Version 1 19-1-18

# LIVELY Physical Activity Intervention in COPD

# **Consultation Scripts for Health Professionals**



# Preparation in Advance of Physical Activity Consultation (Appointment 1)

**Preparation in Advance of Physical Activity Consultation (Appointment 1)** 

- 1. Briefly review the patient's chart to become familiar with the patient's current status and documentation.
- 2. Prepare the patient's chart and any other resources needed for the appointment, e.g. pedometer and step diary, a spare pedometer, oxygen saturation monitor, oxygen cylinder for a patient on LTOT.
- The educational topic from LWWCOPD for Pulmonary Rehabilitation can be accessed from the Tool Kit to deliver skills relating to 'Management of Breathlessness"
- Insert any specific information you wish to cover during the PA Review on the PA consultation review in the patient's chart.

# LIVELY Physical Activity Consultation Script (Appointment 1)

#### Introduction to patient

- 1. Greet the patient on arrival and introduce yourself.
- 2. Explain this appointment will take about 1-1.5 hours and indicate if the patient needs a break just to let you know.
- 3. Ask the patient how they have been feeling in the last week and whether there has been any recent change in their health.
- Insert any changes in the box entitled: 'Has your health state changed....' at the top of the patient's PA consultation plan in their chart.
- 4. Remind the patient of the goal of the programme and the expectations for this appointment:

"The main goal of this programme is to increase the amount of walking you do. Each week you will increase the number of steps you take, and you will need to walk at a moderate intensity (rating 3 on the BORG scale). Today I am going to help you to get started and show you how to use the pedometer and step diary"

**5.** Commence the PA consultation.

**Note:** (Black text = instructions; blue text = speaking part)

#### **Physical Activity Consultation**

This is a SUGGESTED script designed to guide the discussion with the patient and should be used alongside the Physical Activity Consultation plan.

In this programme we will be trying to help you to do some walking to increase your physical activity levels and you indicated that you would be happy to try this.

Today we are going to discuss the general benefits to being physically active and doing more walking and familiarise you with using the physical activity monitor and diary for counting your steps.

Briefly mention the **<u>benefits</u>** (and pros) of doing physical activity and doing more walking with the patient.

Research studies have shown that increased physical activity has a number of beneficial effects on your general health state, "including strengthening your heart".

Additional benefits include ("strengthening your heart"), reduced breathlessness, improved ability to do activities, having more energy, improving your general sleep pattern and mood and having a sense of achievement.

NB This should be kept brief and will be discussed in more detail at the next appointment.

## **1. PEDOMETER FAMILIARISATION**

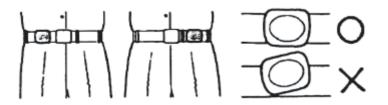
Familiarise the patient with the pedometer and provide them with the instructions for using it.

As we have discussed, the goal of this intervention is to increase the amount of walking you do at a moderate intensity each week. Firstly, I will show you how to work the pedometer.

#### Instructions on use of pedometer

#### A. Wearing the Pedometer

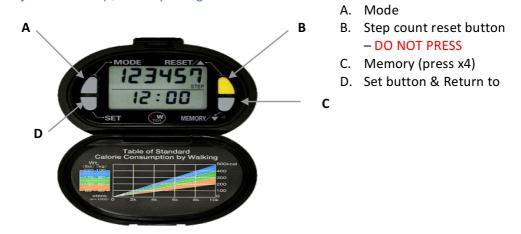
- Attach pedometer to your belt or waistband using the clip
- It should be placed at waist level in the midline of the dominant thigh (refer to baseline assessment sheet to determine this) make sure the pedometer is level
- Check it is not tilting forward due to your tummy. If it is, move to the side.



#### LIVELY Physical Activity Consultation Script, Appointment 1-12

#### Opening the Pedometer

• Drop the cover down by holding the top of the clip with one hand, between your thumb and fingers. Using the other hand, push the projecting portion of the cover case away from the clip, thus opening the case



#### B. Recording the number of steps at the end of the day

- Pull the protective cover down
- *Record the number of steps in your diary*
- Also record any comments about your activity on that particular day
- Any changes in your usual habits
- Any problems with the pedometer
- Any time that it was not worn (record the time you took it off and the time you put it back on)

The diagram below demonstrates where you will see how many steps you have done. This is the number you record each day in your diary.



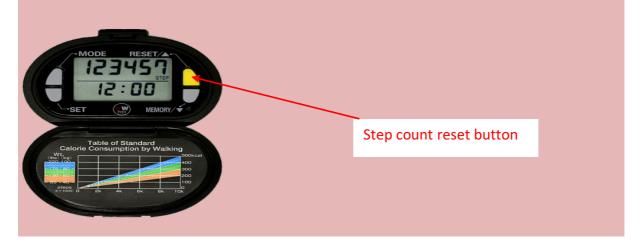
It is important that you use both the pedometer and the diary together.

## For physiotherapist use only

## C. Resetting the pedometer

- Drop the cover down (as explained above)
- Reset the number of steps to zero by pressing the yellow 'Reset' button (button B)
- The step count should now read zero on the screen

The diagram below demonstrates the button to press to reset the number of steps to zero



Insert whether the patient appears to manage the pedometer on the patient's PA Consultation Plan in their chart.

## 2. 20 Step Test

Ask the patient to now place the pedometer on their waist band or belt and take a short walk of 20 steps, counting aloud together.

Ask them to open the pedometer and observe and record the number of steps taken (should be 20).

Ensure the pedometer is recording accurately.

We will now take a short walk of 20 steps to check that the pedometer is working properly.

We will walk at a moderate pace and count the steps out loud together.

Insert whether the pedometer is recording and whether the patient managed to do the 20 steps test accurately on the patient's PA Consultation Plan in their chart.

## 3. Step Diary Familiarisation

Instruct the patient how to record their steps in the step diary (see sample patient step diary below).

Each day record the number of steps you have taken at the end of each day in the column labelled 'step count.' **NOTE-It is important to record this prior to midnight as the pedometer will zero the steps at this time each night.** 

In the column relating to "How breathless you were when walking" use the BORG scale to help you note how breathlessness you were when you were walking

In the comments box record any comments about your activity on that particular day such as any changes in your usual habits, any problems with the pedometer or any time perhaps you forgot to wear it.

Make sure you record the time it was removed and placed back on.

Insert whether the patient appears to understand how to successfully complete the step diary on the patient's PA Consultation Plan in their chart.

## Sample Patient Diary

Practice Week 1	Day/Date	Step Count	How breathless are you when walking?	Comments Box
			Breathlessness Scale (1-10)	
	Wed			
Day 1	1/1/13	2200		
	Thurs			
Day 2	2/1/13	2100		
	Fri			
Day 3	3/1/13	2900	4	
	Sat			Forgot to wear
Day 4	4/1/13	2100		8am - 11am
Day 5	Sun			
	5/1/13	2900	3	
	Mon			
Day 6	6/1/13	2100		
	Tues			
Day 7	7/1/13	2100		
TOTAL STEPS FO	OR THE WEEK	16, 400	••••••	You can a total step

ip the the whole week HERE

Circle the day(s) you plan to do additional walking

## 4. Educational Topic – Managing Breathlessness

Access the advice on 'Managing Breathlessness,' from the toolkit. Use this along with the patients LWWCOPD for PR booklet to discuss the management of breathlessness.

Insert information relating to the educational topic 'Management of Breathlessness' on the patient's PA Consultation Plan in their chart.

## 5. Other Information

Insert on the patient's PA Consultation Plan in their chart if there is any other information relating to the patient.

## **Ending Physical Activity Consultation/Appointment 1**

At the end of this session confirm appointment 2 for the following week and highlight the contact details at the end of the patient diary in case they have any questions or problems in the meantime.

We will now arrange your next appointment for one week from now.

Appointment date: \_\_\_\_\_\_ Appointment time: \_\_\_\_\_\_

For your next appointment please bring with you, your completed activity diary. We can then use this to calculate your step goal for the next week based on the information you have recorded.

You can see from the last page of your diary who to call if you have any queries or concerns this week.

Insert any other information, comments or reminders that you wish to consider at the next appointment on comments page in the patient's in chart.

