Northumbria Healthcare
NHS Foundation Trust

PARAS
Physical Activity Routines
After Stroke

Delivery checklist and reflection form

Name :

Date :

Health Innovation
North East and North Cumbria

Northumbria
University
NEWCASTLE

Newcastle
University

Physical Activity Routines After Stroke

Use this form to aid refection on your delivery of PARAS. This form can be used to aid peer reflection. Please mark the answers that are applicable.

Invite and introduction to the PARAS programme			
Checklist	**Covered**		
	Yes	**No**	**N/A**
Provided with PARAS invite	☐	☐	☐
Provided with workbook and signposted to welcome page	☐	☐	☐
Introduced to PARAS programme	☐	☐	☐
Advised on safety	☐	☐	☐

Reflection
Questions to consider in your reflection:
How did you decide when to invite the stroke survivor to take part in PARAS?
Do you think the timing was appropriate for this stroke survivor and why?
Did the stroke survivor demonstrate any resistance to taking part in PARAS? If yes how could you have avoided this resistance?
Do you think the stroke survivor understood the concept of PARAS e.g. supported self-management?
Are you happy that you understand the absolute and relative contraindications to exercise post stroke and what to do if you have any concerns?
If not how are you going to increase your knowledge in this area?

Reflection on invite and introduction to PARAS programme

Physical Activity Routines After Stroke

PART 1 - Preparation

Checklist	Covered		
	Yes	No	N/A
Introduction to Part 1	☐	☐	☐
Advised to complete about me section	☐	☐	☐
Advised to complete outcome measures	☐	☐	☐
Discussed the benefits of moving more and sitting less	☐	☐	☐
Discussed potential outcomes of moving more and sitting less (if in the community)	☐	☐	☐
Advised stroke survivor to write what they would like to achieve in the next 12 months in terms of physical activity	☐	☐	☐

Reflection
Questions to consider in your reflection:
Were they able to complete the physical activity diary correctly following your instruction if in the community?
If not what advice would you give next time?
Did you provide enough support to enable the stroke survivor to decide on potential outcomes and a long-term goal? If not how will you alter your instruction next time?
Did the stroke survivor find it hard to complete the outcome measurements? If so, how could you adapt your guidance to support future stroke survivors with this?
Did the completion of the outcome measures enable your behaviour change conversation? e.g. if low mood was identified were you able to discuss this later in the context of physical activity?

Reflection on Part 1 - Preparation

Physical Activity Routines After Stroke

PART 2 – Goal setting, action planning and barrier identification

Checklist	Covered		
	Yes	No	N/A
Identification of potential physical activities	☐	☐	☐
Identification of short term goal	☐	☐	☐
Identification of why the goal is important	☐	☐	☐
Goal timeline identified	☐	☐	☐
Identification of self-monitoring tool	☐	☐	☐
Action plan identified	☐	☐	☐
Social support identified	☐	☐	☐
Confidence scale completed and stroke survivor scoring 7 or above	☐	☐	☐
Barriers identified	☐	☐	☐
If-then plans identified if undertaking PARAS in home and community	☐	☐	☐

Reflection
Questions to consider in your reflection:
Was the stroke survivor able to identify a short-term goal themselves? If not how did you support them to do so?
Was the stroke survivor able to write their own goal? If not could they have been supported to do so?
Was the stroke survivor able to link the goal to the outcome they wished to achieve?
If in the community was the stroke survivor able to identify an activity they could undertake in the local area? Were you able to support them with this using your physical activity options booklet? If not do you need to research and add more options to your booklet? Do you need to work with local services to develop physical activity options in your area?
Do you think you used your OARS skills appropriately in this session? If not how could you improve on this in the future?

Reflection on Part 2 - Goal setting, action planning and barrier identification

PART 3 – Reviewing your progress

Checklist	Covered		
	Yes	No	N/A
Outcome measures repeated	☐	☐	☐
Review of current goal	☐	☐	☐
Reflection on whether or not goal was achieved	☐	☐	☐
Monitoring of emotional consequences of goal achievement and affirmation	☐	☐	☐
Discussion on maintenance	☐	☐	☐
New goal formulated	☐	☐	☐
Discussion on additional resources	☐	☐	☐

Reflection
Questions to consider in your reflection:
Were you able to time the review with the timeline for completion of the short-term goal? If not why not?
How did you deliver the review e.g. was it face-to-face, by telephone? Was this an appropriate form of delivery? If not how might you alter this next time?
If the stroke survivor did not achieve their goal was there anything else you could have done to change this outcome?
Did anything in their language reveal that they might not have achieved their goal e.g. 'I could try this…. I might have a go at this'.' I'll probably achieve this.'?
Did the stroke survivor have any difficulties with self-monitoring? If so how did you address this? Would you offer different advice to another stroke survivor on self-monitoring in the light of this finding?
Did the stroke survivor manage to use the social support they initially identified? If not how did you address this? Has this altered the advice you will give in the future regarding social support?

Reflection on Part 3 - Reviewing your progress

Physical Activity Routines After Stroke

Delivery of behaviour counselling techniques

Checklist	Covered		
	Yes	No	N/A
Open questions	☐	☐	☐
Reflection	☐	☐	☐
Affirmations	☐	☐	☐
Summarising	☐	☐	☐

Reflection
Questions to aid reflection
Are there any ways that you feel you could develop your behaviour counselling techniques?
Did you use many closed or leading questions or have to cue the stroke survivor into an answer e.g. 'what about making your goal around walking because you are struggling in this area'. How could you make your questioning more open to allow the stroke survivor to formulate their own goal?
Did you use much affirmation? e.g. 'Well done, you've worked really hard on your goal and achieved it within the timeframe'.
Did you use affirmation too much e.g. praising the patient for everything rather than when praise was due?
If you didn't use affirmation what types of affirmations do you think you could have included?
Did you notice who did most of the talking? If it was you how could you alter your delivery to encourage the stroke survivor to lead the conversation?
Did you feel you were reliant on the workbook to guide the conversation? If so how could you make the conversation more natural?
Do you feel you supported the conversation or directed it?

Reflection on delivery of behaviour counselling techniques