

#### Central Lancashire Online Knowledge (CLoK)

Title	Case Series of a Knowledge Translation Intervention to Increase Upper Limb
	Exercise in Stroke Rehabilitation
Туре	Article
URL	https://clok.uclan.ac.uk/id/eprint/15368/
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Creators	Connell, Louise, McMahon, Naoimh, Tyson, S. F., Watkins, Caroline Leigh and Eng, J. J

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	Intervention description as per TiDIER <sup>14</sup> checklist
Brief name:	PRACTISE (Promoting Recovery of the Arm: Clinical Tools for Intensive
	Stroke Exercise) is a theory-informed behaviour change intervention to
	facilitate evidence-based rehabilitation of the upper limb after stroke
Why:	Evidence-based rehabilitation of the upper limb includes high intensity
	repetitive task-oriented exercise. However, it is known that the current
	intensity of upper limb exercise in stroke rehabilitation units is not
	sufficient to maximise functional recovery. Hence, PRACTISE aims to
	increase the amount of upper limb exercises prescribed after stroke.
What	The PRACTISE Toolkit:
(materials):	Screening Tool
	<ul> <li>PRACTISE exercise pack (front sheet, information sheet, exercises</li> </ul>
	and diary)
	Audit Tool
What	Collaborative meetings between research team and clinical team to refine
(procedures):	the intervention components to suit local context and maximise
	implementation and embedding of the PRACTISE Toolkit
Who provided:	Two members of the research team (LC and NM) were responsible for
-	organising and facilitating the team meetings. Both are registered
	physiotherapists working full time in research with clinical and research
	experience. Before starting the study both researchers worked to build
	partnerships with local sites and <b>kept</b> them informed of the <b>project 's</b>
	progress. Therefore, on <b>starting</b> the study, therapists site were already
	familiar with the researchers and had demonstrated an interest and/_or
	commitment to being involved with the project
How:	Initial then monthly team meetings to review progress of implementation
	and reflect on changes that needed to be made to address emerging
	barriers
Where:	At the stroke rehabilitation units at a time and location chosen by the
When and how	clinical team
much:	Monthly team meetings for a duration of six months at each site
Tailoring:	Tailoring of the intervention materials was carried out to fit with the local
i unor ing.	contexts e.g. to fit with existing methods of note keeping, standardised
	layouts etc. Regardless of these changes the functions of the intervention
	components remained the same (see Connell et al. 2015)
Modifications	Some duplication of information was removed. For example . Initially
	there was an exercise plan to be included in the therapy notes but this
	provided much the same information as the front sheet of the PRACTISE
	pack, so teams often opted to photocopy this page for their notes)

## Additional File 1 – Intervention description and materials Screening Tool



**PRACTISE Pack: Front Sheet** 



**PRACTISE PACK** 

Name:

Goal:

### **Exercises:**

1.			
2.			
3.			
4.			
5.			

# People available to assist with exercises:

Review date	(within two weeks)	/	'/	′
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Therapist signature: \_\_\_\_\_

Date:

#### **PRACTISE Pack: Exercise Sheet (example)\***

\*Adapted with permission from the Graded Repetitive Arm Supplementary Program (GRASP) manuals



- Place the jar on the table.
- Hold the jar with your weaker hand and take off the lid with your stronger hand.
- 3.Now hold the jar with your stronger hand and take off the lid with your weaker hand.





\_\_\_\_\_sets of \_\_\_\_\_repetitions



Remember to fill out your exercise diary!

5

#### Additional File 1 – Intervention description and materials **PRACTISE Pack: Exercise Reminder and Diary**

To help your arm to get better you need to **practice** doing things that you find hard

You have been given these **arm exercises** to practice

> The **number of times** you should do each exercise has been written on each page

Write down how many times you do each exercise so you can keep track of how much you are able to do

Try to practice your exercises with somebody that can help you!





123



and tell your named therapist.





To keep track of how much exercise you do, please write down the number of exercises you do every day. There is space to write the date and for you (or the person that helped you) to initial the box.

	Date														
Exercise		No.	Initial	No.	Initial	No.	Initial	No.	Initial	No.	Initial	No.	Initial	No.	Initial
Example	Pouríng	20	MB	25	МВ	20	MB	30	MB	20 20	MB MB	30	MB	30	MB
1															
2															
3															
4															
5															
То	Total														

If you are initialling this form on behalf of the patient, please complete below so we can keep track of who is helping.

e.g. MB Matthew Brown Son.

Named Therapist:	
Review Date:	

#### Audit Tool

Pt. Name	RAG <sup>1</sup>	PRACTIS provi		Family info	//carer rmed	Date for	Reviev progre		Comments
		Yes	No	Yes	No	review	Yes	No	

<sup>1</sup>RAG stands for Red/Amber/Green categorised using the screening tool and represents the target behaviour of identifying suitable patients for upper limb exercises

Audit Tool (Example of data presented in excel spreadsheet)

Jun-14			
		Number	%
Number of new stroke admissions	10	42%	
Number of stroke patients through unit		22	
Number screened as Red		11	50%
Number screened as Amber		6	27%
Number screened as Green		0	0%
AMBER			
	Needed	Received	%
Number of patients for whom an exercise plan was completed	6	5	83%
Number of patients prescribed exercises	6	5	83%
Number of patients who had family/carers/visitors who were			
taught how to supervise the exercises	6	5	83%
Number of patients reviewed and progressed	6	5	83%
GREEN			
	Needed	Received	
Number of patients for whom had exercise plan completed	0		
Number of patients prescribed exercises	0		
Number of patients who had family/carers/visitors who were			
taught how to supervise the exercises	0		
Number of patients reviewed	0		
Number of patients reporting positive experience	0		
Number of patients referred to community neuro team	0		

