Survey structure overview

This document contains the full set of survey questions for the NDIS Evidence Advisory Committee consultation running from late November 2025 to January 2026.

The questions shown in the survey sometimes depend on how people answer the previous question. No one would be expected to answer all the questions. Easy Reads versions are provided as separate documents from the main page.

The survey contains the following:

- Privacy and consent information – this is provided in a separate document.
- A demographic question for everyone completing the survey, and a follow-up question which depends on the answer to the first question. (1-2 questions)
- A question about which supports people want to comment on. This is used to choose which blocks of questions to show, as questions are customised for each support item. People can choose to comment on as many of the supports as they like. (1 question)
- There is then a heading for each support item that the respondent said they would like to comment on.
    - For each support item there are 4 questions on scope. The form of these is the same but the details about the support, disability group/population, outcomes and comparator will be customised to be relevant for each support item (4 questions).
    - There is a branching question about whether people use the support, use something else, provide the support etc. (1 question).
    - People will then be asked additional questions relevant to that role. For most roles there are 6-7 questions.
- Please use the bookmark headings to navigate this document.

Please also read the Frequently Asked Questions document.

Demographics.

Question 1 – everyone gets this question

First, we would like to hear about you. Please select all that apply

I am a:

person with a disability who is an NDIS participant
person with a disability who is not an NDIS participant
family member or informal carer of a person with disability

carer (support worker) or a provider of services, items and equipment funded by the NDIS
clinician or allied health professional who works in disability
researcher in disability
member of the public not in the groups listed above.

Question 2 – shown if people tick either of the options to say they have a disability

How do you describe your disability? Please choose all that apply

Acquired brain injury (ABI)
Amputation
Arthritis
Autism
Cerebral palsy
Dementia
Developmental delay
Down syndrome
Epilepsy
Hearing loss (Deaf or Hard of Hearing)
Intellectual disability
Language disorder
Multiple sclerosis
Psychosocial disability
Spinal cord injury
Stroke
Blind/low vision
Another disability (please specify)

Question 2 – shown if people tick they are a family member of someone with a disability

How do you describe your family member's disability? Please choose all that apply

Acquired brain injury (ABI)
Amputation
Arthritis
Autism
Cerebral palsy
Dementia
Developmental delay
Down syndrome

Epilepsy
Hearing loss (Deaf or Hard of Hearing)
Intellectual disability
Language disorder
Multiple sclerosis
Psychosocial disability
Spinal cord injury
Stroke
Blind/low vision
Another disability (please specify)

Support block selection.

Below is a list of items under review by the NDIS Evidence Advisory Committee that you can comment on. You can comment on as many as you like.

You will be asked similar questions about each item you choose to comment on. There are between 6 and 14 questions for each item depending on whether you answer as a member of the public, a person with a disability, a family member or carer, or a provider. You can choose different roles for different items.

Your responses will save when you complete a question, so you can close the survey and complete it later, as long as you use the same device and web-browser.

Please choose which items you would like to comment on:

- Art therapy
- Functional electrical stimulation
- Hyperbaric oxygen therapy as a disability support
- Music therapy
- Prosthetics with microprocessors
- Therapy suits

To read a summary about each item please see this pdf file.

Art Therapy

Scope questions - shown to everyone

Question 1 – Support

This assessment will consider art therapy.

Art therapy is the use of art, media and creative process with the aim to help people:

- explore feelings,
- improve self-awareness
- reduce anxiety.

Creative processes may include using:

- drawing or painting
- writing
- sculpting
- drama
- clay
- sand
- dance

Art therapy is delivered by a qualified art therapist, who has completed an art therapy degree. Art therapy in the NDIS must be delivered by a therapist registered with the professional body in Australia (ANZACATA - Australian, New Zealand and Asian Creative Arts Therapies Association).

Does the description above accurately describe what art therapy is and how it is used? (please choose one)

- Yes
- No, I want to change something (please say what you want to change and why) (text box)

Question 2 – Disability group/population

Based on what we know so far, we think the people who might use art therapy include people with:

- Autism
- intellectual disability (including Down syndrome)
- cognitive disability (like memory and attention difficulties)

- neurological disability (like motor difficulties with multiple sclerosis, or after a stroke)
- speech and/or language disabilities
- sensory disability (such as following spinal cord injury)
- physical disability (like strength and co-ordination difficulties)
- psychosocial disability (like anxiety, PTSD)

Do these groups cover all the people who may use art therapy? (please choose one)

  - Yes
  - No, I want to change something (please say what you want to change and why) (text box)

Question 3 – Outcomes

Supports are used to achieve certain outcomes. These outcomes can be to improve people's life (provide benefit) or to reduce harm. We want to make sure the assessment examines outcomes that are important to people.

Based on what we know so far, we think art therapy aims to help with the following outcomes:

- activities of daily living skills
- independence in completing tasks
- emotional regulation or self-regulation
- quality of life
- community and social participation
- stress, anxiety, mood and depressive symptoms
- cognitive performance (such as memory, attention, and executive functioning)
- self-esteem and self-confidence

Are these the most important outcomes for the people using this support? (please choose one)

  - Yes (you can provide additional comments if you want to, such as if some outcomes are more important to you) (text box)
  - No, I want to change the list (please tell us what you want to change and why; you could add something or remove something). (text box)

Question 4 - Comparator

We will need to compare how effective art therapy is at achieving its goals, compared to other supports which aim to help with the same, or very similar things.

Depending on the goal, we think the most relevant supports to compare art therapy to are:

- speech pathology
- occupational therapy
- physiotherapy
- psychological supports
- art activities
- art classes
- art lessons
- online therapy
- music therapy
- other types of art therapy (such as, dance/movement, drama, or writing therapy)

We chose these supports to compare to art therapy because they aim to help achieve similar outcomes.

If you have used or suggested something other than art therapy to achieve similar outcomes, that is not included in this list, please add it below.

Are these the best supports to compare art therapy to? (please choose one)

- Yes
- No, I want to change something (please say what you want to change and why) (text box)

Use questions – the first question will be a branching question

Branching question

Do you use art therapy or provide it to someone else/assist someone else with it? (choose the most relevant)

- I use the support
- I have used the support, but I don't use it anymore
- I don't use the support but I use something else to achieve the same goals
- I have a family member who uses or has used the support
- I care for someone who uses or has used the support
- I provide or have provided the support to someone else or assist them to use it
- I am a clinician or researcher who works with or studies the support
- None of the above

Personal Role branch – these questions are shown if people answer "I use the support myself" (6 questions)

Question 1 – length of use

How long have you been using the support? (please choose one)

- less than 3 months
- 3-12 months
- more than 12 months

Question 2 – continued use

Do you think you will continue using the support? (please choose one)

- Yes
- No
- I don't know

Please provide details of why. You could include things like:

- how well it works for you
- other supports you have tried
- cost and availability
- how long the support is expected to last.
  (text box)

Question 3 - safety

Have you had any problems or safety issues because of using the support? These could be short-term problems or long-term problems.

- No
- Yes (please provide details. (free text)

If this question has raised concerns, please see the list of help lines and services on the last page. If you have pain or ongoing problems that need medical attention, please seek medical advice.

Question 4 – how often

How often do you participate in art therapy and for how long each time on average?

I participate in art therapy:

- daily
- weekly
- other (please give details) (free text)

And each time I participate in art therapy for around

- 30 minutes
- 1 hour

- 2 hours
- other amount (free text)

Question 5 – who provides

Who provides art therapy to you?

- A registered art therapist
- An art therapist that is not registered
- An artist or art teacher
- An allied health professional such as a speech pathologist
- A paid carer/support worker
- I don't know
- Other (please specify) (free text)

Does anyone assist you to use art therapy? (choose all that apply)

- An allied health professional such as an occupational therapist (please specify)
- A paid carer or support worker
- An informal carer such as family or friends
- I don't know
- Other (please specify) (free text)

Question 6 - General context question (free text)

Are there any situations where art therapy works well or does not work well for people?

Please tell us about anything that makes it easier or harder to use art therapy.

This could include things like:

- access to art therapy
- access to supports that aim to achieve similar goals
- access to allied health or other professionals
- cost factors
- where it is used (such as a clinic, or at home)
- how it fits into a therapy plan, supervised or unsupervised
- age, gender, ethnicity or cultural factors
- who someone lives with or where they live, such as in a city or a remote area

You can tell us anything you think is relevant for the Evidence Advisory Committee to understand the support (free text)

Personal Role – these questions are shown if people answer "I have used the support" (7 questions)

Question 1 – length of use

How long did you use the support? (please choose one)

- Less than 3 months
- 3-12 months
- More than 12 months

Question 2 – why stopped

Why did you stop using the support? (please provide details) (free text)

Question 3 - safety

Did you have any problems or safety issues because of using the support? These could be short-term problems or long-term problems.

