**Appendix SI.** Survey Tool. Survey – Rehabilitation Skills in Low-Middle Income Countries

<table>
<thead>
<tr>
<th>Date</th>
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<tbody>
<tr>
<td>Initials</td>
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<tr>
<td>Country</td>
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<tr>
<td>Title and organisation</td>
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<td>E-mail address</td>
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<td>Other contact details</td>
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<tr>
<td>Any other relevant information</td>
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</table>

Please circle your profession
- Rehabilitation Consultant/ Doctor/ Nurse / Physiotherapist / Occupational Therapist / Speech and Language Therapist / Orthotist,Prosthetist / CBR worker/ Community Health Worker
- Other:____________________________

Highest level of Education achieved
(Please circle)
- No Diploma /Diploma/ Degree/ Masters/ Doctorate/
- Other:____________________________

Name of your qualification

Years of experience since qualification

What proportion of your time would you say is spent working with persons with disabilities
- One quarter or less/ About half/ Three quarters/ Most of my time/ None of my time

Where do you mostly work?
- Public institution /Private institution/ Community organisation/ Home
- Other: _______________________

In last 3 months which of these difficulties did your patients experienced. (Please tick all that apply)
- Vision / Hearing/ Mobility / Communication / Self-care / Cognition / Upper Body
- Other:____________________________

Please list 10 clinical skills, treatment or methods you use in your everyday practice in the last 3 months: (1 = used most often to 10 = least often used)
e.g. mobilisations, transferring patients, referrals, diagnosis, medication prescription, patient education, ADLs etc.......

1.______________________________
2.______________________________
3.______________________________
4.______________________________
5.______________________________
6.______________________________
7.______________________________
8.______________________________
9.______________________________
10.______________________________

Did you feel you had sufficient training or knowledge to carry out the clinical skills you were required to use in the last 3 months?
- Yes / No

Do you have any comments about the sort of skills you have used?

Please list 5 skills, treatments or methods you think are the core of your profession within your working environment

1.______________________________
2.______________________________
3.______________________________
4.______________________________
5.______________________________

Please list 5 things that you think are the most helpful in your practice

1.______________________________
2.______________________________
3.______________________________
4.______________________________
5.______________________________

Please list 5 things, that you think are the barriers in your practice

1.______________________________
2.______________________________
### Supplementary material to article by F. Khan et al. “Capacity-building in clinical skills of rehabilitation workforce in low- and middle-income countries”

<table>
<thead>
<tr>
<th>Question</th>
<th>Options</th>
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</thead>
<tbody>
<tr>
<td>Do you have to use your skills beyond the ones you have been trained for? If so please explain</td>
<td>Rehabilitation Consultant/ Doctor/ Nurse/ Physiotherapist/ Occupational Therapist/ Speech and Language Therapist/ Orthotist, Prosthetist/ CBR worker/ Community Health Worker</td>
</tr>
<tr>
<td>What other member of the rehabilitation workforce are you mostly collaborating with?</td>
<td>Other: __________________________</td>
</tr>
<tr>
<td>What other member of the rehabilitation workforce would you like to have in your team?</td>
<td>Rehabilitation Consultant/ Doctor/ Nurse/ Physiotherapist/ Occupational Therapist/ Speech and Language Therapist/ Orthotist, Prosthetist/ CBR worker/ Community Health Worker</td>
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<tr>
<td>Which rehab professional is in charge of the rehab programs?</td>
<td>Other: __________________________</td>
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<td>How is your service funded?</td>
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<td>Are you aware of the rights of people with disabilities?</td>
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<tr>
<td>Do you understand what is meant by clinical governance?</td>
<td></td>
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<tr>
<td>Comments</td>
<td></td>
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</table>

Thank you for taking your time in completing this survey