

Timepoint -2 Survey analysis

rechargeTM was made available to 24 clinicians for review and evaluation. 20 returned their questionnaire within the required timeframe, following access to the **recharge**TM program. They represent a broad range of disciplines who are the target clinicians for this project- see table 1.

Table 1: Disciplines and numbers of **recharge**TM reviewers.

Discipline	No. Clinicians
Social Worker	5
Occupational Therapist	5
Speech and Language Pathologist	2
Rehabilitation support worker	2
Psychologist/Psychotherapist	5
Other	1
Total	20

Reviewers were asked reflect on the feasibility of using **recharge**TM materials as an intervention tool for clients living with fatigue post mTBI by rating their agreement with statements on a 7 point Likert scale.

Analysis

A descriptive analysis of the survey data was undertaken. Positive scores (strongly agree and moderately agree) were deemed as success criteria and were summed for clarity of reporting and below reports the percentage of responders for each question under the domain headings.

All respondents reviewed the materials before responding to the survey, however, only 8/20 respondents reported using the **recharge**TM materials with clients, of this group the average client usage was 3. Barriers related to time limitations and COVID-19 constraints are cited, as explained below.

Acceptability

Acceptability related to the extent that the **recharge**TM programme is judged as suitable and satisfying to the programme deliverers. Self-efficacy of the clinician had been found to be a strong predictor of tool use, and questions to explore clinician knowledge and confidence were included.

78% of respondents (n=19) either strongly or moderately agreed that **recharge**TM has improved their knowledge with working with fatigue post mTBI.

74% of respondents (n=19) either strongly or moderately agreed that **recharge**TM has improved their confidence with working with fatigue post mTBI.

95% of respondents (n=20) either strongly or moderately agreed that **recharge**TM has given them practical tools to address fatigue post mTBI.

90% of respondents (n=20) either strongly or moderately agreed that **recharge**TM materials are suitable to address fatigue post mTBI.

85% of respondents (n=20) either strongly or moderately agreed that they were satisfied with the **recharge**TM materials.

Demand

These questions aimed to assess to the demand (i.e. extent of likely use) of the **recharge**TM materials.

90% of respondents (n=20) either strongly or moderately agreed that they plan to use the **recharge**TM materials frequently when addressing fatigue post mTBI.

84% of respondents (n=19) either strongly or moderately agreed that they plan to share this information with their colleagues.

85% of respondents (n=20) either strongly or moderately agreed that their practice has been or will be improved by the **recharge**TM materials.

89% of respondents (n=19) either strongly or moderately agreed that they anticipate a positive impact on client outcomes.

100% of respondents (n=18) either strongly or moderately agreed that they will continue to use the **recharge**TM materials.

95% of respondents (n=19) either strongly or moderately agreed that there is merit in evaluating the **recharge**TM materials further.

Access and Usage

Access and usage referred to the extent the **recharge**TM program is successfully delivered and implemented by the target clinicians.

95% of respondents (n=20) either strongly or moderately agreed that **recharge**TM is easy to access.

94% of respondents (n=18) either strongly or moderately agreed that **recharge**TM is easy to implement.

94% of respondents (n=19) either strongly or moderately agreed that the language used in the materials is easy to understand.

69% of respondents (n=13) either strongly or moderately agreed that they found it easy to integrate the **recharge**TM materials into their clinical practice.

Qualitative information:

Respondents were asked to report what they found to be the most useful aspects of the **recharge**TM tool. Respondent responses (n=19) can be summarised under 3 main themes, content, application and accessibility.

Four respondents reported that they found the content of rechargeTM most helpful.

'so far it has helped me learn more about chronic fatigue in clients' P18

'I like so many components of the materials - the distinction between physical, brain and emotional fatigue, the recognition of sleep, medication and activity. Lots to like!' P11

Four respondents commented that they found the ease of application of the materials most helpful, supporting client participation and engagement.

'Easy to follow and add into current treatment plans/practice. Easy for clients and clinicians to understand and participate /implement.' P15

"Ease of access and steps are outlined for clinician and client'. P3

11 respondents reported that they found the accessibility of the rechargeTM tools most helpful, citing clarity, conciseness, and straightforwardness.

'Modules are a good length for implementing without feeling overwhelming for the client.' P5

'They are straightforward and provide tangibles for the clients.' P16

Summary:

Initial feasibility review was conducted using descriptive statistics. 20 out of 24 clinicians who had received the materials responded to the survey within the required timeframe. The respondent's responses were overall positive, indicating that they found the **recharge**TM materials, acceptable, that there is demand for the tool and the package is easy to access and implement. This was further supported by the qualitative feedback. Of note, 100% of respondents (n=18) agreed that they will continue to use the **recharge**TM materials and 95% of respondents (n=19) agreed that there is merit in evaluating the **recharge**TM materials further.

Only 8 of the respondents had been able to use the tools with clients. Barriers to implementation include tight timeframes between receipt of materials and review, and disruption to normal working practices by the pandemic. We hope to assess this further at the timepoint 3 review when clinicians have had access to the tools for a longer period (6 months). We would also assess whether there has been any changes in clinician reported confidence and knowledge in the management of fatigue post mTBI as a result of access to the **recharge**TM program. We will also look for areas for further development of **recharge**TM program.

Client feedback

Three clients responded to a short in-house feedback questionnaire. All respondents positively endorsed items regarding **recharge**TM's usefulness and application to help better manage their fatigue. Two respondents

positively endorsed the effectiveness of the program, with one reporting they are undecided due to the program just starting.

One client commented ' I have only completed module 1 and it helped me to understand. I loved the flip through of the program and can't wait to get to my fatigue tool kit.'

This, albeit limited, feedback indicated that the program is received positively by clients. Further evaluation would be merited regarding client utility and clinical outcomes of the program.