

Therapist Survey

Record ID

Therapist Information

Date

Years since graduation

Advanced training (choose all that apply)

- Clinical specialty (i.e., NCS, OCS)
- Vestibular competency
- Residency
- Fellowship
- DPT
- transitional DPT
- MS
- Other

Years treating persons with vestibular disorders

Volume of patient visits with vestibular disorders
(average visits per month)

The questions that follow are derived from the domains of the Consolidated Framework for Implementation Research (CFIR).

Damschroder, L.J., Aron, D.C., Keith, R.E., Kirsh, S.R., Alexander, J.A. et Lowery, J.C. (2009). Fostering implementation of health services research findings into practice: a consolidated framework for advancing implementation science. *Implementation Science*, 4: 50. doi: 10.1186/1748-5908-4-50.

The following questions relate to your perceptions of the interventions your site plans to implement to treat patients with peripheral vestibular hypofunction. Please indicate the degree to which you agree/disagree with the following statements.

	Strongly Agree	Agree	Neutral	Disagree	Strongly disagree	Prefer not to answer
The individual(s) who developed this intervention understand my practice setting	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
This intervention is important compared to other interventions our facility could be implementing	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

Please provide any additional thoughts you have about the intervention plan for your facility. Your thoughts can influence the direction of the project and are encouraged.

The following statements relate to your perceptions of the health care system and health care community. Please indicate the degree to which you agree/disagree with the following statements.

	Strongly Agree	Agree	Neutral	Disagree	Strongly Disagree	Prefer not to answer
This intervention fits with our patients' needs, preferences and resources	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
This intervention is in alignment with external incentives and pressures our facility is dealing with	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

The following statements relate to your perceptions of your facility. Please indicate the degree to which you agree/disagree with the following statements.

	Strongly Agree	Agree	Neutral	Disagree	Strongly Disagree	Prefer not to answer
The culture in our facility supports success of initiatives like this intervention	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
There is a strong need for this intervention at our facility	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
It will be difficult to fit this intervention into our existing workflow	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
The goals of this intervention are clear	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
There is a plan to provide regular feedback on how well we are implementing this intervention	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
We have sufficient resources to implement this intervention	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
I have the information I need to implement this intervention	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

The following statements relate to your perceptions about using this intervention. Please indicate the degree to which you agree/disagree with the following statements.

	Strongly Agree	Agree	Neutral	Disagree	Strongly Disagree	Prefer not to answer
I feel positively about this intervention	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
I feel confident in our facility's ability to implement this intervention	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
I'm prepared to carry out this intervention	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

The questions that follow are from the Organizational Readiness for Implementing Change survey.

Shea, C.M., Jacobs, S.R., Esserman, D.A. et al. Organizational readiness for implementing change: a psychometric assessment of a new measure. *Implementation Sci* 9, 7 (2014).

For the following questions:

"Organization" refers to the organization in which you work.

"This change" refers to the implementation process your site will undergo to improve care of patients with peripheral vestibular hypofunction.

	Strongly Agree	Agree	Neutral	Disagree	Strongly Disagree	Prefer not to answer
People who work here feel confident that the organization can get people invested in implementing this change	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
People who work here are committed to implementing this change	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
People who work here feel confident that they can keep track of progress in implementing this change	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
People who work here will do whatever it takes to implement this change	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
People who work here feel confident that the organization can support people as they adjust to this change	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
People who work here want to implement this change	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
People who work here feel confident that they can keep the momentum going in implementing this change	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
People who work here feel confident that they can handle the challenges that might arise in implementing this change	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
People who work here are determined to implement this change	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
People who work here feel confident that they can coordinate tasks so that implementation goes smoothly	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

People who work here are motivated to implement this change

People who work here feel confident that they can manage the politics of implementing this change

Please provide any additional thoughts you have about the intervention plan for your facility. Your thoughts can influence the direction of the project and are encouraged.

The questions that follow are from the Physiotherapist Self-Efficacy Questionnaire.

Van Lankveld W, Jones A, Brunnekreef JJ, Seeger JPH, Bart Staal J. Assessing physical therapist students' self-efficacy: measurement properties of the Physiotherapist Self-Efficacy (PSE) questionnaire. *BMC Medical Education*. 2017;17:250.

Physiotherapist Self-Efficacy Questionnaire-Vestibular Caseload

	Very Little Confidence 1	2	3	4	A Lot of Confidence 5
I feel adequately prepared to undertake a vestibular caseload.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
I feel that I am able to verbally communicate effectively and appropriately for a vestibular caseload.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
I feel that I am able to communicate in writing effectively and appropriately for a vestibular caseload	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
I feel that I am able to perform subjective assessments for a vestibular caseload.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
I feel that I am able to perform objective assessment for a vestibular caseload.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
I feel that I am able to interpret assessment findings appropriate for a vestibular caseload.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
I feel that I am able to identify and prioritize patient's problems for a vestibular caseload. I feel that I am able to select appropriate short and long term goals for a vestibular caseload.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
I feel that I am able to select appropriate short and long term goals for a vestibular caseload.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
I feel that I am able to appropriately perform treatments for a vestibular caseload.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
I feel that I am able to perform discharge planning for a vestibular caseload.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
I feel that I am able to evaluate my treatments for a vestibular caseload.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
I feel that I am able to progress interventions appropriately for a vestibular caseload.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
I feel that I am able to deal with the range of patient conditions which may be seen with a vestibular caseload	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>