- No
- Yes (please provide details). (free text)

If this question has raised concerns please see the list of help lines and services on the last page. If you have pain or ongoing problems that need medical attention, please seek medical advice.

Question 4 – how often

How often did you participate in art therapy and for how long each time, on average?

I participated in art therapy

- daily
- weekly
- other (please give details) (free text)

And each time I participated in art therapy it for around

- 30 minutes
- 1 hour
- 2 hours
- other amount (free text)

Question 5 – who provides

Who provided art therapy to you?

- A registered art therapist
- An art therapist that is not registered
- An artist or art teacher
- An allied health professional such as a speech pathologist
- A paid carer/support worker

- I don’t know
- Other (please specify) (free text)

Did anyone assist you to use art therapy? (choose all that apply)

- An allied health professional such as an occupational therapist (please specify)
- A paid carer or support worker
- An informal carer such as family or friends
- I don't know
- Other (please specify) (free text)

Question 6 – what used now

What support do you use now to achieve the same aims as art therapy? (please provide details) (free text)

Question 7 - General context question

Are there any situations where art therapy works well or does not work well for people?

Please tell us about anything that makes it easier or harder to use art therapy.

This could include things like:

- access to art therapy
- access to supports that aim to achieve similar goals
- access to allied health or other professionals
- cost factors
- where it is used (such as a clinic, or at home)
- how it fits into a therapy plan, supervised or unsupervised
- age, gender, ethnicity or cultural factors
- who someone lives with or where they live, such as in a city or a remote area

You can tell us anything you think is relevant for the Evidence Advisory Committee to understand the support. (free text)

Personal Role – these questions are shown if people answer “I don't use the support but I use something else to achieve the same goals” **(2 questions)**

Question 1 – what support instead

Art therapy aims to improve different functional and/or psychosocial outcomes. What do you use to achieve these goals, and why?

(please provide details) (free text)

Question 2 – general context question

Are there any situations where art therapy works well or does not work well for people? Please tell us about anything that makes it easier or harder to use art therapy.

This could include things like:

- access to art therapy
- access to supports that aim to achieve similar goals
- access to allied health or other professionals
- cost factors
- where it is used (such as a clinic, or at home)
- how it fits into a therapy plan, supervised or unsupervised
- age, gender, ethnicity or cultural factors
- who someone lives with or where they live, such as in a city or a remote area

You can tell us anything you think is relevant for the Evidence Advisory Committee to understand the support. (free text)

Carer/supporter Role – these questions are shown if people answer that they care for someone who uses or has used the support

Question 1 – length of use

Please select how long the person you care for has used (or did use) the support? (please choose one)

- Less than 3 months
- 3-12 months
- More than 12 months

Question 2 – continued use

Is your family member or the person you care for still using the support ?

- Yes
- No
- Don't know

[Display if Yes

Do you think they will keep using the support?

- Yes
- No
- Don't know]

Please describe the reasons for your answer above.

You could include things like:

- how well it works for them
- other supports tried
- cost, availability
- how long the support is expected to last.

Question 3 - safety

Has the family member or person you care for had any problems or safety issues because of using the support? These could be short-term problems or long-term problems.

- No
- Yes (please provide details). (free text)

If this question has raised concerns please see the list of help lines and services on the last page. If you have pain or ongoing problems that need medical attention, please seek medical advice.

Question 4– how often

How often does your family member or the person you care for participate in art therapy and for how long at a time?

They participated in art therapy

- daily
- weekly
- other (please give details) (free text)

And each time they participated in art therapy for around

- 30 minutes
- 1 hour
- 2 hours
- other amount (free text)

Question 5 – who provides/assistant

Who provided art therapy for your family member or the person you care for?

- A registered art therapist
- An art therapist that is not registered
- An artist or art teacher
- An allied health professional such as a speech pathologist
- A paid carer/support worker
- I don't know
- Other (please specify) (free text)

Did or does anyone assist your family member or the person you care for in using art therapy? (choose any that apply)

- An allied health professional such as an occupational therapist (please specify)
- A paid carer or support worker
- An informal carer such as family or friends
- I don't know
- Other (please specify) (free text)

Question 6 – general context question

Are there any situations where art therapy works well or does not work well for people?

Please tell us about anything that makes it easier or harder to use art therapy.

This could include things like:

- access to art therapy
- access to supports that aim to achieve similar goals
- access to allied health or other professionals
- cost factors
- where it is used (such as a clinic, or at home)
- how it fits into a therapy plan, supervised or unsupervised
- age, gender, ethnicity or cultural factors
- who someone lives with or where they live, such as in a city or a remote area

You can tell us anything you think is relevant for the Evidence Advisory Committee to understand the support. (free text)

Provider/clinician/researcher Role – these questions are shown if people answer that they provide the support, or are a clinician or researcher in the area of the support

Question 1 – not recommend only for providers/clinicians/researchers

In what circumstances would you **not recommend** the support and why?

Question 2 – recommend only for providers/clinicians/researchers

In what circumstances would you **recommend** the support and why? (free text)

Question 3 -safety

Are there any problems, safety issues or adverse events related to using the support that you have observed or know about? These could be short-term problems or long-term problems.

- No
- Yes (please provide details). (free text)

If this question has raised concerns, please see the list of help lines and services on the last page.

Question 4 – alternative supports

What other supports would you recommend instead of art therapy, or if art therapy were unavailable or unsuitable? (please provide details) (free text)

[Text item before the next questions]

The following questions relate to how a support is used, in cases when it would be recommended for at least some participants. Please skip any questions that are not relevant.

Question 5 – length of use

How long should the support be used for? (please choose all that apply)

- Less than 3 months
- 3-12 months
- More than 12 months
- Until a specific outcome is achieved, please specify (text box)

Question 6– how often

How often should art therapy be used and for how long at a time for best results? (please provide details) (free text)

People should participate in art therapy

- daily
- weekly
- other (please give details) (free text)

And each time people should participate in art therapy people for around

- 30 min
- 1hour
- 2 hours
- other amount (free text)

Question 7 – who should provide/assist

Who should provide art therapy? (choose all that apply)

- A registered art therapist
- An art therapist that is not registered
- An artist or art teacher
- An allied health professional such as a speech pathologist
- A paid carer/support worker

- Other (please specify) (free text)

Who should assist using art therapy if assistance is needed? (choose all that apply)

- An allied health professional such as a physiotherapist (please specify)
- A paid carer or support worker
- An informal carer such as family or friends
- Other (please specify)

Are there qualifications or regulations that should apply to people providing or assisting with the support? (free text)

Question 8 – general context question

Are there any situations where art therapy works well or does not work well for people?

Please tell us about anything that makes it easier or harder to use art therapy.

This could include things like:

- access to art therapy
- access to supports that aim to achieve similar goals
- access to allied health or other professionals
- cost factors
- where it is used (such as a clinic, or at home)
- how it fits into a therapy plan, supervised or unsupervised
- age, gender, ethnicity or cultural factors
- who someone lives with or where they live, such as in a city or a remote area

You can tell us anything you think is relevant for the Evidence Advisory Committee to understand the support. (free text)

Question 9 – for providers/clinicians and researchers only, grey lit question

A systematic review will be conducted to inform the Evidence Advisory Committee's work. It will include published research as well as key sources of grey literature. Are there other sources of evidence in your area, such as professional journals or conferences, that we should be checking for evidence on art therapy?

Please provide details below if they are publicly available. If there are specific articles or papers that you think the Evidence Advisory Committee should be aware of, you may also send them via email to disabilityevidence@health.gov.au.

- professional journals (free text for titles etc.)
- conference publications (free text)
- technical documents (free text)

- policy or guidelines documents (free text)
- other relevant documents (free text)

Other Role – these questions are shown if people answer “none of the above”

Question 1 – general context question

Are there any situations where art therapy works well or does not work well for people?

Please tell us about anything that makes it easier or harder to use art therapy.

This could include things like:

- access to art therapy
- access to supports that aim to achieve similar goals
- access to allied health or other professionals
- cost factors
- where it is used (such as a clinic, or at home)
- how it fits into a therapy plan, supervised or unsupervised
- age, gender, ethnicity or cultural factors
- who someone lives with or where they live, such as in a city or a remote area

You can tell us anything you think is relevant for the Evidence Advisory Committee to understand the support. (free text)

Functional Electrical Stimulation

Scope questions - shown to everyone

Question 1 - Support

Functional electrical stimulation devices apply small electrical currents to muscles or nerves to control muscle contraction. People who have weak or paralysed muscles, or muscles that don't move the way they want may be recommended functional electrical stimulation with the aim of changing the way they walk, move their hands, or their posture. Usually, a physiotherapist or occupational therapist provides functional electrical stimulation.

Functional electrical stimulation systems can include:

- Stimulators: devices that send electrical pulses to the body.
- Electrodes: adhesive pads, special clothing, wires, or implants that deliver the pulses.
- Sensors or triggers: tools like heel switches, movement sensors, muscle sensors, or brain-computer interfaces that help time the stimulation.
- Programming software that lets therapists adjust how strong the pulses are and when they happen.

