

Enhancing Rehabilitation Intervention Reporting: Development of the TIDieR-Rehab Checklist using a Modified Delphi Study

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Background and aim(s)

Poor reporting of rehabilitation interventions hinders research advancement and clinical translation. Existing reporting tools lack specificity to rehabilitation's complex nature. This study aimed to develop a rehabilitation-specific extension of the Template for Intervention Description and Replication (TIDieR) checklist through expert consensus.

Method

A modified Delphi process was used to develop the TIDieR-Rehab checklist, guided by an interdisciplinary Steering Committee. Initial development involved evaluation of existing reporting checklists against rehabilitation literature. Drafts of the TIDieR-Rehab checklist were then distributed to rehabilitation experts (n=35) from 10 countries, representing physiotherapy, occupational therapy, speech-language therapy, psychology, and rehabilitation medicine disciplines, using online surveys. Surveys gathered quantitative (Likert scales) and qualitative (free-text) feedback which were analysed using descriptive statistics and conventional content analysis respectively, with findings triangulated to inform revisions. The final TIDieR-Rehab checklist was then piloted within systematic reviews of rehabilitation interventions.

Result(s)

Consensus was achieved after two survey rounds, with high quantitative agreement (>80%) for most items and Steering Committee endorsement. The final TIDieR-Rehab checklist includes 22 items: seven original, three adapted, and 12 new items unique to rehabilitation. Qualitative analysis revealed varied understanding of key rehabilitation concepts within and across disciplines, particularly regarding dosage parameters and person-centred care. This informed development of a supplementary manual with detailed guidance and examples to support implementation across rehabilitation contexts.

Conclusion(s)

The modified Delphi process successfully developed a comprehensive rehabilitation intervention reporting checklist and supplementary manual through structured expert feedback and iterative refinement. The process informed definitions of key concepts and terminology in rehabilitation, and their reporting requirements, addressing a critical barrier to quality intervention reporting. Implementation of this standardized approach to intervention reporting may enhance research replication and clinical translation across rehabilitation contexts.

References

1. Signal N, et al. BMJ Open 2024;0:e084319. doi:10.1136/bmjopen-2024-084319
2. Signal N, et al. BMJ Open 2024;14:e084320. doi:10.1136/bmjopen-2024-084320