

What does participating in the Verona Research Group (VRG) research project mean?

Who can participate as a therapist?	To participate in this project by recruiting patients and conducting assessments and treatments, you must be an IBITA member or associate member
What about ethics?	Ethical approval is required for members to participate. Gaining ethical approval is the responsibility of the VRG. If you are a private practitioner and have no access to ethical review, we may be able to submit an ethics application for your practice through professional organisations or by linking private practices/ clinics with hospitals or similar that provide ethical review. Do not let this issue deter you from considering participation.
What kind of patients would I recruit?	Most patients with chronic stroke who can walk with or without assistance or initiate a reach could be considered for recruitment. The patient may already be seeing you or it may be a patient of a colleague. The patient must have personal goals related to their rehabilitation. It will be your responsibility to identify a patient who has potential to improve their movement quality for walking or reach to grasp with 12 interventions based on the Bobath concept delivered by you. You will also need to decide which is the primary movement quality parameter you are seeking to improve. For gait (10m walk), the choices are • limb angle (hip extension) in late stance, • effective leg length in swing, • step length symmetry or • swing time symmetry (see Protocol) For reach and grasp, the choices are • trunk angle displacement, • elbow extension, • movement duration, • peak hand velocity. (see protocol) For reach and grasp, you will also determine the reach task; the starting position of the hand, where (and what) the object is and whether the patient will grasp it or just touch it.
How many participants can I recruit?	You can recruit between one and five participants.

Is there training?	All therapists recruiting patients will need to complete specific online training and zoom/teams training prior to commencement. These will be held in your time zone (or close to).
Will I be conducting assessments?	The treating therapist will be using Smart phones to collect kinematic and kinetic data at the six assessment times. This is easier than it sounds, the phone does most of the work. You need to learn how to set up the phone on a stand in the right place and how to turn on the data collection. The rest is automatic. You will then need to download it, store it and transfer the data to our experts. The training will ensure you know how to do this, and you will always have a contact person to check with. In addition, there is a test run before each data collection so you can check everything is working You will also use the Canadian Occupational Performance measure together with the participant to document and rate personal goals before and after the interventions.
Do I need to find a blinded assessor?	Yes, in addition to the technology assessments, there are clinical assessments that are required on 3 occasions, baseline, one week and one month after the intervention, taking 30 – 60 minutes. These measures need to be taken by any therapist who is not aware of the protocol for this study, or of the treatment the patient is receiving, just that the patient is a participant in research.
Can I deliver any treatment that I think is appropriate?	Yes, you are free to determine your treatment, as long as it fits within the Bobath concept. The protocol includes 12 treatments over a 4 – 6 week period.
Am I required to document my treatment?	Yes, you will need to document each treatment and apply the MBCP as an overall summary of your assessment findings and treatment directions.
Is there a payment towards the costs of the study?	There is a payment from IBITA of 800 euros for each participant who completes the study. This, of course, only goes a small way towards recompensing your time for recruitment, assessments and interventions. It can also be utilised for the blinded assessor. If this was a commercial research study, you would probably receive more than 3,000 euros for each participant. We are depending on the good will of IBITA members to contribute their time to enable the study to be completed for <50,000 euros for the total study. Similarly, the VRG members are giving of their time without recompense.

Can the patient or government/ insurance company) be charged for the assessment s and/or interventions?	In most countries, it is not permitted to charge the patient, government or other provider for a session when research is being conducted, even though the patient may benefit from these interventions.
Will I get the data back for my individual patients?	Yes, you will receive a report on the outcomes for your individual patient(s), with all data analysed for yourself and a simple language version to share with your patient.
For reporting the data in IBITA and external to IBITA, will I be anonymous?	Yes, the only details that will be shared will be your country (or region if you are a sole member) and the total number of advanced, basic and trainee members.
Can I report the findings from my patients at local conferences or similar?	Most likely, we are hopeful that this will be possible, we will need to ensure that we don't limit our publication options for combined data.
If I express my interest in taking part and then decide it is too difficult, can I withdraw	Yes, you can withdraw at any time in this process. However, if you commence with a patient, we would ask that you see it through if at all possible, even if the outcome will not be good. We need to minimise drop out of patient participants. We will need to report some data on every patient recruited.
What about the qualitative component?	You can only participate in the qualitative component if you have recruited a patient into the quantitative component. However, participation in the qualitative component is optional, both for yourself and for the patient participant.
What will the qualitative study be?	The patient will be asked to participate in a semi-structured interview to discuss their experience of Bobath rehabilitation.
What will be my role in the qualitative study?	You may be required to assist only in the coordination of the interview time/place between the patient and the interviewer. The interview will be undertaken by an experienced qualitative researcher either online or in person. All data collection, transfer and analysis will be the responsibility of the VRG.