

Additional File 2: The ATTEND Study- health professionals (Stroke Unit) interview guide

Initial Broad Descriptive Questions	Probing Questions (These are a guide only. It is not expected that you ask all these questions)
<p>OVERALL VIEWS ON BURDEN OF STROKE IN INDIA</p> <p>– <i>To understand conceptualisation and significance of burden of stroke from provider perspective and what role they, other health care providers, the health system and policies play</i></p>	
<p>What are your views on the burden of stroke in India on an individual, community and systems level?</p>	<ul style="list-style-type: none"> – Do you know what supports your patients have post stroke? What do you think are the barriers and facilitators in enabling their full recovery? <ul style="list-style-type: none"> ○ What role does a patient’s cultural background have? ○ What role do the hospital and primary health care have in enabling patient recovery? ○ What role does current policy have? – What role do you think the stroke unit has in enabling a full recovery? <ul style="list-style-type: none"> ○ Is it more as an outpatient clinic? What resources are there?
<p>Overall views on stroke rehabilitation management</p> <p><i>To establish pre and post trial views of the usual stroke management and the intervention of a family led rehabilitation after stroke</i></p>	
<p>What is your overall view of a family led rehabilitation after stroke?</p>	<ul style="list-style-type: none"> ○ Why did you become involved in this study? i.e. motivation for taking part <ul style="list-style-type: none"> ○ Experience in general of being part of trial, What experience have you had RCTs? In what areas were they in eg drug trials? ○ Could you describe what you think are the negative/positive aspects of a family led rehabilitation, and early discharge? ○ How does this compare with the usual care provided? ○ Have your views about early discharge and training of family/caregiver at home changed since being in the trial? How so and why? ○ What are your thoughts about the 5 components of the intervention? <ol style="list-style-type: none"> 1. Information on stroke recovery trajectory, risk, identification and management of low mood, importance of repeated practice of specific activities 2. Joint goal setting with patient, nominated family caregiver and therapist (reviewed with coordinator as patient progresses and new goals set) 3. Positioning, transfers and mobility 4. Task orientated training (particularly walking, upper-limb and self-care tasks) with personalised copy of culturally appropriate manual 5. Discharge planning ○ What would be your ideal model of care for rehabilitation management post stroke? Is there anything more than what is being offered in the intervention that you would like to see?
<p>PROVIDER SATISFACTION/ PROBLEMS WITH ATTEND</p> <p>– <i>To illustrate the experience with ATTEND patients and contrast this with patients in usual care Note: There is a particular interest in whether there is a difference in practice for intervention group if randomised to SC visits.</i></p> <p>– <i>To understand if there was any difference in usual care management throughout the trial</i></p>	

<p>Could you describe what it has been like to look after your patients in the intervention group?</p>	<ul style="list-style-type: none"> – Did you change or alter treatment prior to commencing patients on trial? – (for usual care PT) Were there any patients who did not need your care due to being involved in the trial? – In your opinion, do you think being on the trial has influenced the behaviour of patients? (i.e. re RCTs – people may be more compliant)
<p>Could you describe what it has been like to look after your patients in the usual care group?</p>	<ul style="list-style-type: none"> – What was your experience in providing usual care to the participants not being part of the intervention arm? – Did you feel that you changed your management in any way for this group during the course of the study? If so, how?
<p>PATIENT SATISFACTION/ PROBLEMS WITH ATTEND <i>To illustrate feedback given to the providers from patients in ATTEND</i> <i>To understand if the usual care patients reported any difference in management throughout the trial</i></p>	
<p>What have been your patients' impressions/thoughts about being in the intervention group?</p>	<ul style="list-style-type: none"> – Did you receive any feedback from your patients about their experience in the trial? If so, please describe. – Do you feel that your patients were satisfied with the care they received from SC? – What were the major advantages and disadvantages of the family led rehabilitation from the patients' perspectives? Eg early discharge, costs?
<p>What have been your patients' impressions/thoughts about being in the usual care group?</p>	<ul style="list-style-type: none"> – Do you feel that your patients were satisfied with the care they received whilst in the usual care group?

<p>GENERAL IMPRESSIONS OF THE STUDY <i>To understand how the trial integrated into everyday practice</i></p>	
<p>What has it been like for you to be involved in the ATTEND study? (either as a PI, as part of the stroke team , as the SC)</p>	<ul style="list-style-type: none"> – What was the impact on you the stroke unit in choosing to be a part of this trial? <ul style="list-style-type: none"> ○ Did you experience any problems with the general administration of this trial? If so please explain. ○ Were there any benefits to you or the stroke unit as a result of participating in this trial? If so please explain. – Would you be interested in participating in future trials as a result of your experience with this study? If no, why not?
<p>SUITABILITY OF THE TRIAL DESIGN <i>To understand if other trial related variables may have impacted on outcomes</i></p>	
<p>What are your thoughts about the design of ATTEND study? (mainly for the SC and PIs)</p>	<ul style="list-style-type: none"> – (If PI- how was the recruitment process, what are your thoughts about the trial eligibility criteria?) – (If SC, or PI) Were there any difficulties experienced in communicating study information to participants? – How did you find the follow-up visits of your patients? – Did you experience any problems sharing/ coordinating care with providers who were not involved in the study? – Any thoughts about the primary outcomes

TRANSLATION INTO CLINICAL PRACTICE AND POLICY

To understand how the trial results may or may not translate into practice.

If found to be beneficial, what would you see as the role of ATTEND in everyday practice?

- What are your views on early supported discharge and family led rehabilitation if translated into everyday practice?
- How do you think incorporating ATTEND outside of the trial will impact on your day-today professional practice? Eg costs
- If ATTEND is found to be beneficial, what would be your advice to government on implementing its use in the general population?

CONCLUDING QUESTIONS

We will also be conducting some interviews with patients and carers involved in the trial to understand their experiences. In your opinion, what areas do you think we should explore?

Are there any aspects about stroke management and rehabilitation post stroke that you would specifically like explored?

Is there anything else you would like to say that we have not talked about in this interview?