

Withers HG, Glinsky JV, Chu J, et al. *Face-to-face physiotherapy compared with a supported home exercise programme for the management of musculoskeletal conditions: Protocol of a multicentre, randomised controlled trial - the REFORM trial.* *BMJ Open* 2021;1-7.

SUPPLEMENTARY FILE

Table 1: Timeline for the study.

Phase	Objective	Planned Completion Date
Preparation	Finalise protocol Submit to ethics Finalise CRF Complete Database	From October 2016
Recruitment	Commence Recruitment	April 2019
Dissemination	Publish Protocol	May 2021
Recruitment and data collection	Continue recruitment Collect data from 6 week and 26-week assessments Recruit 100% of participants	April 2019 to Dec 2020 <u>Due to COVID -19 recruitment was stopped in March 2020, and was resumed in July 2020. Recruitment was severely limited until December 2020. Currently n=141. Revised planned completion date: December 2021.</u>
Analysis	Clean and lock data base Complete Analysis Submit papers for publication	From December 2021
Dissemination	Present results at seminars, conferences Disseminate results into policy and practice	From December 2021

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Table 2: Text messages sent each week to the Supported Home exercise Group. All participants randomised to the Supported Home Exercise Group will receive the following text messages each week of their 6-week exercise program.

Week One	"You've got the hang of all your exercises, keep it up."
Week Two	"You're doing well. Remember to complete your exercises each day."
Week Three	"All of your effort will pay off in the long run. Keep exercising!"
Week Four	"You're already half way through. Keep up the hard work."
Week Five	"Almost there. One week to go. Keep going with recording your exercises"
Week Six	"Well done! You have completed 6 weeks of home exercises!"
Week Six Reminder	"Your 6-week phone call is coming up!"
Week 26 Reminder	"Reminder! Your 26-week call is coming in the next few days."

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Table 3: Description of the intervention based on the TIDieR checklist.

	Intervention group (Supported Home Exercise)	Control group (Face-to-Face therapy)
Setting	Home	Hospital out-patients clinic
Why	Exercise, support and advice are considered core components of management for most musculoskeletal conditions. Exercise can be provided remotely as part of a home exercise program while support and advice can be provided over the telephone.	Pragmatic trial design
Materials for therapists	A detailed protocol outlining the trial procedures. Knowledge on accessing and devising and exercise programme using www.physiotherapyexercises.com and creating an App to monitor adherence. Programming text messages using a website. Study phone for follow up phone calls.	A detailed protocol. Providing physiotherapy in a public hospital outpatient setting.
Materials for participants	Device such as a smart phone or tablet. Access to the internet. Participants are provided with an exercises programme and an App to monitor adherence.	Participants are provided with outpatient usual care.
Who provided	Trial physiotherapist who is a PhD candidate at University of Sydney.	Physiotherapists employed at the study site hospitals.
How	Initial face-to-face session for assessment and exercise prescription.	Face-to-face physiotherapy consisting of usual care.
Where	Initially on site in a study hospital in the outpatient department, then in the participants' home environment.	Onsite at a study hospital in the outpatient department.
When and how much	One initial session lasting approximately one hour. Participants are asked to exercise on their own each day. The trial physiotherapist will call at week 2 and week 4 to monitor adherence and give support and advice.	One initial session lasting approximately one hour. Regular face-to-face physiotherapy sessions of up to one hour per session. The frequency is determined by the treating physiotherapist but can be up to 3 times per week.
Tailoring	Each participant is prescribed an individualised exercise programme following an initial assessment by the trial physiotherapist.	Determined by the outpatient physiotherapist.

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Table 4: Visit schedule for study

	Enrolment	B/L Assessment	Allocation							Week 6 Assessment	HEQs	Week 26 Assessment
	Day -7 to 0	Day 0	Day 0	Week 1	Week 2	Week 3	Week 4	Week 5	Week 6	Week 6	Week 6	Week 26
Visit Activity		Clinic								Ph	Ph	Ph
Eligibility	✓											
Informed Consent	✓											
Randomisation allocation			✓									
Face-to-face Physiotherapy				✓	✓	✓	✓	✓	✓		✓	
Supported Home Exercise				✓ (Text)	✓ (Text/ ph)	✓ (Text)	✓ (Text/ ph)	✓ (Text)	✓ (Text)		✓	
ASSESSMENTS												
PSFS		✓								✓		✓
TSK		✓								✓		✓
Pain		✓								✓		✓
PGIC		✓								✓		✓
PSHCSD		✓								✓		✓
EuroQol-5D		✓								✓		✓
LLFDI – function		✓								✓		✓
LLFDI – disability (freq)		✓								✓		✓
LLFDI – disability (capability)		✓								✓		✓
AEs										✓		✓
Abbreviations: PSFS: Patient specific functional scale. TSK: Tampa Scale for Kinesiophobia. PGIC: Patient Global impression of Change. PSHCSD: Patient Satisfaction with Health Care Service Delivery. LLFDI: Late Life Function and Disability Instrument. AEs: Adverse Events. PH: Phone. B/L: Baseline. HEQs: Health Economics Questions.												