

eAppendix.
Questionnaire

Educating People With Stroke About Community-Based Exercise Programs: A Survey of Physical Therapist Practice and Perceived Needs

Questions to Determine Eligibility

Please answer the following 2 questions to confirm that you are eligible to participate in this study:

1. Are you a physical therapist currently registered with the College of Physiotherapists of Ontario?
 - Yes
 - No
2. Do you treat adults (age >18 years) who have sustained a stroke in your clinical practice?
 - Yes
 - No

For the purposes of this study, please refer to the following definitions:

- *Education* is the process of sharing and gaining knowledge.
- *Community-based exercise program* is defined as any program of physical activities that aims to promote health and well-being and that is accessible to people living in the community. Community-based exercise programs may be privately or publicly funded, and certain programs may require medical referral.

Educating People With Stroke

The following items ask about your practice setting and whether you provide education on community-based exercise programs to people with stroke.

3. Which of the following best describes the setting in which you treat the greatest number of patients with stroke?
 - General hospital: inpatient service
 - General hospital: outpatient service
 - Rehabilitation facility: inpatient service
 - Rehabilitation facility: outpatient service
 - Long-term care facility
 - Complex continuing care
 - Community care access center
 - Home visiting agency
 - Private practice or clinic
 - Other, please specify: _____
4. Have you ever provided education regarding community-based exercise programs to your patients with stroke?
 - Yes
 - No

When answering all subsequent questions, please respond with respect to the clinical setting you indicated in question 3 (ie, the setting in which you treat the greatest number of patients with stroke).

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Provision of Education in Current Practice

The following items ask about how you provide education on community-based exercise programs.

5. Out of 10 patients with stroke who you treat, what number of patients do you typically educate about community-based exercise programs?

- 0 patients
- 1–3 patients
- 4–6 patients
- 7–10 patients

Please indicate how often you do each of the following:

	None of the Time	Some of the Time	Most of the Time	All of the Time
6. Do you typically assess a patient's readiness for exercise before you provide information on community-based exercise programs? Readiness refers to whether the patient is mentally, physically, and emotionally ready to receive information about exercise.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
7. Do you typically ask your patients about the type of exercise they prefer to do before you provide information on community-based exercise programs?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

Nature of Education Regarding Community-Based Exercise Programs

The following items ask about the type of information provided when educating about community-based exercise programs.

Please indicate the extent to which you provide education on each of the following topics related to community-based exercise programs:

	None of the Time	Some of the Time	Most of the Time	All of the Time
8. I educate on the physical health benefits (eg, improved balance and walking capacity) of participating in community-based exercise programs	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
9. I educate on the mental health benefits (eg, increased confidence) of participating in community-based exercise programs	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
10. I educate on the social benefits (eg, meeting new people) of participating in community-based exercise programs	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
11. I educate on the importance of exercise in preventing cardiovascular disease (eg, recurrence of stroke)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
12. I provide the name and address of community-based exercise programs	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
13. I provide information on the physical accessibility of the facility offering the community-based exercise programs	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
14. I educate on the cost associated with community-based exercise programs	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

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Please indicate the extent to which you refer people with stroke to each of the following programs:

	None of the Time	Some of the Time	Most of the Time	All of the Time
15. Task-oriented training programs (eg, practice of functional tasks organized in a circuit)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
16. Cardiac rehabilitation programs	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
17. Hydrotherapy or pool programs	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
18. Walking programs	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
19. Private fitness trainer sessions	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
20. Private physical therapist services	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

21. Are there any other programs to which you refer patients that are not listed above? If yes, please provide the name(s) of the program(s) and the organization(s) providing the program in the text box below.

Please indicate the extent to which you utilize each of the follow modes of education:

	None of the Time	Some of the Time	Most of the Time	All of the Time
22. Verbal	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
23. Brochures and written materials	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
24. Online resources (eg, Web pages, videos)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
25. Presentations (eg, made by program representatives, colleagues)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

26. If there are other modes of education you utilize, please indicate them in the text box below.

Timing of Education

The following items ask about the point in time at which you typically provide education while a patient is in your caseload.

Please indicate the extent to which you provide education about community-based exercise programs to patients with stroke at each of the following time points:

	None of the Time	Some of the Time	Most of the Time	All of the Time
27. At initial evaluation	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
28. At a point after initial evaluation but prior to discharge	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
29. At discharge	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

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Perceived Barriers to Providing Education

The following items ask about the challenges a physical therapist may encounter in providing education on community-based exercise programs to patients with stroke.

30. Do you think physical therapists have a primary responsibility to educate patients with stroke on community-based exercise programs?