Does the description above accurately describe what functional electrical stimulation is and how it is used? (please choose one)

- Yes
- No, I want to change something (please say what you want to change and why) (text box)

Question 2 – Disability group/population

Based on what we know so far, we think functional electrical stimulation may be used by people living with:

- stroke
- spinal cord injury
- cerebral palsy or
- multiple sclerosis

and by

- both adults and children
- people from all over Australia including in cities, country and remote areas.

Do these groups cover all the people who may use functional electrical stimulation? (please choose one)

- Yes
- No, I want to change something (please say what you want to change and why) (text box)

Question 3 – Outcomes

Supports are used to achieve certain outcomes. These outcomes can be to improve people's life (provide benefit) or to reduce harm. We want to make sure the assessment examines outcomes that are important to people.

Based on what we know so far, we think functional electrical stimulation is associated with the following outcomes:

- Voluntary motor control
- Spasticity
- Gait symmetry
- Postural stability
- Gross motor functioning
- Upper-limb function
- Quality of life
- Community participation
- Need for mobility aids
- Cardiometabolic health
- Independence and future support needs

Are these the most important outcomes for the people using this support? (please choose one)

- Yes (you can provide additional comments if you want to, such as if some outcomes are more important to you) (text box)
- No, I want to change the list (please tell us what you want to change and why, you could add something or remove something). (text box)

Question 4 - Comparator

We will need to compare how effective functional electrical stimulation is at achieving its goals compared to some other supports which might help with the same things.

Depending on the goal, we think the most relevant supports to compare functional electrical stimulation to are:

- conventional therapies without functional electrical stimulation such as exercise physiology, physiotherapy, mobility aids, task-specific motor training
- orthotic devices such as ankle-foot orthoses, hand splints and other external supports are commonly used to stabilize joints, maintain alignment, and prevent contractures
- formal support services such as personal care assistants and home-based support workers

We chose these supports to compare to functional electrical stimulation because they aim to help achieve similar outcomes.

If you have used or suggested something other than functional electrical stimulation to achieve similar outcomes, that is not included in this list, please add it below.

Are these the best supports to compare functional electrical stimulation to? (please choose one)

- Yes
- No, I want to change something (please say what you want to change and why) (text box)

Use questions – the first question will be a branching question

Branching question

Do you use functional electrical stimulation or provide it to someone else/assist someone else with it? (choose the most relevant)

- I use the support
- I have used the support, but I don't use it any more
- I don't use the support but I use something else to achieve the same goals
- I have a family member who uses or has used the support
- I care for someone who uses or has used the support
- I provide or have provided the support to someone else or assist them to use it
- I am a clinician or researcher who works with or studies the support
- none of the above

Personal Role branch – these questions are shown if people answer "I use the support myself" (6 questions)

Question 1 – length of use

How long have you been using the support? (please choose one)

- Less than 3 months
- 3-12 months
- More than 12 months

Question 2 – continued use

Do you think you will continue using the support? (please choose one)

- Yes
- No
- Don't know

Please provide details of why. You could include things like:

- how well it works for you
- other supports you have tried
- cost and availability
- how long the support is expected to last.

(text box)

Question 3 -safety

Have you had any problems or safety issues because of using the support? These could be short-term problems or long-term problems.

- No
- Yes (please provide details). (free text)

If this question has raised concerns please see the list of help lines and services on the last page. If you have pain or ongoing problems that need medical attention, please seek medical advice.

Question 4 – how often

How often do you use functional electrical stimulation and for how long each time on average? (please provide details)

I use functional electrical stimulation

- daily
- weekly
- other (please give details) (free text)

And/or I use it for

- less than 10 min per day
- around 30 min
- between 1-2 hours
- the whole morning
- the whole afternoon
- the whole day
- other amount (free text)

Question 5 – who provides

Who provides functional electrical stimulation to you?

- Bought the functional electrical stimulation equipment
- Rented the support
- Use or used functional electrical stimulation in a clinic
- Someone else provides functional electrical stimulation (please specify)

Does anyone assist you to use functional electrical stimulation? (choose all that apply)

- I use functional electrical stimulation myself
- An allied health professional such as a physiotherapist (please specify)
- A paid carer or support worker
- An informal carer such as family or friends
- I don't know
- Other (please specify) (free text)

Question 6 - General context question (free text)

Are there any situations where functional electrical stimulation works well or does not work well for people?

Please tell us about anything that makes it easier or harder to use functional electrical stimulation.

This could include things like:

- access to functional electrical stimulation
- access to supports that aim to achieve similar goals
- access to allied health or other professionals
- cost factors
- where they are used (such as a clinic, gym or at home)
- how they fit into a therapy or exercise plan, supervised or unsupervised
- age, gender, ethnicity or cultural factors
- who someone lives with or where they live, such as in a city or a remote area

You can tell us anything you think is relevant for the Evidence Advisory Committee to understand the support. (free text)

Personal Role – these questions are shown if people answer "I have used the support" (7 questions)

Question 1 – length of use

How long did you use the support? (please choose one)

- Less than 3 months
- 3-12 months
- More than 12 months

Question 2 – why stopped

Why did you stop using the support? (please provide details) (free text)

Question 3 - safety

Did you have any problems or safety issues because of using the support? These could be short-term problems or long-term problems.

- No
- Yes (please provide details). (free text)

If this question has raised concerns please see the list of help lines and services on the last page. If you have pain or ongoing problems that need medical attention, please seek medical advice.

Question 4 – how often

How often did you use functional electrical stimulation and for how long each time, on average? (please provide details) (free text)

I used functional electrical stimulation

- daily
- weekly
- other (please give details) (free text)

And/or I used it for

- less than 10 min per day
- around 30 min
- between 1-2 hours
- the whole morning
- the whole afternoon
- the whole day
- other amount (free text)

Question 5 – who provides

Who provided functional electrical stimulation for you to use?

- Bought the functional electrical stimulation equipment
- Rented the support
- Use or used functional electrical stimulation in a clinic
- Someone else provided functional electrical stimulation (please specify)

Did anyone assist you to use functional electrical stimulation? (choose all that apply)

- I used functional electrical stimulation myself
- An allied health professional such as a physiotherapist (please specify)
- A paid carer or support worker
- An informal carer such as family or friends
- I don't know
- Other (please specify) (free text)

Question 6 – what used now

What support do you use now to achieve the same aims as functional electrical stimulation? (please provide details) (free text)

Question 7 - General context question (free text)

Are there any situations where functional electrical stimulation works well or does not work well for people?

Please tell us about anything that makes it easier or harder to use functional electrical stimulation.

This could include things like:

- access to functional electrical stimulation
- access to supports that aim to achieve similar goals
- access to allied health or other professionals
- cost factors
- where they are used (such as a clinic, gym or at home)
- how they fit into a therapy or exercise plan, supervised or unsupervised
- age, gender, ethnicity or cultural factors
- who someone lives with or where they live, such as in a city or a remote area

You can tell us anything you think is relevant for the Evidence Advisory Committee to understand the support. (free text)

Personal Role – these questions are shown if people answer "I don't use the support but I use something else to achieve the same goals" (2 questions)

Question 1 – what support instead

Functional electrical stimulation aims to improve movement and muscle function leading to improved quality of life, independence, fitness, community participation and reduced need for walking aids. What do you use to achieve these goals, and why?

(please provide details) (free text)

Question 2 – general context question

Are there any situations where functional electrical stimulation works well or does not work well for people?

Please tell us about anything that makes it easier or harder to use functional electrical stimulation.

This could include things like:

- access to functional electrical stimulation
- access to supports that aim to achieve similar goals
- access to allied health or other professionals
- cost factors
- where they are used (such as a clinic, gym or at home)
- how they fit into a therapy or exercise plan, supervised or unsupervised
- age, gender, ethnicity or cultural factors
- who someone lives with or where they live, such as in a city or a remote area

You can tell us anything you think is relevant for the Evidence Advisory Committee to understand the support. (free text)

Carer/supporter Role – these questions are shown if people answer that they care for someone who uses or has used the support

Question 1 – length of use

Please select how long the person you care for has used (or did use) the support? (please choose one)

- Less than 3 months
- 3-12 months
- More than 12 months

Question 2 – continued use

Is your family member or the person you care for still using the support?

- Yes
- No
- Don't know

[Display if Yes

Do you think they will keep using the support?

- Yes
- No
- Don't know]

Please describe the reasons for your answer above.

You could include things like:

- how well it works or worked for them
- other supports tried
- cost, availability
- how long the support lasted or is expected to last.

Question 3 - safety

Have you had any problems or safety issues because of using the support? These could be short-term problems or long-term problems.