## **Checklist Visit 1**

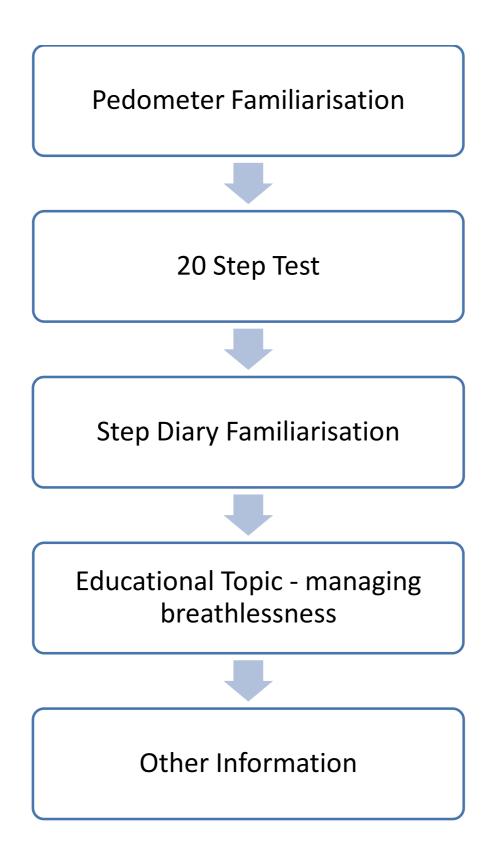
Introduction	
Assess health status	
Explain goal of the programme	
Mention general benefits of PA	
Familiarise patient with pedometer	
Conduct 20 step test	
Explain step diary	
'Managing Breathlessness' topic	
Insert any other information into consultation plan	
Arrange next appointment	

## Appendices

- Appendix 1 Sign post
- Appendix 1 Bigh post
  Appendix 2 Blank PA Consultation Plan
  Appendix 3 List of Patient Materials Pedometer, LIVELY Manual, LWWCOPD for PR booklet.

## Sign Posting/ Flow diagram

Physical Activity Consultation Appointment 1



# **Physical Activity Consultation Plan – Appointment 1**

Date

Has your health state changed in any way since your last visit with us?

**Record health status** 

1. <u>Pedometer Familiarisation</u>

2. 20 Step Test

3. <u>Step Diary Familiarisation</u>

Pedometer Placement: R 🛛 L 🔾

## 4. Educational Topic - Managing Breathlessness

## 5. Other Information

# List of Patient Materials

- 1. Pedometer
- 2. LIVELY Patient Manual
- 3. LWWCOPD for PR booklet

# Preparation in Advance of Physical Activity Consultation - Appointment 2

## Preparation in Advance of Physical Activity Consultation - Appointment 2.

- 1. Briefly re-familiarise yourself with the patients chart and the consultation plan from appointment 1.
- 2. Use the physical activity script to prepare your consultation plan for appointment 2 in advance. In particular, gather information for the following sections.

## **Re-affirm PA levels and Benefits of Physical Activity**

Review the step count recorded in the baseline assessment (if completed) to determine if the patient is highly active, moderately active or sedentary (based on step count clarification in the toolkit).

Insert this information into the table in the patients PA consultation plan, in their chart. This will be used later when setting the patients step goal.

The information below should be used to develop your script surrounding benefits of PA and risks of physical inactivity:

- Look at patient baseline assessment to determine any patient reported benefits to PA
- Refer to the "health professional resource sheet" in tool kit (section 7 of file) to help develop your consultation script
- Also use the "Strategies for increasing PA" in the tool kit (section 7 of file) for benefits of physical activity & risks of physical inactivity

## **Barriers**

Review e.g. the Marcus' Self-Efficacy score if obtained during assessment, and specifically review **barriers** to PA indicated by the patient. Alongside the script prepare in advance the consultation relating to barriers (*and cons*) to PA and how to overcome (*and minimise*) these.

Resources from the toolkit can also support your preparation. For example:

- How to overcome barriers section in 'Strategies for increasing PA'
- Marcus's self-efficacy questionnaire responses to barriers
- Advice on walking programme complaints
- Enlisting Social Support section in 'Strategies for increasing PA'
- Insert this information on barriers on the patient PA Consultation Plan located in the patient's chart.

#### **Additional Strategies**

Based on information from the patient's chart, identify, note any **additional strategies** that should be considered during the consultation.

Also use the resources in the Toolkit to support your preparation. For example:

- Case scenarios may provide similar issues that relate to your patient.
- Insert this information on additional strategies in the patient PA Consultation Plan located in the patient's chart.
  - 3. Prepare the patient's chart and any other resources needed for the Appointment, e.g. a spare pedometer, BORG breathlessness scale, oxygen saturation monitor, oxygen cylinder for a patient on LTOT.

# LIVELY Physical Activity Consultation Script (Appointment 2)

#### Introduction to patient

- 1. Greet the patient on arrival and introduce yourself.
- 2. Explain this appointment will take about 1-1.5 hours and indicate if the patient needs a break just to let you know.
- 3. Ask the patient how they have been feeling in the last week and whether there has been any change in their health since their last visit including any adverse events.
- Insert any changes in the box entitled: 'Has your health state changed....' at the top of the patient's PA consultation plan in their chart. Also note any Adverse Events that may have occurred.
- 4. Remind the patient of the goal of the programme and the expectations for this appointment:

"The main goal of this programme is to increase the amount of walking you do. Each week you will increase the number of steps you take, and you will need to walk at a moderate intensity (rating 3 on the BORG scale). Today I am going to help you to get started and show you how to use the pedometer"

- 5. Retrieve the patients step diary. This data can be used to calculate the step goal.
- 6. Commence the PA consultation.

## **Physical Activity Consultation - Appointment 2**

Follow the **physical activity consultation plan** that you have prepared, and where helpful refer to the suggested script provided in this **physical activity consultation script below**.

This is a SUGGESTED script designed to guide the discussion with the patient and should be used alongside the Physical Activity Consultation plan already completed in advance of the patient arrival.

In this programme we will be trying to help you to do some walking to increase your physical activity levels and you indicated that you would be happy to try this.

Today we are going to discuss the benefits, risks and barriers to being physically active and doing more walking. We may also discuss any additional information that may be important for you.

## 1. RE-AFFIRM PA LEVELS & BENEFITS OF PA

#### **Re-affirm Physical Activity Levels**

Using the script you have pre-prepared surrounding the patient's step count taken from their week 1; reaffirm with the patient what their current PA levels are.

For example:

Suggested script for a patient with an average step count of 7715 might be:

Your activity monitor indicated to us that you are 'somewhat active', in this programme we are trying to help you to do some walking to increase your PA levels"

Would you be willing to do a little more walking?

## **Benefits of Physical Activity**

Discuss the **benefits** of doing physical activity and doing more walking with the patient. Refer to the consultation plan to review what the patient identified as a suggested benefit to them. For example, the patient identified that doing more physical activity would be "good for their heart". [Note "..... " adapt paragraph below based on each specific example]

You suggested that being more physically active would be "good for your heart" and this is correct. Research studies have shown that increased physical activity has a number of beneficial effects on your general health state, "including strengthening your heart.

Additional benefits include ("strengthening your heart"), reduced breathlessness, improved ability to do activities, having more energy, improving your general sleep pattern and mood and having a sense of achievement.

NB This should be brief in relation to 'general benefits' of PA and more detailed for 'disease specific benefits' of PA.

Research studies in patients like you who have respiratory diseases have shown that being more active can lower your fear of your symptoms getting worse and give you better control of your symptoms like shortness of breath.

You mentioned at your previous visit that a benefit to you of doing more walking would be...... Is this still the same? Can you think of any other benefits you would gain from being more active and doing more walking?

> Insert any additional benefits on the patient's PA Consultation Plan in their chart.

## 2. SET A GENERAL GOAL (SMART)

**Set realistic goals (Self-Liberation)** - Choosing the course of action to change the problem and committing to that choice.

Discuss with the patient how to set **realistic** personal goals about their overall plan to increase their physical activity by walking. This should be a relevant functional goal **achievable** in the *12 weeks*.

Discuss and agree a **general goal** i.e. short term 12 week goal that the patient would like to achieve from the PAI. This should follow the SMART format in that it should be **specific** to the patient's individual circumstances/preferences, **measurable** over a time frame (12 weeks), **action orientated** in that they are taking action to walk more, **realistic & relevant** to the patient and be **time based**.

The key is that they take small steps that they believe can help them work towards achieving this goal.

Could we chat about and agree a goal for you that you feel you can really do by the end of the 12 weeks?

Perhaps this would be for you to walk a bit further than normal, or walk a bit faster? This could also be to improve your breathlessness and have less symptoms or maybe just to socialise a bit more with others?

If you plan when you are going to walk this will make it more likely that you will meet your goal.

How do you think you would feel if you achieved this goal?

> Insert this general goal on the patient's PA consultation plan in their chart.

## 3. REVIEW PEDOMETER/STEP DIARY FAMILIARISATION

Note any problems the patient had with the pedometer or step diary in the patient chart and advise accordingly. If the pedometer did not record properly give the patient a second familiarisation week and let them record their steps again. If this was due to the patient having problems using the pedometer, instruct the patient on how to use it again, referring also to flow diagram 1 in the toolkit for advice.

