

Appendix: Strategic interventions

Information and education in group sessions

Strategic interventions	Scope/ Content	Procedure	Health care staff	Process
Pre- education of all health care professionals and peers with SCI	To prepare a uniform and systematic approach and clarifying the roles of each profession in relation to the targeted patient education, an evidence-based pre-education of the inter-disciplinary health care personnel and peers with SCI is performed about cardiovascular risk, PA and healthy diet.	Pre-education is performed by stakeholders, as one session just before the intervention start-up. Pocket cards with evidence based basic recommendations related to PA and healthy diet in people with SCI are provided to all professions and peers with SCI.	All health care professionals at the clinic, and all peers from the peer corps.	The pre-education is performed multiple times until all health care professionals have attended the pre-education.
Patient education + session about diet and PA	To inform the patients about SCI in general, including specific evidence based information about cardiovascular risk and overweight as a mandatory part, facilitating patients discussing healthy diet and PA	Patient education is performed face- to-face as a group session. Afterwards the patients discuss PA and healthy diet. Interdisciplinary health care professionals facilitates the session from evidence based information in the patient decision aids material.	Patient education: Medical doctors. Session about diet and PA: Interdisciplinary health care professionals.	Once
Education of relatives	To inform the relatives about SCI in general, including specific evidence based information about cardiovascular risk and overweight and the benefits of healthy diet and PA as a mandatory element.	The session last a full day with face-to-face information and discussion about several aspects related to SCI and the role as a relative.	Interdisciplinary+ invited relatives to former patients sharing their experiences about being a relative to a person with SCI	Once
Admission meeting	A group setting where patients and relatives are informed about the scope of the rehabilitation and consequences of a SCI.	Information face- to-face about cardiovascular risk and overweight and the benefits of healthy diet and PA is provided	Interdisciplinary team	Once

Discharge meeting	A group setting where the patient and relatives are informed about the discharge in general, and how to manage consequences of the SCI in a new context after discharge	Information face- to-face about how to transfer the achieved knowledge and behaviors related to PA and healthy diet to a new context and information about the risk of low PA and gaining weight after discharge is provided.	Interdisciplinary team	Once
Diet composition advice	Recommendations about the diet composition at lunch servings is presented, based on the national nutrition guidelines.	Servings take place in a dining room. Visual material with diet composition recommendations is available and a plate model for inspiration is presented, with 200-300 gram of vegetables.	Kitchen staff	Every day
Exercise intensity education	Education about evidence based exercise amount and intensity for reducing cardiovascular risk and how to monitor intensity by using ratings of perceived exertion	The education is delivered by trained physiotherapists during group sessions of wheelchair skills training and cardiovascular exercise sessions.	Physiotherapist	Once weekly
BMI	BMI is assessed as part of existing routines and the patient is informed about the course of BMI. Serves as motivational tool.	Information is delivered to the patient face to face, in a private setting, with no other agendas. Evidence based actions related to BMI are discussed if relevant. Physiotherapists makes sure that the patient is up to date with total weight of the wheelchair and cushion before assessment	Nurses + Physiotherapists.	BMI and feedback is performed every week throughout the rehabilitation
VO2peak	VO2peak serves as a marker of physical capacity and the patient is informed about the test result and the course of physical capacity. Serves as motivational tool.	Information is delivered to the patient face to face, in a private setting, with no other agendas. Evidence based actions related to physical capacity are discussed if relevant.	Physiotherapists	Measurement and subsequently feedback at: Admission Discharge Follow up

Motivational physiologic outcome measures and face-to-face feedback

**Goalsetting and
action planning
(lifestyle changes)**

Accelerometry	Accelerometry serves as a marker of amount and intensity of PA and the patient is informed about the result and the course of PA. Serves as motivational tool.	Information is delivered to the patient face to face, in a private setting, with no other agendas. Evidence based actions related to are discussed if relevant	Physiotherapists	Measurement and subsequently feedback at: Admission Discharge Follow up
DXA	DXA serves as a marker of body composition (percentage lean mass and fat mass) and the patient is informed about the result and the course of body composition. Serves as motivational tool.	Information is delivered to the patient face to face, in a private setting, with no other agendas. Evidence based actions to change body composition are discussed if relevant	Medical doctors	Measurement and subsequently feedback at: Admission Follow up
Metabolic profile	Metabolic profile serves as a biomarker for diabetes and atherosclerotic disease and the patient is informed about the result and the course of measurements. Serves as motivational tool.	Information is delivered to the patient face to face, in a private setting, with no other agendas. Evidence based actions related to metabolic disease are discussed if relevant	Medical doctors	Measurement and subsequently feedback at: Admission Discharge Follow up
Introduction to patient decision aids for diet and PA and a brochure about food, weight and health for people with SCI	A setting in the early rehabilitation phase, where the decision aids and brochure are provided to the patient. The structure and goal of the two decision aids is introduced. The brochure supports the aim and rationale of the two decision aids.	A private setting between the patient and nurse face-to-face with no other agendas. From the time of introduction until the first goal setting meetings about diet and PA, the patient may read the information coupled to the recommendations for diet and PA.	Nurses + Physiotherapists	Once
Goal setting using patient decision aids for diet and PA	Consists of two <u>different</u> patient decision aids. They are evidence-based tools describing several options, recommendations and consequences of choices, and creates the basis for the decision process. The aim is	The tool consists of written information material. The decision process together with the health care professionals, takes place face to face, in a private setting, with no other agendas. If requested by the	Interdisciplinary team	A continuous process until a decision is made by the patient. The tools for diet and PA are introduced at the

	to help the patient consider each option in relation to his/her overall life situation and make a choice that fits the patient well.	patient, peers with SCI are accessible, ready to share their own experiences related to PA and diet.		goalsetting meetings approx. 4 and 5 weeks after admission respectively.
Goal setting meetings	A setting with the patient where goals for the rehabilitation are defined including goals related to PA and healthy diet.	Previous goals are evaluated and new goals are defined for the next 14 days. Asking the patient about goals for PA and healthy diet is mandatory.	Interdisciplinary team	Every 14 days
Follow up 3 months after discharge.	Follow up in an outpatient setting on the course of BMI and healthy diet.	The follow-up is a face-to-face interaction based on the patient decision aids for diet	Nurses	Once

Interdisciplinary team: Medical doctor, nurse, physiotherapist, occupational therapist, social worker, psychologist.

SCI: Spinal Cord Injury; PA: Physical Activity; BMI: Body Mass Index; DXA: Dual-energy X-ray Absorptiometry