- No
- Yes (please provide details). (free text)

If this question has raised concerns please see the list of help lines and services on the last page. If you have pain or ongoing problems that need medical attention, please seek medical advice.

Question 4– how often

How often does your family member or the person you care for use functional electrical stimulation and for how many hours at a time? (please provide details) (free text)

They use functional electrical stimulation

- daily
- weekly
- other (please give details) (free text)

And/or they use it for

- less than 10 min per day
- around 30 min
- between 1-2 hours

- the whole morning
- the whole afternoon
- the whole day
- other amount (free text)

Question 5 – who provides/assistant

Who provides or did provide functional electrical stimulation for your family member or the person you care for to use?

- Bought the functional electrical stimulation equipment
- Rented the support
- Use or used functional electrical stimulation in a clinic
- Someone else provides or provided functional electrical stimulation (please specify)

Did or does anyone assist your family member or the person you care for use functional electrical stimulation? (choose any that apply)

- My family member, or the person I care for uses or used the functional electrical stimulation themself
- An allied health professional such as a physiotherapist (please specify)
- A paid carer or support worker
- An informal carer such as family or friends
- I don't know
- other (please specify) (free text)

Question 6 – general context question

Are there any situations where functional electrical stimulation works well or does not work well for people?

Please tell us about anything that makes it easier or harder to use functional electrical stimulation.

This could include things like:

- access to functional electrical stimulation
- access to supports that aim to achieve similar goals
- access to allied health or other professionals
- cost factors
- where they are used (such as a clinic, gym or at home)
- how they fit into a therapy or exercise plan, supervised or unsupervised
- age, gender, ethnicity or cultural factors
- who someone lives with or where they live, such as in a city or a remote area

You can tell us anything you think is relevant for the Evidence Advisory Committee to understand the support. (free text)

Provider/clinician/researcher Role – these questions are shown if people answer that they provide the support, or are a clinician or researcher in the area of the support

Question 1 – only for providers/clinicians/researchers –not recommend?

In what circumstances would you **not recommend** the support and why?

Question 2 – Alternative q only for providers/clinicians/researchers on recommending the support.

In what circumstances would you **recommend** the support and why? (free text)

Question 3 - safety

Are there any problems, safety issues or adverse events related to using the support that you have observed or know about? These could be short-term problems or long-term problems.

- No
- Yes (please provide details). (free text)

If this question has raised concerns please see the list of help lines and services on the last page.

Question 4 – alternative supports

What other supports would you recommend instead of functional electrical stimulation, or if functional electrical stimulation were unavailable or unsuitable? (please provide details) (free text)

[Text item before the next questions]

The following questions relate to how a support is used, when it would be recommended for at least some groups. If you would not recommend the support for any groups, please feel free to skip any questions that are not relevant.

Question 5 – length of use

How long should the support be used for? (please choose all that apply)

- Less than 3 months
- 3-12 months
- More than 12 months
- Until a specific outcome is achieved (please specify) (text box)

Question 6– how often

How often should the support be used and for how many hours at a time for optimum results? (please provide details) (free text)

People should use functional electrical stimulation

- daily
- weekly
- other (please give details) (free text)

And/or should use it for

- less than 10 min per day
- around 30 min
- between 1-2 hours
- the whole morning
- the whole afternoon
- the whole day
- other amount (free text)

Question 7 – who should provide/assist

Who should provide functional electrical stimulation?

- The participant should purchase the support
- The support should be rented by the participant
- The support should be provided in a clinical setting
- Other (please specify) (free text)

Who should assist using functional electrical stimulation if assistance is needed? (choose all that apply)

- An allied health professional such as a physiotherapist (please specify)
- A paid carer or support worker
- An informal carer such as family or friends
- Other (please specify)

Are there qualifications or regulations that should apply to people providing or assisting with the support? (free text)

Do you provide functional electrical stimulation equipment as part of your clinical service? What are the costs associated with buying and maintaining this equipment? How are participants charged for accessing the support? (free text)

Do you use functional electrical stimulation as part of a telehealth or a remote clinical service? If yes, provide details and whether additional software, subscriptions, specific functional electrical stimulation products are required. (free text)

Question 8 – general context question

Are there any situations where functional electrical stimulation works well or does not work well for people?

Please tell us about anything that makes it easier or harder to use functional electrical stimulation.

This could include things like:

- access to functional electrical stimulation
- access to supports that aim to achieve similar goals
- access to allied health or other professionals
- cost factors
- where they are used (such as a clinic, gym or at home)
- how they fit into a therapy or exercise plan, supervised or unsupervised
- age, gender, ethnicity or cultural factors
- who someone lives with or where they live, such as in a city or a remote area

You can tell us anything you think is relevant for the Evidence Advisory Committee to understand the support. (free text)

Question 9 – for providers/clinicians and researchers only, grey lit question

A systematic review will be conducted to inform the Evidence Advisory Committee's work. It will include peer reviewed research as well as key sources of grey literature. Are there other sources of evidence in your area, such as professional journals or conferences, that we should be checking for evidence on functional electrical stimulation?

Please provide details below if they are publicly available. If you have specific articles or papers that you think the Evidence Advisory Committee should be aware of, you may also send them via email to disabilityevidence@health.gov.au.

- professional journals (free text for titles etc.)
- conference publications (free text)
- technical documents (free text)
- policy or guidelines documents (free text)
- other relevant documents (free text)

Other Role – these questions are shown if people answer "none of the above"

Question 1 – general context question

Are there any situations where functional electrical stimulation works well or does not work well for people?

Please tell us about anything that makes it easier or harder to use functional electrical stimulation.

This could include things like:

- access to functional electrical stimulation
- access to supports that aim to achieve similar goals
- access to allied health or other professionals
- cost factors
- where they are used (such as a clinic, gym or at home).
- how they fit into a therapy or exercise plan, supervised or unsupervised
- age, gender, ethnicity or cultural factors
- who someone lives with or where they live, such as in a city or a remote area

You can tell us anything you think is relevant for the Evidence Advisory Committee to understand the support. (free text)

Hyperbaric oxygen therapy for disability

Scope questions - shown to everyone

Question 1 - Support

Hyperbaric oxygen therapy is a treatment where:

- a person breathes pure oxygen (near 100%) in a pressurized chamber, and
- air pressure in the chamber is 2 to 3 times higher than at sea level pressure.

Mild hyperbaric oxygen therapy is where:

- a person breathes air, or air with extra oxygen added, in a chamber that may not be fully sealed,
- air pressure in the chamber is less than 2 times higher than at sea level pressure.

This review will focus on hyperbaric oxygen therapy that is used for disability-related outcomes.

This review will not include hyperbaric oxygen therapy as a medical treatment (such as wound healing, decompression sickness and treatment for post radiotherapy injuries).

Does the description above accurately describe what hyperbaric oxygen therapy and/or mild hyperbaric oxygen therapy is and how it is used as a disability support? (please choose one)

- Yes
- No, I want to change something (please say what you want to change and why) (text box)

Question 2 – Disability group/population

Based on what we know so far, disability groups that may use hyperbaric oxygen therapy or mild hyperbaric oxygen therapy **as a disability support** are individuals with:

- Autism
- Cerebral palsy
- Traumatic brain injury (TBI)

Do these groups cover all the people who may use hyperbaric oxygen therapy or mild hyperbaric oxygen therapy as a disability support? (please choose one)

- Yes

- No, I want to change something (please say what you want to change and why) (text box)

Question 3 – Outcomes

Supports are used to achieve certain outcomes. These outcomes can be to improve people's life (provide benefit) or to reduce harm. We want to make sure the assessment examines outcomes that are important to people.

Based on what we know so far, we think hyperbaric oxygen therapy or mild hyperbaric oxygen therapy as a disability support aims to help with the following outcomes:

- memory and attention
- quality of life
- regulating emotion
- cognitive function
- fatigue
- anxiety

Are these the most important outcomes for the people using this support? (please choose one)

- Yes (you can provide additional comments if you want to, such as if some outcomes are more important to you) (text box)
- No, I want to change the list (please tell us what you want to change and why, you could add something or remove something). (text box)

Question 4 - Comparator

We will need to compare how effective hyperbaric oxygen therapy or mild hyperbaric oxygen therapy as a disability support are at achieving their goals compared to some other supports which might aim to help with the same things, or very similar things.

Depending on the goal, we think the most relevant supports to compare to hyperbaric oxygen therapy or mild hyperbaric oxygen therapy as a disability support are:

- medications
- psychological/neuropsychological supports
- therapy supports (e.g. occupational therapy or speech pathology)
- other wellbeing activities (e.g. yoga and meditation)

We chose these supports to compare to hyperbaric oxygen therapy or mild hyperbaric oxygen therapy as a disability support because they aim to help achieve similar outcomes.

If you have used or suggest something other than hyperbaric oxygen therapy or mild hyperbaric oxygen therapy as a disability support to achieve similar outcomes, that is not included in this list, please add it below.