Looking at the patients step diary, explore how the patient managed to use the diary during the past week.

If patient has forgotten to wear the pedometer or has had problems resulting in inadequate data, give the patient a second familiarisation week with the pedometer and diary and ask them to try again.

Insert a brief note about how the patient managed with the pedometer and diary the patient's PA consultation plan in their chart.

## 4. SELF-EFFICACY WALK

Re-cap with the patient, the instructions for using the pedometer and completing their step diary.

Address any issues the patient had with using the pedometer and/or diary.

As we have just discussed, the goal is to increase the amount of walking you do each week. It is important that you walk at a pace where you are moderately breathlessness.

First we will remind you how to work the pedometer in more detail.

#### Complete a Self-Efficacy (SE) walk with the patient.

- 1. Now we are going to take a short walk to see how many steps you can do in 10 minutes when walking at a moderate intensity If you need to rest at any point you do so, but then start walking again as soon as you feel able.
- 2. We will use the BORG scale to see how breathless you feel.

#### Explain the BORG scale:

This scale is used to help us understand how breathless you feel. It goes from 0 to 10, where 0 is no breathlessness at all and 10 is the maximal amount of breathlessness you experience. Ask the patient to indicate which number or words best describe how breathless they feel at the moment.

- > Attach the pedometer and zero the step count.
- Show the patient the BORG scale.

- Take the participant for a 10 min walk at a comfortable speed that would result in them being moderately breathless at the end [i.e. BORG scale 3 or more].
- > Use the BORG scale to help the patient gauge their level of breathlessness.
- Record time and number of steps taken on the PA consultation plan. Also record the BORG scale at the end of the SE walk and the number of rest periods taken during the SE walk.
- Insert the results of the Self Efficacy Walk on the patient's PA consultation plan in their chart.

## 5. SET STEP GOAL

In this section you will work with the patient to set and agree the step goal.

#### Setting the step goal

- 1. Remind the patient of the main goal of the programme: The main goal of this programme is to increase the amount of walking you do. This will be done by increasing the number of steps you take each week. (When walking it's important to feel moderately breathless, rating 3 on the BORG Scale, in order to gain most benefit).
- 2. Use the number of steps taken during the SE walk as a point of reference along with the following factors:

Weekly step count from week 1 BORG during SE walk Rest periods needed during SE walk Any other information from baseline assessment form

3. Use the above factors to calculate the patient's initial step goal and discuss this proposed step goal with the patient. Explore whether they feel this is achievable. Give examples which are suitable for this patient. Refer to the case scenarios in appendix 4 to help you with this.

When we did the short practice walk you managed ----- steps in 10mins. Your weekly step count when you wore the pedometer for 7 days the step count was -----. Keeping this in mind can you suggest a step goal that you feel you could achieve over the next week? It's best to make it possible to achieve.

NB: It may be helpful to provide some examples of how the step counts relate to time spent walking (in minutes).

Depending on the capability and profile of the individual and the severity of their COPD, one of the following could be suggested to result in the patient walking at a moderate intensity.

- a. An additional 10 minute bout of walking on 3 days of the week
- b. An additional10 minutes of walking on 5 days of the week
- c. An additional 5 minutes on 5 days of the week
- d. An additional 5 minutes on 3 days of the week
- 4. Assure the patient that this goal will be revisited next week depending on how they get on.

This will then be increased depending on what works best for you.

#### Self-efficacy walk will be reviewed at weeks 3 and 6.

5. Please refer to case scenarios in the toolkit for examples of how to set a step goal.

Help the patient to write their step goal in their Diary and make a note of this in the consultation plan.

## 6. ACTION & COPING PLAN (BARRIERS)

In this section you will work with the patient to prepare an **Action and Coping Plan** relating to their walking goal.

Additional information provided in the **toolkit** should be used if required to help inform your Action & Coping Plan. These include:

- How to overcome barriers section in 'Strategies for increasing PA'
- Marcus's self-efficacy questionnaire responses to barriers
- Advice on potential walking programme complaints
- Enlisting Social Support section in 'Strategies for increasing PA'
- 1. Discuss with patient ways to ensure they meet their target and to help them to plan their week ahead and avoid failing. This will include discussion of how to overcome any barriers in order to help the patient achieve their weekly walking goal.

If several barriers have been identified select one or two that are key barriers and discuss how to overcome these.

2. Refer to the resources mentioned above (found in the toolkit) to help you respond to particular barriers/obstacles that present.

Let's consider how you could achieve this step/walking goal this week. To help, I am going to ask you some questions and we can write out the plan in your Action Plan.

- 3. The following questions will be used to help put together the patient's action plan for the week ahead.
- Which days do you plan to walk on? Are there any specific days that you could see it being difficult to meet this target? E.g. looking after grandchildren that day. Which are the best days to plan to walk? i.e. are there certain days you feel would be more suitable than others?
- 2. What time of day is better for you to try to walk? Are you more likely to feel too tired in the evening?
- 3. Where will you go to walk? Where are the best places to go to walk?

4. What will you do if ...[insert any specific barriers discussed earlier in the consultation or identified from the Marcus SE scale or that the patient now identifies]? What will you do if the weather is bad? Do you have a back-up plan for indoor walking, i.e. a shopping mall

For example, the patient may have stated that a barrier for them would be that bad weather would stop them getting out doing any walking. In this case discuss how to overcome this barrier and discuss alternate places to walk.

You mentioned that a particular barrier for you would be bad weather as then you would not go out for a walk.

For example, can you think of any alternative places you could walk?

For example, you would plan a different time to go for a walk when the weather improved?

5. What if you cannot make your walk for other unexpected reasons? Let's think of a backup plan?

#### 6. <u>What reminders/prompts/strategies could you use to help you to do the</u> <u>walking?</u>

For example, would setting an alert on your phone help to remind you to do it or leaving your activity monitor on your bed-side table to remind you to wear it again the following day?

You will see in your diary that there is a box in the table for you to record this information each week.

Would having a family member go with you help?

A positive self-talk may help, for example, 'If I go for a walk it will help lift my mood.'

7. Ask patient to rate how confident they are that they will achieve this number of steps via this walking plan.

On a scale of 0-10, how confident are you that you can do this? (With 0=not at all confident and 10=completely confident)

If this is less than 7, the goal needs to be discussed and re-set and this confidence measure reassessed.

If 7 or more, continue the consultation.

- Write the detail of the patient's Action & Coping Plan in their Action Plan/Diary (patient could do this if they wish/able).
- Remind the patient to record in the comments box, any comments about your activity on that particular day such as any changes in your usual

# habits, any problems with the pedometer or any time perhaps you forgot to wear it.

#### > Make a note of this information in the consultation plan in the patient chart.

Explain to the patient that each week you will be meeting to discuss their progress and recalculate their new step goal for the next week based on their progress and the current physical activity guidelines.

Assure the patient that we will work with them to establish the new weekly goals and action plan.

At your next appointment we will discuss your progress with meeting your step goal. We can help you with deciding whether to do more walking, and we can also discuss any problems you may have had and how to overcome these. Then we can agree a new step goal for the following week.



## ADDITIONAL STRATEGIES

Discuss any other additional strategies relevant to this patient, that occurred or that you had noted on the PA consultation plan.

This can be embedded when completing the Action and Coping Plan.

> Insert the additional strategies on the patient's PA consultation plan in their chart.

## 7. OTHER INFORMATION

Insert on the patient's PA Consultation Plan in their chart if there is any other information relating to the patient.

#### **Ending Appointment 2**

At the end of this session confirm next appointment for the following week and highlight the contact details at the end of the patient diary in case they have any questions or problems in the meantime.

We will now arrange your next appointment for one week from now.

