

# Successfully involving service users and health care providers in a Cochrane systematic review of physiotherapy for people with stroke

Alex Pollock<sup>1</sup>, Gillian Baer<sup>2</sup>, Pauline Campbell<sup>1</sup>, Pei-Ling Choo<sup>3</sup>, Anne Forster<sup>4</sup>, Jacqui Morris<sup>5</sup>, Valerie M Pomeroy<sup>6</sup>, Peter Langhorne<sup>7</sup>

## Background to this project

### What was our research question?

**Our research question:** What is the best way of delivering physiotherapy to people who have had a stroke?

**Why was this question important?** There are several different theoretical approaches to the delivery of physiotherapy after stroke. How these are described and delivered can vary considerably. In order to help physiotherapists deliver the most effective treatments to their patients it is important to know which approaches give the best results.

### What was our research method?

**Our research method:** an update of a Cochrane systematic review.

What is a Cochrane systematic review? A Cochrane systematic review summarises the results of clinical trials, providing the best evidence on the effectiveness of healthcare interventions.

Why an update? A Cochrane systematic review bringing together all the clinical trials of physiotherapy approaches for people with stroke had been published in 2006. New trials had been published and an update was important in order to include these new trials.

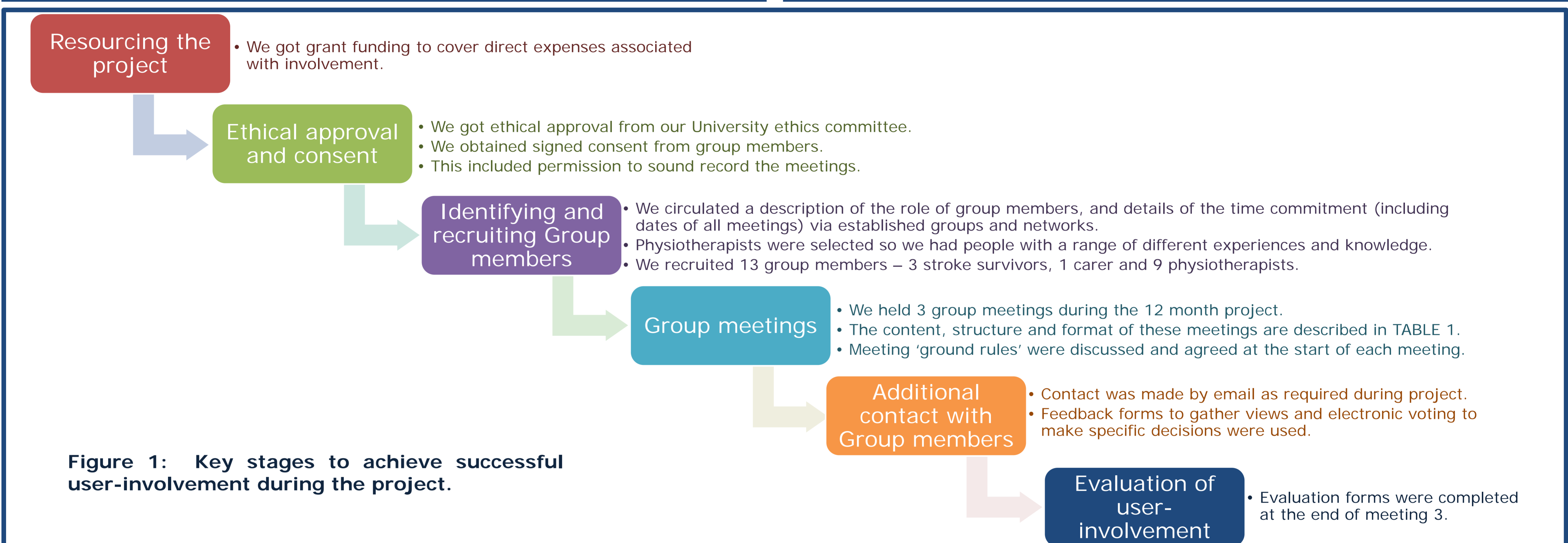
## User-involvement in this project

### Why was user-involvement important?

- to make sure the updated review was clinically relevant.
- to make important decisions about whether to include (or exclude) international evidence arising from different cultures and healthcare systems
- to ensure the updated review impacted on practice.

### How did we successfully involve users?

- The key stages which led to successful involvement are outlined in Figure 1.
- We used formal group consensus methods (called the nominal group technique) to reach consensus decisions on a number of issues. Using this technique users 'voted' on a number of statements (see Table 1).
- The decisions made by the users directly impacted on the review update.



	Meeting 1	Meeting 2	Meeting 3
<b>Time</b>	3.5 months (into 12m project)	5 months	11 months
<b>Aim of meeting</b>	To discuss categorisation of interventions and inclusion of evidence from the international trials identified in the 2007 review.	To explore descriptions of treatment components and reach consensus over descriptions and categorisations.	To agree key clinical implications arising from completed review. To agree dissemination strategies.
<b>Presentation of material at meeting</b>	<ul style="list-style-type: none"> <li>• What is a Cochrane review?</li> <li>• Overview of 2007 Cochrane review</li> <li>• Details of categorisation of interventions in 2007 version</li> <li>• Exploration of content of foreign-language paper interventions</li> </ul>	<ul style="list-style-type: none"> <li>• Details of published taxonomies of rehabilitation interventions</li> <li>• Summary of responses from group members</li> </ul>	<ul style="list-style-type: none"> <li>• Results of the review</li> <li>• Results of meta-analyses</li> <li>• Results of sub-group analyses</li> <li>• Limitations of analyses</li> </ul>
<b>Statements discussed and voted on</b>	A: "The current categories are appropriate and clinical relevant." B: "These international trials should be included in our review of physiotherapy treatment approaches." C: "The interventions studied in these international trials are similar to one another"	A: "The new categories are appropriate and clinically relevant" B: "The stated names are appropriate and clinically relevant."	No voting was carried out during meeting 3. There was discussion around the perceived clinical implications of the findings of each analysis An evaluation form was completed.

**Table 1: Details of the content and structure of the 3 group meetings.**

## Discussion and Conclusions

- The involvement of key stakeholders impacted on all areas of the review, including; inclusion of international studies, classification of treatments, and comparisons explored within meta-analysis.
- Local dissemination strategies aiming to translate review evidence into practice were formed.
- User-involvement significantly influenced decisions around the scope and format of the review, and ensured relevance and accessibility of the output.
- This approach to user-involvement has implications for other systematic reviews.

The updated review is published in the Cochrane Library, with a description of the user-involvement:  
*Pollock A, Baer G, Campbell P, Choo PL, Forster A, Morris J, Pomeroy VM, Langhorne P. Physical treatment approaches for the recovery of function and mobility following stroke. Cochrane Database of Systematic Reviews 2014 XXXXXXX*

Four members of the user group and two of the researchers involved in this project led a workshop based on this user-involvement at the 2014 UK Cochrane Symposium.

<sup>1</sup>Nursing, Midwifery and Allied Health Professions (NMAHP) Research Unit, Glasgow Caledonian University; <sup>2</sup>Queen Margaret University; <sup>3</sup>Glasgow Caledonian University; <sup>4</sup>University of Leeds; <sup>5</sup>University of Dundee; <sup>6</sup>University of East Anglia; <sup>7</sup>University of Glasgow.