Are these the best supports to compare to hyperbaric oxygen therapy and/or mild hyperbaric oxygen therapy? (please choose one)

- Yes
- No, I want to change something (please say what you want to change and why) (text box)

Use questions – the first question will be a branching question

Branching question

Do you use hyperbaric oxygen therapy or mild hyperbaric oxygen therapy as a disability support, or provide it to someone else/assist someone else with it? (choose the most relevant)

- I use the support
- I have used the support, but I don't use it any more
- I don't use the support, but I use something else to achieve the same goals
- I have a family member who uses or has used the support
- I care for someone who uses or has used the support
- I provide or have provided the support to someone else or assist them to use it
- I am a clinician or researcher who works with or studies the support
- None of the above

Personal Role branch – these questions are shown if people answer "I use the support myself" (6 questions)

Question 1 – length of use

How long have you been using the support? (please choose one)

- Less than 3 months
- 3-12 months
- More than 12 months

Question 2 – continued use

Do you think you will continue using the support? (please choose one)

- Yes
- No
- Don't know

Please provide details of why. You could include things like:

- how well it works for you
- other supports you have tried
- cost and availability
- how long the support is expected to last.
  (text box)

Question 3 -safety

Have you had any problems or safety issues because of using the support?

- No
- Yes (please provide details). (free text)

If this question has raised concerns please see the list of help lines and services on the last page. If you have pain or ongoing problems that need medical attention, please seek medical advice.

Question 4 – how often

How often do you use hyperbaric oxygen therapy or mild hyperbaric oxygen therapy as a disability support and for how long each time? For example, how many sessions and how long each session usually lasts? (please provide details) (free text)

Question 5 – who provides

Who provides hyperbaric oxygen therapy or mild hyperbaric oxygen therapy as a disability support for you to use?

- I use hyperbaric oxygen therapy or mild hyperbaric oxygen therapy as a disability support at wellness or alternative therapy clinics
- I provide or bought a hyperbaric oxygen therapy chamber myself and use it at home as a disability support
- I use hyperbaric oxygen therapy or mild hyperbaric oxygen therapy as a disability support in hospital

Does anyone assist you to use hyperbaric oxygen therapy or mild hyperbaric oxygen therapy as a disability support? (choose all that apply)

- Trained health professionals such as doctors, nurses (please specify)
- Other allied health professionals (please specify)
- I use hyperbaric oxygen therapy or mild hyperbaric oxygen therapy as a disability support by myself
- A paid carer or support worker
- An informal carer such as family or friends
- I don't know
- Other (please specify) (free text)

Do you know what type of hyperbaric oxygen therapy as a disability support that you receive?

- Hyperbaric oxygen therapy as a disability support in a hospital facility
- Mild hyperbaric oxygen therapy as a disability support in a clinic or wellness centre
- Mild hyperbaric oxygen therapy as a disability support at home
- Other (please specify)

Question 6 - General context question

Are there any situations where hyperbaric oxygen therapy or mild hyperbaric oxygen therapy works well or does not work well for people?

Please tell us about anything that makes it easier or harder to use hyperbaric oxygen therapy or mild hyperbaric oxygen therapy.

This could include things like:

- access to hyperbaric oxygen therapy or mild hyperbaric oxygen therapy
- access to supports that aim to achieve similar goals
- access to allied health or other professionals
- cost factors
- where it is used (such as a hospital, clinic, or at home)
- how it fits into a therapy plan, supervised or unsupervised
- age, gender, ethnicity or cultural factors
- who someone lives with or where they live, such as in a city or a remote area

You can tell us anything you think is relevant for the Evidence Advisory Committee to understand the support. (free text)

Personal Role – these questions are shown if people answer "I have used the support" (7 questions)

Question 1 – length of use

How long did you use the support? (please choose one)

- Less than 3 months
- 3-12 months
- More than 12 months

Question 2 – why stopped

Why did you stop using the support? (please provide details) (free text)

Question 3 - safety

Did you have any problems or safety issues because of the support? These could be short-term problems or long-term problems.

- No
- Yes (please provide details). (free text)

If this question has raised concerns please see the list of help lines and services on the last page. If you have pain or ongoing problems that need medical attention, please seek medical advice.

Question 4 – how often

How often did you use hyperbaric oxygen therapy or mild hyperbaric oxygen therapy as a disability support and for how long each time? For example, how many sessions and how long each session usually lasts? (please provide details) (free text)

Question 5 – who provides

Who provided hyperbaric oxygen therapy or mild hyperbaric oxygen therapy as a disability support for you to use?

- I used hyperbaric oxygen therapy or mild hyperbaric oxygen therapy as a disability support at a wellness or alternative therapy clinic
- I provided or bought hyperbaric oxygen therapy chamber myself and used it at home as a disability support
- I used hyperbaric oxygen therapy or mild hyperbaric oxygen therapy as a disability support in hospital

Did anyone assist you to use hyperbaric oxygen therapy or mild hyperbaric oxygen therapy as a disability support? (choose all that apply)

- Trained health professionals such as doctors, nurses (please specify)
- Other allied health professionals (please specify)
- I used hyperbaric oxygen therapy or mild hyperbaric oxygen therapy myself
- A paid carer or support worker
- An informal carer such as family or friends
- I don't know
- Other (please specify) (free text)

Do you know what type of hyperbaric oxygen therapy as a disability support you received?

- Hyperbaric oxygen therapy as a disability support in a hospital facility
- Mild hyperbaric oxygen therapy as a disability support in a clinic or wellness centre

- Mild hyperbaric oxygen therapy as a disability support at home
- Other (please specify)

Question 6 – what used now

What support do you use now to achieve the same aims as hyperbaric oxygen therapy or mild hyperbaric oxygen therapy as a disability support? (please provide details) (free text)

Question 7 - General context question

Are there any situations where hyperbaric oxygen therapy or mild hyperbaric oxygen therapy works well or does not work well for people?

Please tell us about anything that makes it easier or harder to use hyperbaric oxygen therapy or mild hyperbaric oxygen therapy.

This could include things like:

- access to hyperbaric oxygen therapy or mild hyperbaric oxygen therapy as a disability support
- access to supports that aim to achieve similar goals
- access to allied health or other professionals
- cost factors
- where it is used (such as a hospital, clinic, or at home)
- how it fits into a therapy plan, supervised or unsupervised
- age, gender, ethnicity or cultural factors
- who someone lives with or where they live, such as in a city or a remote area

You can tell us anything you think is relevant for the Evidence Advisory Committee to understand the support. (free text)

Personal Role – these questions are shown if people answer "I don't use the support but I use something else to achieve the same goals" **(2 questions)**

Question 1 – what support instead

Hyperbaric oxygen therapy or mild hyperbaric oxygen therapy as a disability support aims to improve health and psychological outcomes by increasing oxygen in the body.

What do you use to achieve these goals, and why?

(please provide details) (free text)

Question 2 – general context question

Are there any situations where hyperbaric oxygen therapy or mild hyperbaric oxygen therapy works well or does not work well for people?

Please tell us about anything that makes it easier or harder to use hyperbaric oxygen therapy or mild hyperbaric oxygen therapy.

This could include things like:

- access to hyperbaric oxygen therapy or mild hyperbaric oxygen therapy as a disability support
- access to supports that aim to achieve similar goals
- access to allied health or other professionals
- cost factors
- where it is used (such as a hospital, clinic, or at home)
- how it fits into a therapy plan, supervised or unsupervised
- age, gender, ethnicity or cultural factors
- who someone lives with or where they live, such as in a city or a remote area

You can tell us anything you think is relevant for the Evidence Advisory Committee to understand the support. (free text)

Carer/supporter Role – these questions are shown if people answer that they care for someone who uses or has used the support

Question 1 – length of use

Please select how long the person you care for has used (or did use) the support? (please choose one)

- Less than 3 months
- 3-12 months
- More than 12 months

Question 2 – continued use and why

Is your family member or the person you care for still using the support?

- Yes
- No
- Don't know

[Display if Yes

Do you think they will keep using the support?

- Yes
- No
- Don't know]

Please describe the reasons for your answer above.

You could include things like:

- how well it works for them
- other supports tried
- cost, availability
- how long the support is expected to last.

Question 3 - safety

Has the family member or person you care for had any problems or safety issues because of using the support? These could be short-term problems or long-term problems.

- No
- Yes (please provide details). (free text)

If this question has raised concerns please see the list of help lines and services on the last page. If you have pain or ongoing problems that need medical attention, please seek medical advice.

Question 4– how often

How often does your family member or the person you care for use hyperbaric oxygen therapy or mild hyperbaric oxygen therapy as a disability support and for how many hours at a time? For example, how many sessions and how long each session usually lasts? (please provide details) (free text)

Question 5 – who provides/assistant

Who provided hyperbaric oxygen therapy or mild hyperbaric oxygen therapy as a disability support for your family member or the person you care for to use?