Appointment date: \_\_\_\_\_\_

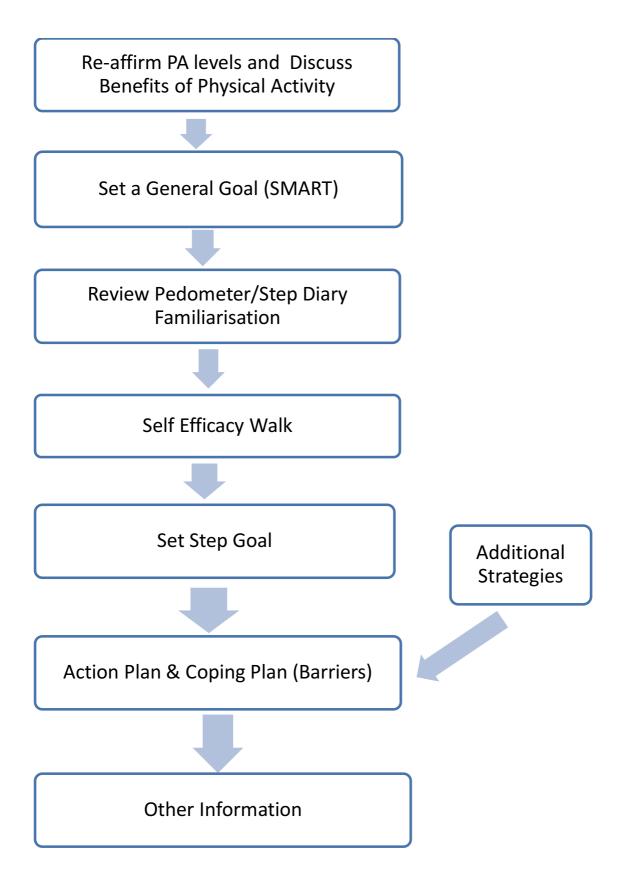
Insert any other information, comments or reminders that you wish to consider at the next appointment on comments page in the patient's in chart.

## **Checklist Appointment 2**

Introduction	
Assess health/any adverse events	
Remind the patient of the goal of the programme	
Re-affirm PA levels	
Re-affirm PA levels	
Discuss the benefits of PA	
Discuss the benefits of FA	
Set general goal (SMART)	
Note any problems with pedometer	
Record steps for the familiarisation week	
Do self-efficacy walk	
Do sell-efficacy walk	
Set step goal for week	
Complete Action & Coping Plan	
Assess patient confidence level	
Consider additional advise based on behaviour abance strategies	
Consider additional advice based on behaviour change strategies	
Discuss any other information	
Arrange next appointment	

Sign Posting/ Flow diagram

Physical Activity Consultation Appointment 2



## **Physical Activity Consultation Plan Appointment 2**

## Date

Has your health state changed in any way since your last visit with us?

Report any Adverse Events

1. Re-affirm PA levels and discuss benefits - insert text used to guide the discussion

2. <u>Set General Goal</u> – based on SMART (Specific, Measurable, Action orientated, Realistic & relevant, Time based) Concept

## 3. <u>Review Pedometer/ Step Diary Familiarisation</u>

Insert steps from familiarisation week in table below:

Day 1	Day 2	Day 3	Day 4	Day 5	Day 6	Day 7

Remember to cross check pedometer with step diary to ensure correct recording of steps.

## 4. Self-Efficacy Walk Results

Steps taken	
Borg scale when completed SE walk	
Number of rest periods needed during SE Walk	
Comments	

## 5. Set Step Goal

Use Step Count inserted from familiarisation week for step goal calculation

Total weekly step count for 7days	
Average daily steps	
Self-efficacy walk result	
Agreed step goal and walking days	

- 6. <u>Complete Action and Coping Plan</u> Include discussion on barriers and insert text used to guide the discussion on solutions. Summarise this information below.
- 1.
- 2.
- 3.
- 4.
- 5.

6.

Additional barriers and solutions

<u>Confidence Level</u> (If this is less than 7/10, the goal needs to be discussed and re-set and this confidence measure reassessed)



7. Other Information

# **Preparation in advance of Appointment 3 - 11**

## Preparation in advance of Appointments 3 - 11

- 1. Briefly review the patient's chart and previous weekly consultation plans to prepare your consultation in advance.
- 2. Use this script as a basis for the weekly reviews. Also refer to the resources in the Toolkit to support your consultation with the patient. For example:

Resources from the toolkit can also support your preparation. For example:

- Other strategies which could support the patient to achieve their walking goal.
- Case scenarios may provide similar issues that relate to your patient that could help you prepare specific sections
- Educational components of the LWWCOPD for Pulmonary Rehabilitation can be accessed to deliver skills relating to 'COPD Self-Management Action Plan' and 'Advice on Medication'.
- By week 5 the 'COPD Self-Management Action Plan' and 'Advice on Medication' should be discussed with patient.
- Insert any specific information you wish to cover during the PA Review on the PA consultation review in the patient's chart.
- > Insert the patient's personal goal in their consultation plan.

# LIVELY Physical Activity Consultation Review Script

# Appointments 3 - 11

Use this script as a basis for the weekly review. Refer to **any specific information you have prepared on the PA consultation plan**; and to the resources in the Toolkit to support your review with the patient.

(Black text = instructions; blue text = speaking part)

## Introduction

6. Greet the patient

7. Explain that the purpose of this appointment is to review their progress with the walking programme and plan for the week ahead.

8. Ask the patient how they have been feeling in the last week and whether there has been any change in their health since their last visit & record any AEs.

#### Insert any changes in the box entitled: 'Has your health state changed....' at the top of the patient's PA consultation plan in their chart. Also note any Adverse Events that may have occurred.

## 9. Remind the patient of the goal of the programme

"The main goal of this programme is to increase the amount of walking you do. Each week you will increase the number of steps you take, and you will need to walk at a moderate intensity (rating 3 on the BORG scale).

5. Remind the patient of their overall personal goal for the 12 weeks.

6. Commence the PA review.

## **Physical Activity Review**

The main focus of the physical activity review appointment is to review the patients progress, setting a walking goal for the following week, complete the action plan (including coping plan) and discuss barriers based on the progress in the past week(s), and how to overcome these.

## 1. Review progress

Review the patient's progress with the Physical Activity Intervention. Insert their weekly step count into the consultation plan and discuss whether they fully, partially, or did not meet their goals.

If the patient fully met their goals (scenario 1), compliment them on their achievement. Specifically explore any success relating to overcoming obstacles in order to achieve their goal.

If the patient has partially (scenario 2) or not (scenario 3) met their goals, discuss any barriers they had. Specifically explore how the patient could overcome these barriers.

Discussion with patient should be based around their progress with their weekly walking goal and also consider the patients 12 week goal set at appointment 2.

Could you tell me your daily steps for each day from your diary?

Let's calculate your average steps for the week.

What was your goal last week?

If the patient has forgotten their step goal and did not bring their step diary/booklet, refer back to the patient notes from a previous appointment to obtain this.

How did it go?

Did you meet that goal?

What have you written in your comments boxes?

#### **Potential Scenarios**

#### Scenario 1: Fully met their goals

1. 'No problem – I did my \_ steps on \_ days and I was fine' (Fully met their goals)

Compliment patient on their achievement, exploring success overcoming barriers

That's great that you managed to meet your goals.

What helped you reach your goal on that day?

#### Scenario 2: Partially met their goals

2. 'I did but I struggled sometimes to get a breath' (Partially met their goals)

Discuss any barriers they had & how to overcome these

Reassure them on how much walking they can do

What days were your steps highest on? Why do you think that was?

What days were your lowest steps on? Why do you think that was?

What did you do that increased your number of steps? Why do you think that worked for you?

Why do you think you did/didn't reach that goal on those days?

#### Scenario 3: Patient did not meet their goals

3. 'I couldn't do it all. I felt very breathless when I tried to do the extra steps so I only did \_\_\_\_\_steps on \_\_\_\_\_days' (Patient did not meet their goal)

Re-visit step target as per previous week & identify which strategies worked to help to do more walking

Recap on benefits of PA

What stopped you from reaching your goal on day \_\_\_\_?

What did you do that didn't work for you when trying to increase your steps? Why do you think that was?

What days were your steps highest on? What do you think helped you to do that amount of steps?

What days were your lowest steps on? Why do you think that was?

What did you do that increased your number of steps? Why do you think that worked for you?

### Review overall (SMART) goal – Appointment 6 only

Discuss with the patient whether their personal goal was **realistic** in relation to their physical activity/walking. Do they still feel this goal is **achievable** in the *12 weeks*?

Discuss and agree whether this goal was unrealistic and needs reduced to a more realistic goal.

If the patient has already met this goal then the focus is to maintain it. Do not specifically increase the overall goal or set a new one. The key is that they take small steps that they believe can help them work towards achieving this goal.

Could we chat about the goal we agreed on at the beginning of the programme?

Do you feel you can really do this by the end of the 12 weeks?

Perhaps we should reduce this to something a little more manageable?

#### > Insert this general goal review on the patient's PA consultation plan in their chart.

## 2. Re-set step goal

In this section you will work with the patient to set and agree the next **walking goal**. The discussion will be based on the scenarios 1, 2 or 3 above [see "**Review Progress**"].

Scenario 1: Fully met their goals – 'No problem – I did my \_ steps on \_ days and I was fine'.

#### Plan:

- 1. Increase number of steps for the following week.
- 2. Recap on the benefits of PA to this patient by referring to previous consultation(s) and additional resources.