- Yes
- No
- Unsure

In your facility, do the following health care professionals provide education about community-based exercise programs to people with stroke?

	Yes	No	Not Available in My Facility
31. Physical therapist	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
32. Occupational therapist	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
33. Speech-language pathologist	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
34. Physician	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
35. Nurse	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
36. Physical therapist assistant	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
37. Kinesiologist	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
38. Recreational therapist	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
39. Social worker	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
40. Registered massage therapist	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

41. If there are other health care professionals in your facility who provide education about community-based exercise programs not listed in the previous item, please list them in the text box below.

Please indicate the extent to which each of the following patient characteristics would influence a physical therapist's decision to provide education about community-based exercise programs to people with stroke:

	Not at All	A Little	Somewhat	Very Much
42. Patients' cognitive status	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
43. Patients' communication abilities	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
44. Patients' readiness for exercise	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
45. Patients' ability to walk independently	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

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Please indicate the extent to which you agree with each of the following statements:

	Strongly Disagree	Disagree	Neutral	Agree	Strongly Agree
46. Education regarding community-based exercise programs is essential for patients living with stroke	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
47. Education on community-based exercise programs constitutes best practice for stroke care in Canada	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
48. I am confident in my ability to educate my patients regarding community-based exercise programs	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
49. I am aware of the availability of community-based exercise programs in my area	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
50. I have sufficient time to educate my patients on community-based exercise programs	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
51. I am able to effectively assess patient readiness to exercise	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
52. There is a lack of support (eg, mandates, colleagues) in my work environment to provide education on community-based exercise programs to people with stroke	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
53. There is a lack of suitable community-based exercise programs in my area	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

Preferences for Resources

The following items ask about the resources or strategies that you feel would help you to provide education regarding community-based exercise program to people with stroke.

Please indicate the extent to which you agree that each of the following resources or strategies would help you to provide education regarding community-based exercise programs:

	Strongly Disagree	Disagree	Neutral	Agree	Strongly Agree
54. List of community-based exercise programs in your area with details of program delivery, training of instructors, and cost	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
55. Education on how to evaluate patient readiness to exercise	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
56. Education on how to provide education	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
57. Written pamphlets/brochures on community-based exercise programs to give to patients	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
58. A resource person in the community who patients can contact	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

59. Please provide any additional suggestions about resources or strategies for providing education regarding community-based exercise programs in the text box below.

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Sociodemographic and Practice Characteristics

The following items ask about sociodemographic and practice information.

60. What is your age?

- 20–29 years
- 30–39 years
- 40–49 years
- ≥50 years

61. What is your sex?

- Male
- Female

62. What is the highest physical therapy degree that you hold?

- Certificate
- Bachelor's
- Entry-level master's
- Doctoral
- Other, please specify: _____

63. Do you belong to one or more professional organizations, such as the Canadian Physiotherapy Association?

- Yes
- No

64. For how many years have you been practicing?

- <5 years
- 5–10 years
- 11–15 years
- >15 years

65. For how many years have you treated people with stroke?

- <5 years
- 5–10 years
- 11–15 years
- >15 years

66. In a typical week, how many hours do you work?

- <20 hours
- 20–30 hours
- 31–40 hours
- >40 hours

67. In a typical day, how many patients do you treat?

- <5 patients
- 5–10 patients
- 11–15 patients
- >15 patients

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68. In a typical week, how many patients with stroke do you treat?

- <2 patients
- 2-5 patients
- 6-10 patients
- >10 patients

69. How long is a patient with stroke typically on your caseload?

- <2 weeks
- 2-4 weeks
- 4-6 weeks
- >6 weeks

70. Which of the following best describes the location of the facility in which you provide most of your patient care?

- Rural (defined as a population of less than 30,000 and more than 30 minutes away in travel time from a community with a population of more than 30,000)
- Suburban (defined as subdivisions designed around the car, where most people drive to work)
- Urban

71. Please enter your facility's postal code: The postal codes will be used to describe the number of survey participants from each region of the Ontario Stroke System. Your identity will remain anonymous in the study.

72. Do you work in an interdisciplinary stroke team? An interdisciplinary stroke team is defined as a comprehensive team of health care professionals dedicated to the care of patients with stroke within a unit.

- Yes
- No

73. Is your practice setting affiliated with a teaching institution?

- Yes
- No

74. Do you supervise physical therapist students in your work?

- Yes
- No

75. Please indicate which of the following describes your work position best:

- Staff physical therapist
- Professional practice leader
- Other, please specify: _____

76. Do you have any additional feedback or comments regarding the survey or this research topic?