- They use or used hyperbaric oxygen therapy or mild hyperbaric oxygen therapy as a disability support at wellness or alternative therapy clinics
- They provided or bought hyperbaric oxygen therapy chamber themself and use it at home as a disability support
- They use or used hyperbaric oxygen therapy or mild hyperbaric oxygen therapy as a disability support in hospital

Did or does anyone assist your family member or the person you care for in using hyperbaric oxygen therapy or mild hyperbaric oxygen therapy as a disability support? (choose any that apply)

- Trained health professionals such as doctors, nurses (please specify)
- Other allied health professionals (please specify)
- My family member or the person I care for uses or used hyperbaric oxygen therapy or mild hyperbaric oxygen therapy as a disability support themselves
- A paid carer or support worker

- An informal carer such as family or friends
- I don't know
- Other (please specify) (free text)

Do you know what type of hyperbaric oxygen therapy your family member or the person you care for uses or has used as a disability support?

- Hyperbaric oxygen therapy as a disability support in a hospital facility
- Mild hyperbaric oxygen therapy as a disability support in a clinic or wellness centre
- Mild hyperbaric oxygen therapy as a disability support at home
- Other (please specify)

Question 6 – general context question

Are there any situations where hyperbaric oxygen therapy or mild hyperbaric oxygen therapy works well or does not work well for people?

Please tell us about anything that makes it easier or harder to use hyperbaric oxygen therapy or mild hyperbaric oxygen therapy.

This could include things like:

- access to hyperbaric oxygen therapy or mild hyperbaric oxygen therapy as a disability support
- access to supports that aim to achieve similar goals
- access to allied health or other professionals
- cost factors
- where it is are used (such as a hospital, clinic, or at home)
- how it fits into a therapy plan, supervised or unsupervised
- age, gender, ethnicity or cultural factors
- who someone lives with or where they live, such as in a city or a remote area

You can tell us anything you think is relevant for the Evidence Advisory Committee to understand the support. (free text)

Provider/clinician/researcher Role – these questions are shown if people answer that they provide the support, or are a clinician or researcher in the area of the support

Question 1 – only for providers/clinicians/researchers –not recommend?

In what circumstances would you **not recommend** the support and why?

Question 2 – Alternative q only for providers/clinicians/researchers on recommending the support.

In what circumstances would you **recommend** the support and why? (free text)

Question 3 -safety

Are there any problems, safety issues or adverse events related to using the support that you have observed or know about? These could be short-term problems or long-term problems.

- No
- Yes (please provide details). (free text)

If this question has raised concerns please see the list of help lines and services on the last page.

Question 4 – alternative supports

What other supports would you recommend instead of hyperbaric oxygen therapy or mild hyperbaric oxygen therapy as a disability support, or if hyperbaric oxygen therapy or mild hyperbaric oxygen therapy as a disability support were unavailable or unsuitable? (please provide details) (free text)

[Text item before the next questions]

The following questions relate to how a support is used, when it would be recommended for at least some groups. If you would not recommend the support for any groups, please feel free to skip any questions that are not relevant.

Question 5 – length of use

How long should the support be used for? (please choose all that apply)

- Less than 3 months
- 3-12 months
- More than 12 months
- Until a specific outcome is achieved (please specify) (text box)

Question 6– how often

How often should hyperbaric oxygen therapy or mild hyperbaric oxygen therapy as a disability support be used and for how many hours at a time for optimum results? For example, how many sessions and how long each session should usually last? (please provide details) (free text)

Question 7 – who should provide/assist

Who should provide hyperbaric oxygen therapy or mild hyperbaric oxygen therapy as a disability support?

- Wellness or alternative therapy clinics should provide hyperbaric oxygen therapy or mild hyperbaric oxygen therapy as a disability support
- The person should provide or buy hyperbaric oxygen therapy chamber themselves and use it at home
- A 24-hour medical facility (hospital-based or accredited hyperbaric medicine units) should provide hyperbaric oxygen therapy or mild hyperbaric oxygen therapy as a disability support
- Other (please specify) (free text)

Who should assist using hyperbaric oxygen therapy or mild hyperbaric oxygen therapy as a disability support if assistance is needed? (choose all that apply)

- Trained health professionals such as doctors, nurses (please specify)
- Other allied health professionals (please specify)
- Individuals can use hyperbaric oxygen therapy or mild hyperbaric oxygen therapy as a disability support themself
- A paid carer or support worker (free text)
- An informal carer such as family or friends (free text)
- Other (please specify) (free text)

Are there qualifications or regulations that should apply to people providing or assisting with the support? (free text)

Do you know what type of hyperbaric oxygen therapy as a disability support you would recommend to people with disabilities?

- Hyperbaric oxygen therapy as a disability support in a hospital facility
- Mild hyperbaric oxygen therapy as a disability support in a clinic or wellness centre
- Mild hyperbaric oxygen therapy as a disability support at home
- Other (please specify)

Question 8 – general context question

Are there any situations where hyperbaric oxygen therapy or mild hyperbaric oxygen therapy works well or does not work well for people?

Please tell us about anything that makes it easier or harder to use hyperbaric oxygen therapy or mild hyperbaric oxygen therapy.

This could include things like:

- access to hyperbaric oxygen therapy or mild hyperbaric oxygen therapy as a disability support

- access to supports that aim to achieve similar goals
- access to allied health or other professionals
- cost factors
- where it is used (such as a hospital, clinic, or at home)
- how it fits into a therapy plan, supervised or unsupervised
- age, gender, ethnicity or cultural factors
- who someone lives with or where they live, such as in a city or a remote area

You can tell us anything you think is relevant for the Evidence Advisory Committee to understand the support. (free text)

Question 9 – for providers/clinicians and researchers only, grey lit question

A systematic review will be conducted to inform the Evidence Advisory Committee's work. It will include peer-reviewed research as well as key sources of grey literature. Are there other sources of evidence in your area, such as professional journals or conferences, that we should be checking for evidence on hyperbaric oxygen therapy or mild hyperbaric oxygen therapy as a disability support?

Please provide details below if they are publicly available. If you have specific articles or papers that you think the Evidence Advisory Committee should be aware of, you may also send them via email to disabilityevidence@health.gov.au.

- professional journals (free text for titles etc.)
- conference publications (free text)
- technical documents (free text)
- policy or guidelines documents (free text)
- other relevant documents (free text)

Other Role – these questions are shown if people answer "none of the above"

Question 1- general context question

Are there any situations where hyperbaric oxygen therapy or mild hyperbaric oxygen therapy works well or does not work well for people?

Please tell us about anything that makes it easier or harder to use hyperbaric oxygen therapy or mild hyperbaric oxygen therapy.

This could include things like

- access to hyperbaric oxygen therapy or mild hyperbaric oxygen therapy as a disability support
- access to supports that aim to achieve similar goals

- access to allied health or other professionals
- cost factors
- where it is used (such as a clinic, or at home)
- how it fits into a therapy plan, supervised or unsupervised
- age, gender, ethnicity or cultural factors
- who someone lives with or where they live, such as in a city or a remote area

You can tell us anything you think is relevant for the Evidence Advisory Committee to understand the support. (free text)

Music therapy

Scope questions - shown to everyone

Question 1 - Support

Music therapy is the intentional and therapeutic use of music with the aim to help people improve their:

- Health
- Functioning
- Well-being

Music therapy is delivered by a qualified music therapist, who has completed a music therapy degree. Music therapy in the NDIS must be delivered by a therapist registered with the professional body in Australia (AMTA - Australian Music Therapy Association).

Does the description above accurately describe what music therapy is and how it is used? (please choose one)

- Yes
- No, I want to change something (please say what you want to change and why) (text box)

Question 2 – Disability group/population

Based on what we know so far, we think the people who might use music therapy are people with:

- Autism
- Intellectual disability (including Down syndrome)
- Cognitive disability (like memory and attention difficulties)
- Neurological disability (like motor difficulties with multiple sclerosis, or after a stroke)
- Speech and/or language disabilities
- Sensory disability (such as following spinal cord injury)
- Physical disability (like strength and co-ordination difficulties)
- Psychosocial disability (like anxiety, PTSD)

Do these groups cover all the people who may use music therapy? (please choose one)

- Yes
- No, I want to change something (please say what you want to change and why) (text box)

Question 3 – Outcomes

Supports are used to achieve certain outcomes. These outcomes can be to improve people's life (provide benefit) or to reduce harm. We want to make sure the assessment examines outcomes that are important to people.