Scenario 2: Partially met their goals - 'I did but I struggled sometimes to get a breath'.

#### Plan:

- 1. Reassurance regarding amount of walking they can do.
- 2. Dependent on progress and barriers either keep step goal same as previous week & assure patient you will reassess next week or progress it.
- 3. Recap on the benefits of PA to this patient by referring to their consultation plan and additional resources.

*Scenario 3:* Patient did not meet their goals – 'I couldn't do it all. I felt very breathless when I tried to do the extra steps so I only did \_\_\_\_\_steps on \_\_\_\_\_days'.

#### Plan:

- 1. Re-visit step target as per previous week and identify which strategies worked to do more walking.
- 2. Recap on the benefits of PA to this patient by referring to their consultation plan and additional resources.
- Dependent on progress and barriers, agree on a realistic step goal e.g. do not increase the step goal or reduce it e.g. instead of 500 steps 3 days per week try 300 steps 5 days per week

Your goal for this week is \_\_\_\_\_steps.

#### > Help the patient to write their step goal in their Diary

### 3. ACTION & COPING PLAN (BARRIERS)

In this section you will work with the patient to prepare an **Action and Coping Plan** relating to their walking goal.

Additional information provided in the **toolkit** should be used if required to help inform your Action & Coping Plan. These include:

- How to overcome barriers section in 'Strategies for increasing PA'
- Marcus's self-efficacy questionnaire responses to barriers
- Advice on potential walking programme complaints
- Enlisting Social Support section in 'Strategies for increasing PA'
- 4. Discuss with patient ways to ensure they meet their target and to help them to plan their week ahead and avoid failing. This will include discussion of how to overcome any barriers in order to help the patient achieve their weekly walking goal.

If several barriers have been identified select one or two that are key barriers and discuss how to overcome these.

5. Refer to the resources mentioned above (found in the toolkit) to help you respond to particular barriers/obstacles that present.

Let's consider how you could achieve this step/walking goal this week. To help, I am going to ask you some questions and we can write out the plan in your Action Plan.

- 6. The following questions will be used to help put together the patient's action plan for the week ahead.
- 8. <u>Which days do you plan to walk on?</u> Are there any specific days that you could see it being difficult to meet this target? E.g. looking after grandchildren that day. Which are the best days to plan to walk? i.e. are there certain days you feel would be more suitable than others?
- 9. What time of day is better for you to try to walk? Are you more likely to feel too tired in the evening?
- **10.** Where will you go to walk? Where are the best places to go to walk?

## 11. What will you do if ...[insert any specific barriers discussed earlier in the consultation or identified from the Marcus SE scale or that the patient now identifies]? What will you do if the weather is bad? Do you have a back-up plan for indoor walking, i.e. a shopping mall

For example, the patient may have stated that a barrier for them would be that bad weather would stop them getting out doing any walking. In this case discuss how to overcome this barrier and discuss alternate places to walk.

You mentioned that a particular barrier for you would be bad weather as then you would not go out for a walk.

For example, can you think of any alternative places you could walk?

For example, you would plan a different time to go for a walk when the weather improved?

## 12. What if you cannot make your walk for other unexpected reasons? Let's think of a backup plan?

#### 13. <u>What reminders/prompts/strategies could you use to help you to do the</u> walking?

For example, would setting an alert on your phone help to remind you to do it or leaving your activity monitor on your bed-side table to remind you to wear it again the following day?

You will see in your diary that there is a box in the table for you to record this information each week.

Would having a family member go with you help?

A positive self-talk may help, for example, 'If I go for a walk it will help lift my mood.'

14. Ask patient to rate how confident they are that they will achieve this number of steps via this walking plan.

On a scale of 0-10, how confident are you that you can do this? (With 0=not at all confident and 10=completely confident)

If this is less than 7, the goal needs to be discussed and re-set and this confidence measure reassessed.

If 7 or more, continue the consultation.

- Write the detail of the patient's Action & Coping Plan in their Action Plan/Diary (patient could do this if they wish/able).
- > Make a note of this information in the consultation plan in the patient chart.

Explain to the patient that each week you will be meeting to discuss their progress and recalculate their new step goal for the next week based on their progress and the current physical activity guidelines.

Assure the patient that we will work with them to establish the new weekly goals and action plan.

At your next appointment we will discuss your progress with meeting your step goal. We can help you with deciding whether to do more walking, and we can also discuss any problems you may have had and how to overcome these. Then we can agree a new step goal for the following week.

## ADDITIONAL STRATEGIES

Discuss any other additional strategies relevant to this patient that you noted on the PA consultation plan.

This can be embedded when completing the Action and Coping Plan.

> Insert the additional strategies on the patient's PA consultation plan in their chart.

#### **Educational Components – appointment 5 only**

At appointment 5, discuss with patient the educational components taken from the LWWCOPD booklet – 'COPD Self-management Action Plan' and 'Medications'.

### 4. Other Information

Insert on the patient's PA Consultation Plan in their chart if there is any other information relating to the patient.

#### **Ending the Review Appointments**

#### Ending the weekly face to face or telephone Review Appointments

At the end of each session confirm the appointment for the following week and highlight the contact details at the end of the patient diary in case they have any questions or problems in the meantime.

We will now arrange your next appointment for one week from now.

Appointment day/date: \_\_\_\_\_\_ Appointment time: \_\_\_\_\_

## > Insert any other information, comments or reminders that you wish to consider at the next appointment on comments page in the patient's in chart.

#### **Ending Review Appointment 6**

Explain to the patient that from this point onwards, you will be ringing them at home at an agreed time and day most suitable for them to discuss their progress. Explain that during the phone call you will collect the information they have written in their step diary, including their daily steps. Indicate that you will discuss any issues or problems they might have had and try to discuss ways to help them continue to progress. This means you will be able to calculate their mean daily step count and whether they reached their target or not and to advise accordingly.

For the next 6 weeks you are going to continue on doing exactly what we have done for the previous 6 weeks. However, instead of coming in to see me next week, like today, we will talk over the phone. You will need to continue trying to meet your new goal which we have just agreed on and continue to complete your diary as before.

When I call on you next week we will still discuss how you have got on with your walking goal. We will discuss any reasons you may not have reached that goal and decide on ways to help.

We will now decide on the best time for me to call you each week.

Agree on suitable day and time to call for the next week.

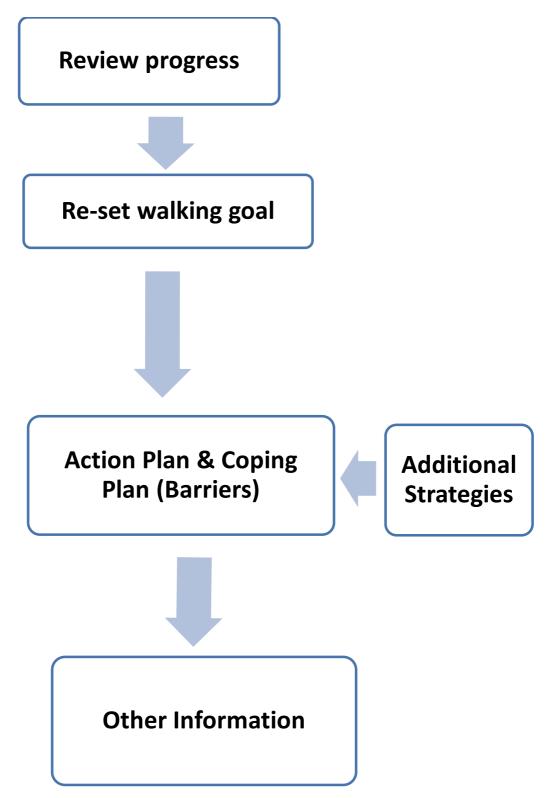
Appointment Day/Date: \_\_\_\_\_\_

> Insert any other information, comments or reminders that you wish to consider at the next appointment on comments page in the patient's in chart.

## Checklist Visit 3-11

International	
Introduction	
Report on patient's health state & record any AEs	
Patient progress reviewed	
Review overall (SMART) goal (appointment 6 only)	
New goal set & inserted into diary	
Action plan & barriers discussed	
Confidence levels with new goal assessed	
Additional strategies discussed	
Additional strategies discussed	
Educational component covered (usually appointment 5)	
Any other information covered inserted in consultation plan	
,	
Next appointment arranged	

Sign Posting/ Flow diagram Physical Activity Consultation Review Appointments 3-11(excluding Appt 5 and 6)



Date \_\_\_\_\_

Has your health state changed in any way since your last visit with us?

