

**Tool 4.1: IDENTIFYING BARRIERS & DRIVERS: PROGRAM**

**Section in Planner: Phase 2, Step 4 (4.1)**

**Why is this important?**

Planners are encouraged to systematically examine potential barriers (challenges) and drivers (facilitating or supporting factors) to the implementation of the selected/preferred program option. When introducing any change, what is often considered at the outset to be a simple adjustment to the current way of doing things can have much broader impacts as the full extent of the proposed change becomes clear.

**How to use this tool:**

The Stroke Recovery in Motion planning model provides an established framework\* for identifying and addressing barriers and drivers to program implementation by grouping potential issues into three categories.

This worksheet outlines factors related to one category, *attributes of the exercise program* itself. You will have answers to most of these questions from the work you completed in Phase 1. Explore any issues that are not clear or present potential challenges. Rank the priority of each issue. Remember to consider possible assets; you will want to leverage any key advantages or local support for implementation. Use and adapt this tool to suit your own setting and circumstances by adding factors, as needed.

To ensure you’ve adequately heard and considered multiple perspectives, it is useful to have these assessments completed by different stakeholders, e.g. program participants, provider administrators, those responsible for program delivery including instructors, volunteers, and program managers or supervisors.

*\** Graham ID, Logan J. Innovations in knowledge transfer and continuity of care. Can J Nurs Res. 2004;36(2):89–103.

For full planner visit: [**https://www.afterstroke.ca/resources/srimp/**](https://www.afterstroke.ca/resources/srimp/)

**Phase 2, Step 4: Identification of Barriers and Drivers – factors associated with the EXERCISE PROGRAM**

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| The following factors associated with the ATTRIBUTES OF THE EXERCISE PROGRAM are known to influence implementation. Assess these factors as they relate to your selected program(s) to identify potential barriers (challenges to overcome) or drivers (supportive assets) to implementation. Rank the priority of each factor. | | Potential BARRIER  ⌧ | | Potential DRIVER  🗹 | | NOT SURE  (explore further) | PRIORITY  (1-12) |
| 1 | Does the exercise program meet established training principles, standards and guidelines and include specific components to address the needs of people with stroke? |  | Does not meet guidelines |  | Meets guidelines |  |  |
| 2 | What is the comparative benefit of this exercise program with other management options, measures, or program options for this community? |  | Less benefit |  | Greater benefit |  |  |
| 3 | Is there a good fit between the exercise program and (local) target population? (*feasibility and applicability for local community)* |  | Poor Fit |  | Good Fit |  |  |
| 4 | What is the degree of difficulty to implement this program? Can we maintain program ‘fidelity’ (i.e. deliver it exactly as designed)? |  | Difficult to implement and maintain fidelity |  | Easy to implement and maintain fidelity |  |  |
| 5 | Do you have access to any required scientific or technical assistance with program elements? *e.g. advice/support from program developer?* |  | Minimal/no support |  | Good support |  |  |
| 6 | To what extent can the program be adapted; what is the degree of flexibility allowed in implementation of the program? |  | Program not flexible |  | Program flexible |  |  |
| 7 | How would you describe the adequacy of program training requirements including support for preparation of instructors, volunteers and/or attending caregivers? |  | Not adequate |  | Adequate |  |  |
| 8 | How would you describe the adequacy of participant supervision? |  | Not adequate |  | Adequate |  |  |
| 9 | Does the program include direction on how to monitor and measure the effectiveness and impact of the program? |  | No monitoring process or plan |  | Good monitoring process and plan |  |  |
| 10 | Does the program provide/suggest a process for continuous evaluation? |  | No process |  | Effective process |  |  |
| 11 | Are you able to address all commissioning requirements? *e.g. certification, licensing, insurance, policies, other regulatory processes; safety and emergency procedures?* |  | Not able to address |  | Can address all |  |  |
| 12 | Are you able to address any required Partnership or Collaboration Agreements? |  | Not able to address |  | Can address all |  |  |
|  | Other factors? |  |  |  |  |  |  |