important TOC strategy 7 but not applicable within every home visits.	Item was moved to the additional checklist in order to keep the FITT suitable for every session.	
12. TOP therapist reacts responsively to parents and their circumstance.	 Description and scoring was unclear. To be effective and structure the sessions, intervention goals for the home visit needed to be set explicitly and TOP therapist must 	This item was translated to new item 5 and 6 with detailed descriptions.	The TOP therapist formulates intervention goals for each home visit.

8. TOP therapist uses specific	use and create situations to work in the actual parent-child interaction. Item needed clarification	The strength based approach was	7	The TOP therapist uses or creates situations to work in the actual parent-child interaction. The TOP therapist works
and strength-based recommendations.	Not a strategy, but should be scored as a competence item.	 clarified and seven observable aspects were defined. This item was transferred to the competence scale. 		according the strength- based approach.
13. TOP therapist transfers information and knowledge correctly and adequate	It was unclear how to deal with fragments where the therapists uses jargon or clearly explains too much and interferes with parent-child interaction.	 This item was translated to the new competence item 8which reflects the timing and dosing of information during the intervention session. Aspects of this item 13 were incorporated in the scoring guidelines of the new item 4 (e.g. adequacy of information). 	8	The TOP therapist uses good timing and dosage in the information transfer to parents.
14. TOP therapist uses verbal skills to improve responsive parenting.15. TOP therapist uses active learning skills to improve responsive parenting.	 Item description of item 14 and 15 and rating was not clear. Item 14 en 15 were related 	 Didactic skills were better defined, combined and examples were added in the manual. Also for a correct execution of this competence, parent's response was included in the scoring guidelines. 	9	The TOP therapist uses didactic skills for the transfer of information
Total impression.	Subjective item, no problems	Description clarified in: Total impression of the entire intervention session.	10	Total impression of the entire intervention session.

Availability parent (s)	The manual was unclear how to	Description was clarified	11.1	The availability of the
	deal with fragments in which two	Not applicable was added if other	11.2	parent(s) involved in the
	parents are present but not both	parent was not present.		intervention.
	involved.			