**Report any Adverse Events** 

1. <u>Review progress</u> (Recap on Benefits)

#### 2. <u>Re-Set Walking Goal</u>

Step Count inserted from **pedometer (circle agreed walking days)** 

Day	Mon	Tues	Wed	Thurs	Fri	Sat	Sun	Total Steps
No. of steps								
Goal met Y/N								

Remember to cross check pedometer with step diary to ensure correct recording of steps; and check patient can retrieve 7 day memory.

#### Step count calculation

- 3. <u>Complete Action and Coping Plan</u> Include discussion on barriers and insert text used to guide the discussion on solutions. Summarise this information below.
- 1.
- 2.
- 3.
- 4.
- 5.
- 6.

Additional barriers and solutions

#### Confidence Level

(If this is less than 7/10, the goal needs to be discussed and re-set and this confidence measure reassessed)



Date \_\_\_\_\_

Has your health state changed in any way since your last visit with us?

**Report any Adverse Events** 

1. <u>Review progress</u> (Recap on Benefits)

#### 2. <u>Re-Set Walking Goal</u>

Step Count inserted from **pedometer (circle agreed walking days)** 

Day	Mon	Tues	Wed	Thurs	Fri	Sat	Sun	Total Steps
No. of steps								
Goal met Y/N								

Step goal set last week (days and daily steps)	
Step goal (met; partially met on no. of days; not met)	
Total weekly step count on walking days	
Average daily steps on walking days	
Self-efficacy walk result	

Remember to cross check pedometer with step diary to ensure correct recording of steps; and check patient can retrieve 7 day memory.

**Step count calculation** 

- 3. <u>Complete Action and Coping Plan</u> Include discussion on barriers and insert text used to guide the discussion on solutions. Summarise this information below.
- 1.
- 2.
- 3.
- 4.
- 5.
- 0.
- 6.

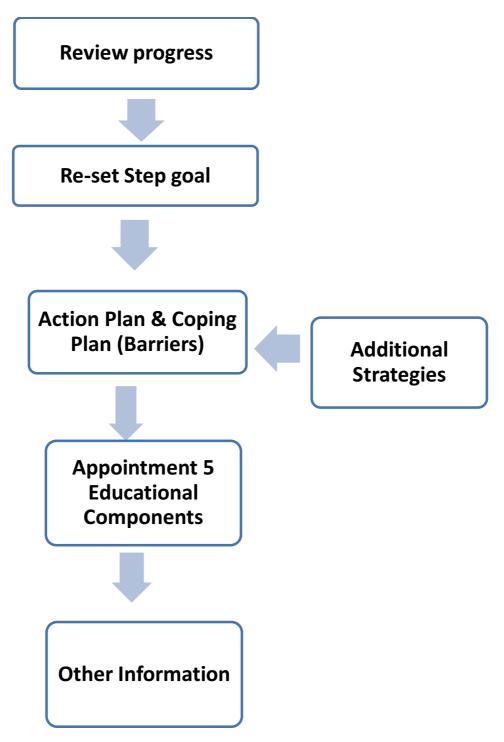
#### Additional barriers and solutions

#### Confidence Level

(If this is less than 7/10, the goal needs to be discussed and re-set and this confidence measure reassessed)



Sign Posting/ Flow diagram Physical Activity Consultation Review Appointment 5



Date \_\_\_\_\_

Has your health state changed in any way since your last visit with us?

**Report any Adverse Events** 

1. <u>Review progress</u> (Recap on Benefits)

#### 2. <u>Re-Set Walking Goal</u>

#### Step Count inserted from **pedometer (circle agreed walking days)**

Day	Mon	Tues	Wed	Thurs	Fri	Sat	Sun	Total Steps
No. of steps								
Goal met Y/N								

Step goal set last week (days and daily steps)	
Step goal (met; partially met on no. of days; not met)	
Total weekly step count on walking days	
Average daily steps on walking days	
Self-efficacy walk result	

# Remember to cross check pedometer with step diary to ensure correct recording of steps; and check patient can retrieve 7 day memory.

Step count calculation

- 3. <u>Complete Action and Coping Plan</u> Include discussion on barriers and insert text used to guide the discussion on solutions. Summarise this information below.
- 1.
- 2.
- 3.
- 4.
- 5.
- 6.

#### Additional barriers and solutions

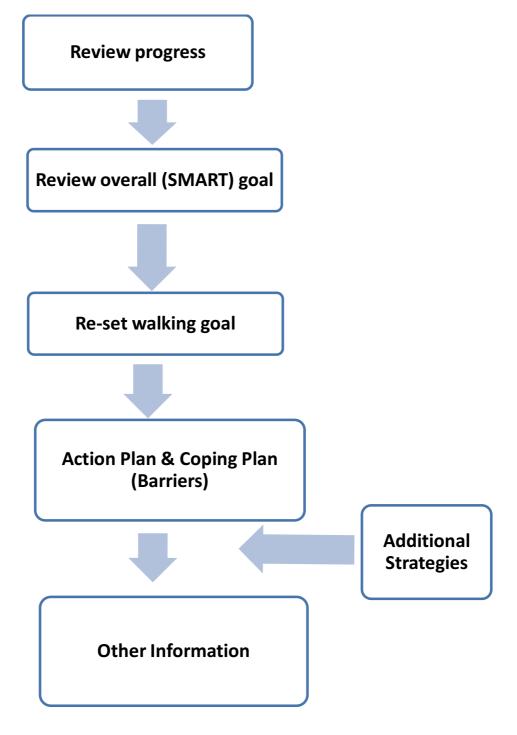
#### Confidence Level

(If this is less than 7/10, the goal needs to be discussed and re-set and this confidence measure reassessed)





#### Sign Posting/ Flow diagram Physical Activity Consultation Review Appointment 6



Date

Has your health state changed in any way since your last visit with us?

**Report any Adverse Events** 

1. <u>Review progress</u> (Recap on Benefits)

<u>Review General Goal</u> – based on SMART (Specific, Measurable, Action orientated, Realistic & relevant, Time based) Concept (Assess if realistic/unrealistic/has been met or need a more realistic goal)

#### 2. <u>Re-Set Walking Goal</u>

#### Step Count inserted from pedometer (circle agreed walking days)

Day	Mon	Tues	Wed	Thurs	Fri	Sat	Sun	Total Steps
No. of								
steps								
Goal								
met								
Y/N								

Step goal set last week (days and daily steps)	
Step goal (met; partially met on no. of days; not met)	
Total weekly step count on walking days	
Average daily steps on walking days	
Self-efficacy walk result	

# Remember to cross check pedometer with step diary to ensure correct recording of steps; and check patient can retrieve 7 day memory.

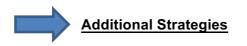
**Step Count Calculation** 

- 3. <u>Complete Action and Coping Plan</u> Include discussion on barriers and insert text used to guide the discussion on solutions. Summarise this information below.
- 1.
- 2.
- 3.
- 4.
- 5.
- 6.

Additional barriers and solutions

#### Confidence Level

(If this is less than 7/10, the goal needs to be discussed and re-set and this confidence measure reassessed)



Date \_\_\_\_\_

Has your health state changed in any way since your last visit with us?

**Report any Adverse Events** 

1. <u>Review progress</u> (Recap on Benefits)

#### 2. Re-Set Walking Goal

Step Count inserted from pedometer (circle agreed walking days)

Day	Mon	Tues	Wed	Thurs	Fri	Sat	Sun	Total Steps
No. of steps								
Goal met Y/N								

Step goal set last week (days and daily steps)	
Step goal (met; partially met on no. of days; not met)	
Total weekly step count on walking days	
Average daily steps on walking days	
Self-efficacy walk result	

Remember to cross check pedometer with step diary to ensure correct recording of steps; and check patient can retrieve 7 day memory.

**Step Count Calculation** 

- 3. <u>Complete Action and Coping Plan</u> Include discussion on barriers and insert text used to guide the discussion on solutions. Summarise this information below.
- 1.
- 2.
- 3.
- 4.
- \_
- 5.
- 6.

#### Additional barriers and solutions

**Confidence Level** 

(If this is less than 7/10, the goal needs to be discussed and re-set and this confidence measure reassessed)



Physical Activity Consultation Review – Appointment 8 Date \_\_\_\_\_

Has your health state changed in any way since your last visit with us?

**Report any Adverse Events** 

1. <u>Review progress</u> (Recap on Benefits)

#### 2. <u>Re-Set Walking Goal</u>

Step Count inserted from **pedometer (circle agreed walking days)** 

Day	Mon	Tues	Wed	Thurs	Fri	Sat	Sun	Total Steps
No. of steps								
Goal met Y/N								

Step goal set last week (days and daily steps)	
Step goal (met; partially met on no. of days; not met)	
Total weekly step count on walking days	
Average daily steps on walking days	
Self-efficacy walk result	

Remember to cross check pedometer with step diary to ensure correct recording of steps; and check patient can retrieve 7 day memory.

