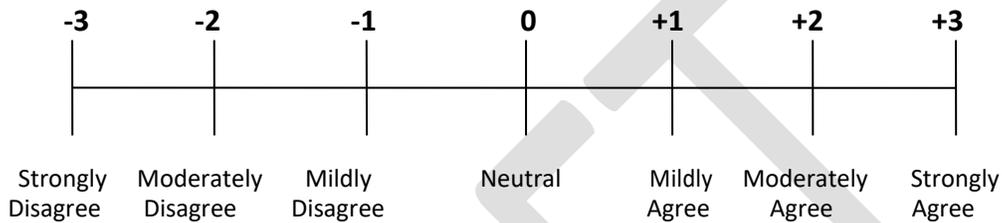


Hull-Ellis Concussion and Research Clinic
Standardization of Exercise Prescription:
Precision Exercise and Activity Calculator for Concussion (PEAC Concussion)
Feasibility Survey

This survey asks you to reflect on the feasibility of using the Exercise Prescription Intervention Calculator (PEAC CONCUSSION):



Using the above scale, please indicate how strongly you agree or disagree with each of the following statements. If a particular question does not apply to you or your patient, enter N/A in the “0” or “Neutral” column):

ACCEPTABILITY	-3	-2	-1	0	+1	+2	+3	N/A
<i>Acceptability refers to the extent that a new idea, program, process or measure is judged as suitable, satisfying, or attractive to program deliverers.</i>								
I am fully satisfied with the PEAC CONCUSSION tool.								
I am satisfied with how PEAC CONCUSSION and the resources are created.								
I am satisfied with the communication mechanism for the PEAC CONCUSSION process.								
I believe that the PEAC CONCUSSION is a safe and effective way to prescribe return to exercise and activity levels for concussed patients								

***Acceptability** refers to the extent that a new idea, program, process or measure is judged as suitable, satisfying, or attractive to program deliverers.*

I am fully satisfied with the tool.

I am satisfied with the resources provided.

I am satisfied with the education process (e.g., easy to follow and apply, etc...).

DEMAND	-3	-2	-1	0	+1	+2	+3	N/A
<i>Demand refers to the extent that a new idea, program, process, or measure is likely to be used (i.e., how much demand is likely to exist?).</i>								
The use of PEAC CONCUSSION fits within the current literature in concussion and return to activities								
The implementation of PEAC CONCUSSION has a positive effect on innovative concussion intervention and concussion care as part of brain injury rehab								
There is merit in continuing PEAC CONCUSSION as a tool for intervention								

I believe the tool and resources provided was appropriate for physicians.

IMPLEMENTATION	-3	-2	-1	0	+1	+2	+3	N
<i>Implementation refers to the extent a new idea, program, process, or measure is successfully delivered to intended participants in some defined, but not fully controlled, context.</i>								
The PEAC CONCUSSION implementation process was well planned and communicated to staff.								
There is good buy-in for the continued use of the PEAC CONCUSSION.								
PEAC CONCUSSION has the resources needed to be continued successfully.								

***Implementation** refers to the extent a new idea, program, process, or measure is successfully delivered to intended participants in some defined, but not fully controlled, context.*

The information provided was fully delivered as intended for those in attendance.

The information provided increased knowledge of the tool and resources for those in attendance.

The information provided the resources needed to be conducted successfully.

***Demand** refers to the extent that a new idea, program, process, or measure is likely to be used (i.e., how much demand is likely to exist?).*

The tool is aligned with current research findings in concussion as related to return to activities
 The tool fits within the organizational culture of Brain rehab and UHN.
 There is merit in continuing the use of PEAC CONCUSSION in concussion care.

PRACTICALITY	-3	-2	-1	0	+1	+2	+3	N/A
<i>Practicality refers to the extent that an idea, program, process, or measure can be carried out with intended participants using existing means, resources, and circumstances and without outside intervention.</i>								
The PEAC CONCUSSION was easy to implement.								
The mechanisms within the PEAC CONCUSSION process are effective and efficient.								
The use of PEAC CONCUSSION has been well received by staff.								
The use of PEAC CONCUSSION has been well received by patients.								
The use of PEAC CONCUSSION had appropriate resources (e.g., staffing and information).								

***Practicality** refers to the extent that an idea, program, process, or measure can be carried out with intended participants using existing means, resources, and circumstances and without outside intervention.*

The tool was easy to implement.
 The implementation of the tool was conducted effectively and efficiently.
 The tool and resources had a positive effect on those who used it.
 The tool and resources had a positive effect on patients.
 Appropriate resources were provided (e.g., staffing and information).

INTEGRATION	-3	-2	-1	0	+1	+2	+3	N/A
<i>Integration refers to the extent a new idea, program, process, or measure can be integrated within an existing system.</i>								
The use of PEAC CONCUSSION is sustainable.								

LIMITED EFFICACY	-3	-2	-1	0	+1	+2	+3	N/A
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Limited Efficacy refers to the degree that a new idea, program, process, or measure shows promise of being successful with the intended population, even in a highly controlled setting.

The PEAC CONCUSSION and the resources provided can be implemented and used easily.								
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Limited Efficacy refers to the degree that a new idea, program, process, or measure shows promise of being successful with the intended population, even in a highly controlled setting.

The PEAC CONCUSSION tool and the supporting resources can be easily implemented and used by healthcare professionals in concussion within UHN and province wide to improve recovery time and timely return of concussed patients to pre-injury activities post concussion.

DRAFT