Based on what we know so far, we think music therapy aims to help with the following outcomes:

- Activities of daily living skills
- Independence in completing tasks
- Emotional regulation or self-regulation
- Quality of life.
- Community and social participation
- Stress, anxiety, mood and depressive symptoms
- Cognitive performance (such as memory, attention, and executive functioning)
- Self-esteem and self-confidence

Are these the most important outcomes for the people using this support? (please choose one)

> Yes (you can provide additional comments if you want to, such as if some outcomes are more important to you) (text box)
> No, I want to change the list (please tell us what you want to change and why, you could add something or remove something). (text box)

Question 4 - Comparator

We will need to compare how effective music therapy is at achieving its goals compared to some other supports which might aim to help with the same, or similar, things.

Depending on the goal, we think the most relevant supports to compare music therapy to are:

- Speech pathology
- Occupational therapy
- Physiotherapy
- Psychological supports
- Music activities
- Music classes
- Music lessons
- Online therapy
- Art therapy

We chose these supports to compare to music therapy because they may aim to help achieve similar outcomes, depending on the goal.

If you have used or suggested something other than music therapy to achieve similar outcomes, that is not included in this list, please add it below.

Are these the best supports to compare music therapy to? (please choose one)

- Yes
- No, I want to change something (please say what you want to change and why) (text box)

Use questions – the first question will be a branching question

Branching question

Do you use music therapy or provide it to someone else/assist someone else with it? (choose the most relevant)

- I use the support
- I have used the support, but I don't use it any more
- I don't use the support, but I use something else to achieve the same goals
- I have a family member who uses or has used the support
- I care for someone who uses or has used the support
- I provide or have provided the support to someone else or assist them to use it
- I am a clinician or researcher who works with or studies the support
- None of the above

Personal Role branch – these questions are shown if people answer "I use the support myself" (6 questions)

Question 1 – length of use

How long have you been using the support? (please choose one)

- Less than 3 months
- 3-12 months
- More than 12 months

Question 2 – continued use

Do you think you will continue using the support? (please choose one)

- Yes
- No
- Don't know

Please provide details of why. You could include things like:

- how well it works for you
- other supports you have tried
- cost and availability
- how long the support is expected to last.
  (text box)

Question 3 - safety

Have you had any problems or safety issues because of using the support? These could be short-term problems or long-term problems.

- No
- Yes (please provide details). (free text)

If this question has raised concerns please see the list of help lines and services on the last page. If you have pain or ongoing problems that need medical attention, please seek medical advice.

Question 4 – how often

How often do you participate in music therapy and for how long each time on average? (please provide details)

I participate in music therapy

- daily
- weekly
- other (please give details) (free text)

And each time I participate in music therapy for around

- 30 minutes
- 1hour
- 2 hours
- other amount (free text)

Question 5 – who provides

Who provides music therapy for you to use?

- A registered music therapist
- A music therapist that is not registered
- A musician or music teacher
- An allied health professional such as a speech pathologist
- A paid carer/support worker
- I don't know
- Other (please specify) (free text)

Does anyone assist you to use music therapy? (choose all that apply)

- An allied health professional such as an occupational therapist (please specify)
- A paid carer or support worker
- An informal carer such as family or friends
- I don't know
- Other (please specify) (free text)

Question 6 - General context question

Are there any situations where music therapy works well or does not work well for people?

Please tell us about anything that makes it easier or harder to use music therapy.

This could include things like:

- access to music therapy
- access to supports that aim to achieve similar goals
- access to allied health or other professionals
- cost factors
- where it is used (such as a clinic, or at home)
- how it fits into a therapy plan, supervised or unsupervised
- age, gender, ethnicity or cultural factors
- who someone lives with or where they live, such as in a city or a remote area

You can tell us anything you think is relevant for the Evidence Advisory Committee to understand the support. (free text)

Personal Role – these questions are shown if people answer "I have used the support" (7 questions)

Question 1 – length of use

How long did you use the support? (please choose one)

- Less than 3 months
- 3-12 months
- More than 12 months

Question 2 – why stopped

Why did you stop using the support? (please provide details) (free text)

Question 3 - safety

Did you have any problems or safety issues because of using the support? These could be short-term problems or long-term problems.

- No
- Yes (please provide details). (free text)

If this question has raised concerns please see the list of help lines and services on the last page. If you have pain or ongoing problems that need medical attention, please seek medical advice.

Question 4 – how often

How often did you participate in music therapy and for how long each time, on average? (please provide details) (free text)

I participated in music therapy

- daily
- weekly
- other (please give details) (free text)

And each time I participated in music therapy for around

- 30 minutes
- 1 hour
- 2 hours
- other amount (free text)

Question 5 – who provides

Who provided music therapy for you to use?

- A registered music therapist
- A music therapist that is not registered
- A musician or music teacher
- An allied health professional such as a speech pathologist
- A paid carer/support worker
- I don't know
- Other (please specify) (free text)

Did anyone assist you to use music therapy? (choose all that apply)

- An allied health professional such as an occupational therapist (please specify)
- A paid carer or support worker
- An informal carer such as family or friends

- I don't know
- Other (please specify) (free text)

Question 6 – what used now

What support do you use now to achieve the same aims as music therapy? (please provide details) (free text)

Question 7 - General context question (free text)

Are there any situations where music therapy works well or does not work well for people?

Please tell us about anything that makes it easier or harder to use music therapy.

This could include things like:

- access to music therapy
- access to supports that aim to achieve similar goals
- access to allied health or other professionals
- cost factors
- where it is used (such as a clinic, or at home)
- how it fits into a therapy plan, supervised or unsupervised
- age, gender, ethnicity or cultural factors
- who someone lives with or where they live, such as in a city or a remote area

You can tell us anything you think is relevant for the Evidence Advisory Committee to understand the support. (free text)

Personal Role – these questions are shown if people answer "I don't use the support but I use something else to achieve the same goals" **(2 questions)**

Question 1 – what support instead

Music therapy aims to improve functional and psychological outcomes. What do you use to achieve these goals, and why?

(please provide details) (free text)

Question 2 – general context question

Are there any situations where music therapy works well or does not work well for people?

Please tell us about anything that makes it easier or harder to use music therapy.

This could include things like:

- access to music therapy
- access to supports that aim to achieve similar goals
- access to allied health or other professionals
- cost factors
- where it is used (such as a clinic, or at home)
- how it fits into a therapy plan, supervised or unsupervised
- age, gender, ethnicity or cultural factors
- who someone lives with or where they live, such as in a city or a remote area

You can tell us anything you think is relevant for the Evidence Advisory Committee to understand the support. (free text)

Carer/supporter Role – these questions are shown if people answer that they care for someone who uses or has used the support

Question 1 – length of use

Please select how long the person you care for has used (or did use) the support? (please choose one)

- Less than 3 months
- 3-12 months
- More than 12 months

Question 2 – continued use

Is your family member or the person you care for still using the support?

- Yes
- No
- I Don't know

[Display if Yes

Do you think they will keep using the support?

- Yes
- No
- I Don't know]

Please describe the reasons for your answer above.

You could include things like:

- how well it works for them
- other supports tried
- cost, availability

- how long the support is expected to last.

Question 3 - safety

Has your family member or the person you care for had any problems or safety issues because of using the support? These could be short-term problems or long-term problems.

- No
- Yes (please provide details). (free text)

If this question has raised concerns please see the list of help lines and services on the last page. If you have pain or ongoing problems that need medical attention, please seek medical advice.

Question 4– how often

How often does your family member or the person you care for participate in music therapy and for how many hours at a time? (please provide details) (free text)

They participate in music therapy

- daily
- weekly
- other (please give details) (free text)

And each time they participate in music therapy for around

- 30 min
- 1 hour
- 2 hours
- other amount (free text)

Question 5 – who provides/assistant

Who provided music therapy for your family member or the person you care for to use?

- A registered music therapist
- A music therapist that is not registered
- A musician or music teacher
- An allied health professional such as a speech pathologist
- A paid carer/support worker
- I don't know
- Other (please specify) (free text

Did or does anyone assist your family member or the person you care for in using music therapy? (choose any that apply)

- An allied health professional such as an occupational therapist (please specify)
- A paid carer or support worker
- An informal carer such as family or friends
- I don't know
- Other (please specify) (free text)

Question 6 – general context question

Are there any situations where music therapy works well or does not work well for people?

Please tell us about anything that makes it easier or harder to use music therapy.

This could include things like:

- access to music therapy
- access to supports that aim to achieve similar goals
- access to allied health or other professionals
- cost factors
- where it is used (such as a clinic, or at home)
- how it fits into a therapy plan, supervised or unsupervised
- age, gender, ethnicity or cultural factors
- who someone lives with or where they live, such as in a city or a remote area

You can tell us anything you think is relevant for the Evidence Advisory Committee to understand the support. (free text)

Provider/clinician/researcher Role – these questions are shown if people answer that they provide the support, or are a clinician or researcher in the area of the support

Question 1 – only for providers/clinicians/researchers –not recommend?

In what circumstances would you **not recommend** the support and why?

Question 2 – Alternative q only for providers/clinicians/researchers on recommending the support.