**Step Count Calculation** 

- **3.** <u>Complete Action and Coping Plan</u> Include discussion on barriers and insert text used to guide the discussion on solutions. Summarise this information below.
- 1.
- 2.
- 3.
- 4.
- 5.
- 6.

#### Additional barriers and solutions

**Confidence Level** 

(If this is less than 7/10, the goal needs to be discussed and re-set and this confidence measure reassessed)



Date \_\_\_\_\_

Has your health state changed in any way since your last visit with us?

**Report any Adverse Events** 

1. <u>Review progress</u> (Recap on Benefits)

#### 2. <u>Re-Set Walking Goal</u>

Step Count inserted from **pedometer (circle agreed walking days)** 

Day	Mon	Tues	Wed	Thurs	Fri	Sat	Sun	Total Steps
No. of steps								
Goal met Y/N								

Step goal set last week (days and daily steps)	
Step goal (met; partially met on no. of days; not met)	
Total weekly step count on walking days	
Average daily steps on walking days	
Self-efficacy walk result	

# Remember to cross check pedometer with step diary to ensure correct recording of steps; and check patient can retrieve 7 day memory.

**Step Count Calculation** 

- 3. <u>Complete Action and Coping Plan</u> Include discussion on barriers and insert text used to guide the discussion on solutions. Summarise this information below.
- 1.
- 2.
- Ζ.
- 3.
- 4.
- 5.
- 6.

#### Additional barriers and solutions

**Confidence Level** 

(If this is less than 7/10, the goal needs to be discussed and re-set and this confidence measure reassessed)



Date \_\_\_\_\_

Has your health state changed in any way since your last visit with us?

**Report any Adverse Events** 

1. <u>Review progress</u> (Recap on Benefits)

#### 2. Re-Set Walking Goal

Step Count inserted from pedometer (circle agreed walking days)

Day	Mon	Tues	Wed	Thurs	Fri	Sat	Sun	Total Steps
No. of								
steps								
Goal								
met								
Y/N								

Step goal set last week (days and daily steps)	
Step goal (met; partially met on no. of days; not met)	
Total weekly step count on walking days	
Average daily steps on walking days	
Self-efficacy walk result	

Remember to cross check pedometer with step diary to ensure correct recording of steps; and check patient can retrieve 7 day memory.

**Step Count Calculation** 

- **3.** <u>Complete Action and Coping Plan</u> Include discussion on barriers and insert text used to guide the discussion on solutions. Summarise this information below.
- 1.
- 2.
- 3.
- 4.
- 5.
- 6.

#### Additional barriers and solutions

**Confidence Level** 

(If this is less than 7/10, the goal needs to be discussed and re-set and this confidence measure reassessed)



Date \_\_\_\_\_

Has your health state changed in any way since your last visit with us?

**Report any Adverse Events** 

1. <u>Review progress</u> (Recap on Benefits)

#### 2. Re-Set Walking Goal

Step Count inserted from pedometer (circle agreed walking days)

Day	Mon	Tues	Wed	Thurs	Fri	Sat	Sun	Total Steps
No. of steps								
Goal met Y/N								

Step goal set last week (days and daily steps)	
Step goal (met; partially met on no. of days; not met)	
Total weekly step count on walking days	
Average daily steps on walking days	
Self-efficacy walk result	

Remember to cross check pedometer with step diary to ensure correct recording of steps; and check patient can retrieve 7 day memory.

**Step Count Calculation** 

- **3.** <u>Complete Action and Coping Plan</u> Include discussion on barriers and insert text used to guide the discussion on solutions. Summarise this information below.
- 1.
- 2.
- 3.
- -
- 4.
- 5.
- 6.

### Additional barriers and solutions

**Confidence Level** 

(If this is less than 7/10, the goal needs to be discussed and re-set and this confidence measure reassessed)



4. Other Information

# Preparation in advance of Appointment 12/Maintenance Appointment

The main focus of physical activity Appointment 12 is to encourage and support maintenance of walking. Potential barriers will be discussed to prevent relapse, along with discussion on how these could be overcome. How to deal with setbacks including exacerbations will be discussed with patient also.

### Preparation in advance of Appointments 12

- 3. Briefly review the patient's chart and previous PA consultation plans to prepare your consultation in advance.
- 4. Review the patient's progress across the 12 week PAI, and consider the best way for the patient to proceed in order to maintain their walking habit. Use this information collated over the past 12 weeks to plan what advice to give to the patient for the following 3 months to enable the maintenance of walking. This will be discussed and agreed with the patient. Compare the patient's week one step count with the most recent optimal step count to determine their progress and review the pattern of reaching their step goals in preparation for discussion with the patient.
- > Insert this information into the consultation plan in the patient's chart.
- 5. Prepare information on the benefits of maintaining the change, the benefit of maintaining their walking habit, if appropriate varying activities to prevent boredom and continued use of behavioural processes (rewards, support, goals).
- > Insert this information into the consultation plan in the patient's chart.
- 6. Review the patient's personal goal.
- > Insert this information into the consultation plan in the patient's chart.
- 7. Using the patient's previous consultation plans, determine what the key obstacles/barriers were that the patient encountered over the 12 week programme make a note of the most successful strategies they used in order to overcome them.
- Insert this along with the advice on how to maintain their walking, in their new consultation plan ahead of appointment 12 consultation.
- 8. Prepare some discussion around the relapse prevention section of the additional strategies to increase PA in the toolkit.
- > Insert this information into the consultation plan in the patient's chart.

Use this script as a basis for the week 12 appointment. Also refer to the resources in the Toolkit to support your consultation with the patient.

# **LIVELY Physical Activity Script**

# **Appointment 12/Maintenance Appointment**

### **Physical Activity Consultation – Appointment 12**

Use this script as a basis for the consultation review. Refer to **any specific information you have prepared on the PA consultation plan**; and to the resources in the Toolkit to support your review with the patient and to support the goal to continue walking for the next 3 months.

(Black text = instructions; blue text = speaking part)

#### Introduction

- 1. Greet the patient
- 2. Explain that the purpose of this appointment is to review their progress with the walking programme over the last 12 weeks, and plan for the months ahead until follow-up.
- 3. Ask the patient how they have been feeling in the last week and whether there has been any change in their health since their last visit including any adverse events.
  - Insert any changes in the box entitled: 'Has your health state changed....' at the top of the patient's PA consultation plan in their chart. Also note any Adverse Events that may have occurred.
- 4. Remind the patient of the main goal of the programme

"The main goal of this programme was to increase your walking. Each week you monitored the number of steps taken, and your breathlessness. Now we would like you to continue to maintain this over the next 3 months until your follow-up appointment.

5. Commence PA Appointment 12.

### **Physical Activity Appointment 12**

The main focus of physical activity Appointment 12 is to encourage and support maintenance of walking. Potential barriers will be discussed to prevent relapse, along with discussion on how these could be overcome. How to deal with setbacks including exacerbations will be discussed with patient also.

# 1. Review Progress and Benefits

In this section you will work with the patient to set and agree how to maintain this amount of walking over **the next 3 months**. The discussion will be based on the patient's progress over the previous 12 weeks.

Insert their weekly step count into the consultation plan and discuss whether they met their goal during the last week.

#### > Insert their weekly step count into the consultation plan.

- 1. Review the patient's overall progress with the Physical Activity Intervention, using the step diaries from the past 12 weeks.
- 2. Discuss the progress made from the patient's week one step count and the most recent optimal step count to determine their progress, and discuss the pattern of reaching their step goals.

You can see that the amount of steps you did at week one have changed by x steps. Most weeks you were able to do your walking. There was even the week you did a little extra/less but overall this is a positive change.

- 3. Compliment them on their achievement. Specifically highlight any success relating to overcoming obstacles in order to achieve their goal.
- 4. Reinforce the benefits of maintaining the amount of walking they are doing i.e. maintaining their walking habit. Focus the discussion on the following:
  - the benefit of maintaining their walking habit,
  - if appropriate varying activities to prevent boredom
  - Continued use of behavioural processes (rewards, support, goals).
  - Select a benefit already achieved and use this as an example.
  - Also highlight the need for enjoyment and seeing the benefits. Ask the patient to summarise the benefits and put this somewhere as a reminder of why walking is good for them

#### For example:

You mentioned that a benefit to you of doing more walking would be that you could walk to the shop at the end of the road. Already you have managed to do this. So by continuing with

this habit of walking every week you could help yourself to stay active plus get out and meet people.

- Insert information relating to review of walking programme over the past 12 weeks.
- > Insert information on reviewing benefits into consultation plan.
- 5. Review the patient's personal goal.

Your personal goal that we talked about at your second appointment was to.....

Insert information relating to the patients personal goal into consultation plan if not completed already.

# 2. Discuss Overcoming Barriers & Maintenance

1. Determine with patient how they would like to proceed for the next 3 months.

Emphasise the importance of social support to help with maintenance and make sure there is a plan in place for this as able.

Offer the choices below:

- a. Continue to use the pedometer to count steps and set step goals
- b. Continue aiming to walk a certain amount of times each week
- c. Recording in a weekly or monthly diary
- d. Accessing local resources Discuss any useful resources that may be helpful for maintaining the amount of walking they are doing

For example you have been using the NICHSA walking routes so far but how about the highway to health near you to give you some variety? You could perhaps use this to do your walking.

#### e. Other strategies

Discuss any other additional strategies relevant to this patient.

Do you think you will be able to continue your current walking over the coming weeks? If so, how could you continue to do this?

Would you find it easier to maintain this amount of walking by continuing to use the pedometer?

Perhaps you might record when you plan to go for your additional walks in the diary at the back of your patient manual?

We also have information that provides you with suggestions of local walking routes that may help you to vary your walking.

You mentioned over the 12 week intervention that a strategy that worked for you was.....

2. Discuss the key barriers to PA that the patient identified during the programme and discuss the strategies that were most successful for overcoming these in their consultation plan.

Well done! You have finished the 12 week walking programme. Let's consider how you managed to progress your walking over the last 12 weeks. We will especially chat about any challenges you had to your walking.

#### For example,

It appears that the weather was always an obstacle for you but look how well you did with overcoming this by fitting in your walk on another day or walking indoors.....

Let's look at a summary of the barriers that you came across and how you overcame them.

For you, the most common barriers you encountered were...... and you overcame this by.....

#### Help the patient record these strategies in their LIVELY manual.

## **Preventing Relapse**

Discuss strategies the patient should use to help prevent relapse.

For example, what to do if the patient gets an exacerbation or chest infection, or if they have a holiday. Provide them with advice on this.

An example may be to suggest that the patient uses the pedometer to measure step count for one week (like a repeat of the familiarisation week).

Focus some discussion around the relapse prevention section of the additional strategies to increase PA in the toolkit. Encourage the patient to find ways to strengthen their commitment to walk.

The importance of fighting the urge to slip back should be addressed here.

What sort of things do you foresee perhaps preventing you from maintaining your walking?

For example, if you find you don't get to go for a walk several times during a month then would you consider joining a walking group in your area to help keep you focused?

Could you avoid specific situations or even certain people that you know could tempt you to behave in this 'unhealthy' way?

Or if you have an exacerbation and you are not sure how to get back to walking again you can contact us for help.

If you have an exacerbation you may need to reduce the intensity or amount of walking until your symptoms have improved. Even doing a small amount can help. There are strategies you can use to help you:

• Slow down your pace: a slower and regular pace uses up less energy

- Try to do your walking at the time of day that you have the most energy
- Use breathing techniques to help you control shortness of breath, such as positions of ease, pursed lip breathing
- If you become wheezy or very short of breath, remember to take your short-acting bronchodilator or any other relevant medications before you do physical activity

*If, because of an exacerbation, you have to stop walking temporarily it is important you start again when your symptoms resolve by using the pedometer and diary as a guide.* 

Gradually increase your walking levels once your exacerbation has resolved.

#### Help patient to record their plan into their LIVELY manual.

Insert the patients plan to maintain their current level of walking over the next 3 months into their consultation plan.

## 3. Other Information

Insert any additional information on the patient's PA consultation plan in their chart.

#### Ending Appointment 12/Maintenance Appointment

Explain to the patient that from this point onwards, it is important that they continue to stay active by continuing their walking.

Conduct or repeat any other measurements you wish to do.

Highlight any relevant follow up processes or appointments and contact details in case they have any questions or problems.

It is important that you continue to stay active and continue with your walking.

Before you leave we will undertake the measurements and questionnaires that you completed at the very start.

If you have any specific problems e.g. a hospital admission and you are not sure how to start/get back to your programme you can contact us for advice.

Agree any further follow up appointments if relevant.

Appointment Day/Date: \_\_\_\_\_ Appointment Time: \_\_\_\_\_

NB Remember to complete the PAI patient progress table in Appendix 5

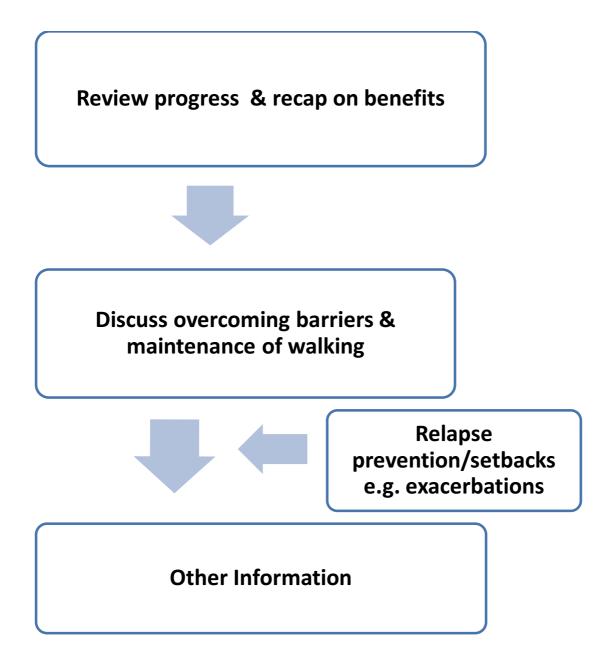
## **Checklist Appointment 12**

Introduction	
Report on patient's health state & record any AEs	
Patient progress reviewed	
Step count inserted into chart	
Summary of 12 week steps & goal pattern inserted	
Progress from week 1 to recent optimal step count reviewed	
Benefits of walking reinforced	
Personal goal reviewed	
Discuss maintenance strategies	
Summary of barriers & successful strategies inserted	
Additional strategies discussed	
Relapse prevention discussed	
Exacerbation advice given	
Plan for continuing maintenance discussed	
Resources for additional walking given	
Any other information covered incerted in consultation plan	
Any other information covered inserted in consultation plan	
Complete PAI patient progress summary	

### Appendices

- Appendix 1 Sign post PA Appointment 12 0
- 0
- Appendix 2 Blank PA Review Plan Appendix 3 Blank PAI patient progress summary 0

Sign Posting/ Flow diagram Physical Activity Consultation Review Appointment 12



### Physical Activity Consultation– Appointment 12/Maintenance Appointment

Date \_\_\_\_\_

Has your health state changed in any way since your last visit with us?

Report any Adverse Events

5. <u>Review progress and Recap on benefits</u>

• <u>Step Count inserted from pedometer</u>

Day	Mon	Tues	Wed	Thurs	Fri	Sat	Sun	Total Steps
No.								
of								
steps								

• Summary of average daily steps over the 12 week programme (or sooner if applicable)

Week	Average daily number of steps on walking days
1 (familiarisation)	
2	
3	
4	
5	
6	
7	
8	
9	
10	
11	
12	

• Step pattern including difference between week 1 & final optimum step count

Optimum weekly step count – step count from week 1 = \_\_\_\_\_

• Reinforce benefits (include health benefits & things they enjoyed about walking)

• Review personal goal set at appointment 2

6. <u>Discuss Maintenance</u> – Discuss social support and remind them of the benefits and things they enjoyed about walking.

Insert key strategy/strategies selected for maintenance e.g. a) pedometer, b) timed walking, c) weekly diary, d) monthly diary, e) other strategies for maintaining PA

• Summary of key barriers and key successful strategies for overcoming these

Key barriers over the 12 weeks	Successful strategies for overcoming barriers

**Relapse Prevention** 

• <u>Relapse Prevention relating to exacerbations</u>

• Summarise the plan to maintain walking over the next 3 months

7. Other Information

**LIVELY: Physical activity in COPD Patient Progress Summary**. Please note that the information for goals and average daily steps comes from the previous weeks consultation and patient activity e.g. at week/appointment 6 the clinician documents this information in the chart based on the step goal in week 5 and the subsequent patient activity between week 5 and 6. As week 12 is the last meeting with the clinician it is not possible to include step count data or progress data.

Patient ID													
Week/	Baseline	1	2	3	4	5	6	7	8	9	10	11	12
Appointment													
Goals set in													
previous													
week													
Avg steps													
from													
previous													
week													
Progress													

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