In what circumstances would you **recommend** the support and why? (free text)

Question 3 - safety

Are there any problems, safety issues or adverse events related to using the support that you have observed or know about? These could be short-term problems or long-term problems.

- No
- Yes (please provide details). (free text)

If this question has raised concerns please see the list of help lines and services on the last page.

Question 4 – alternative supports

What other supports would you recommend instead of music therapy, or if music therapy were unavailable or unsuitable? (please provide details) (free text)

[Text item before the next questions]

The following questions relate to how a support is used, in cases when it would be recommended for at least some participants. Please skip any questions that are not relevant.

Question 5 – length of use

How long should the support be used for? (please choose all that apply)

- Less than 3 months
- 3-12 months
- More than 12 months
- Until a specific outcome is achieved please specify) (text box)

Question 6– how often

How often should people participate in music therapy and for how many hours at a time for optimum results? (please provide details) (free text)

People should participate in music therapy

- daily
- weekly
- other (please give details) (free text)

And each time people participate it should be for around

- 30 minutes
- 1 hour
- 2 hours
- other amount (free text)

Question 7 – who should provide/assist

Who should provide music therapy?

- A registered music therapist
- A music therapist that is not registered
- A musician or music teacher
- An allied health professional such as a speech pathologist
- A paid carer/support worker
- Other (please specify) (free text)

Is there anyone who should assist people to use music therapy? (choose all that apply)

- An allied health professional such as an occupational therapist (please specify)
- A paid carer or support worker
- An informal carer such as family or friends
- Other (please specify) (free text)

Are there qualifications or regulations that should apply to people providing or assisting with the support? (free text)

Question 8 – general context question

Are there any situations where music therapy works well or does not work well for people?

Please tell us about anything that makes it easier or harder to use music therapy.

This could include things like:

- access to music therapy
- access to supports that aim to achieve similar goals
- access to allied health or other professionals
- cost factors
- where it is used (such as a clinic, gym or at home)
- how it fits into a therapy plan, supervised or unsupervised
- age, gender, ethnicity or cultural factors
- who someone lives with or where they live, such as in a city or a remote area

You can tell us anything you think is relevant for the Evidence Advisory Committee to understand the support. (free text)

Question 9 – for providers/clinicians and researchers only, grey lit question

A systematic review will be conducted to inform the Evidence Advisory Committee's work. It will include peer reviewed research as well as key sources of grey literature. Are there other sources of evidence in your area, such as professional journals or conferences, that we should be checking for evidence on music therapy?

Please provide details below if they are publicly available. If you have specific articles or papers that you think the Evidence Advisory Committee should be aware of, you may also send them via email to disabilityevidence@health.gov.au.

- professional journals (free text for titles etc.)
- conference publications (free text)
- technical documents (free text)
- policy or guidelines documents (free text)
- other relevant documents (free text)

Other Role – these questions are shown if people answer “none of the above”

Question 1- general context

Are there any situations where music therapy works well or does not work well for people?

Please tell us about anything that makes it easier or harder to use music therapy. This could include things like

- access to music therapy
- access to supports that aim to achieve similar goals
- access to allied health or other professionals
- cost factors
- where it is used (such as a clinic, or at home)
- how it fits into a therapy plan, supervised or unsupervised
- age, gender, ethnicity or cultural factors
- who someone lives with or where they live, such as in a city or a remote area

You can tell us anything you think is relevant for the Evidence Advisory Committee to understand the support. (free text)

Prosthetics with microprocessors

Scope questions - shown to everyone

Question 1 – Support

This assessment looks at prosthetics with microprocessors. These are artificial arms or legs that have sensors and a small computer inside. The computer helps the limb move more naturally by adjusting how the joints move as you use it. This is claimed to help people stay steady, avoid falls, and use less energy when moving.

Most of these prosthetics are for legs (like knees or ankle prosthetics), but some are for arms (like hands, wrists, or elbow prosthetics). People who use them need a specialist to fit and adjust the prosthetic, show them how to use it, and help with things like changing the battery. In Australia, these prosthetics must meet Therapeutic Goods Administration (TGA) safety rules.

Does the description above accurately describe what prosthetics with microprocessors are and how they are used? (please choose one)

- Yes
- No, I want to change something (please say what you want to change and why) (text box)

Question 2 – Disability group/population

Based on what we know so far, we think the people who might use prosthetics with microprocessors are adults who have:

- had a leg amputated above or at the knee, especially those who:
  - walk at different speeds and get around in the community (K3–K4 ambulators)
  - walk at a slower pace but have a high risk of falling (K2 ambulators)
  - are at risk of falls.
- have lost both arms, or who use one arm much more than the other and could benefit from a powered artificial arm or hand.

Not many children use these because they typically outgrow the prosthesis quickly.

Do these groups cover all the people who may use Prosthetics with microprocessors? (please choose one)

- Yes
- No, I want to change something (please say what you want to change and why) (text box)

Question 3 – Outcomes

Supports are used to achieve certain outcomes. These outcomes can be to improve people's life (provide benefit) or to reduce harm. We want to make sure the assessment examines outcomes that are important to people.

Based on what we know so far, we think prosthetics with microprocessors are associated with the following outcomes:

- Help people move better (mobility)
- Walk more easily (gait)
- Balance/ reduced risk of falls
- For arms, help with hand movement (dexterity) and grip
- Quality of life
- Reduction in injuries and pain
- Social/economic participation

Are these the most important outcomes for the people using this support? (please choose one)

  - Yes (you can provide additional comments if you want to, such as if some outcomes are more important to you) (text box)
  - No, I want to change the list (please tell us what you want to change and why, you could add something or remove something). (text box)

Question 4 - Comparator

We will need to compare how effective prosthetics with microprocessors are at achieving their goals compared to some other supports which might help with the same things, or very similar things.

Depending on the goal, we think the most relevant supports to compare prosthetics with microprocessors to are:

- mechanical prostheses
- mobility aids (wheelchairs, crutches)
- formal/informal supports

We chose these supports to compare to prosthetics with microprocessors because they aim to help achieve similar outcomes.

If you have used or suggested something other than prosthetics with microprocessors to achieve similar outcomes, that is not included in this list, please add it below.

Are these the best supports to compare prosthetics with microprocessors too? (please choose one)

- Yes
- No, I want to change something (please say what you want to change and why) (text box)

Use questions – the first question will be a branching question

Branching question

Do you use a prosthetic with a microprocessor, provide them to someone else, or assist someone else who uses a prosthetic with a microprocessor? (choose the most relevant)

- I use the support
- I have used the support, but I don't use it any more
- I don't use the support but I use something else to achieve the same goals
- I have a family member who uses or has used the support
- I care for someone who uses or has used the support
- I provide or have provided the support to other people or assist them to use it
- I am a clinician or researcher who works with or studies the support
- None of the above

Personal Role branch – these questions are shown if people answer "I use the support myself" (6 questions)

Question 1 – length of use

How long have you been using the support? (please choose one)

- Less than 3 months
- 3-12 months
- More than 12 months

Question 2 – continued use

Do you think you will continue using the support? (please choose one)

- Yes
- No
- Don't know

Please provide details of why. You could include things like:

- how well it works for you
- other supports you have tried
- cost and availability
- how long the support is expected to last.
  (text box)

Question 3 -safety

Have you had any problems or safety issues because of using the support. These could be short-term problems or long-term problems.

- No
- Yes (please provide details). (free text)

If this question has raised concerns please see the list of help lines and services on the last page. If you have pain or ongoing problems that need medical attention, please seek medical advice.

Question 4 – how often

How often do you use a prosthetic with a microprocessor and for how long each time on average? (please provide details)

I use a prosthetic with a microprocessor

- daily
- weekly
- other (please give details) (free text)

And/or I use it for

- less than 10 min per day
- around 30 min
- between 1-2 hours
- the whole morning
- the whole afternoon
- the whole day
- other amount (free text)

Question 5 – who provides

Who provides the prosthetic with a microprocessor for you to use?

- Bought a prosthetic with a microprocessor myself
- Rented a prosthetic with a microprocessor
- Someone else provided the prosthetic with a microprocessor (please specify)

Does anyone assist you to use a prosthetic with a microprocessor? (choose all that apply)

- I use a prosthetic with a microprocessor myself
- An allied health professional such as a physiotherapist (please specify)
- A paid carer or support worker
- An informal carer such as family or friends

- I don't know
- Other (please specify) (free text)

Question 6 - General context question

Are there any situations where a prosthetic with a microprocessor works well or does not work well for people?

Please tell us about anything that makes it easier or harder to use a prosthetic with a microprocessor.

This could include things like:

- access to prosthetics with microprocessors
- access to supports that aim to achieve similar goals
- access to allied health or other professionals
- cost factors
- where they are used (such as a clinic, gym or at home)
- how they fit into a therapy or exercise plan, supervised or unsupervised
- age, gender, ethnicity or cultural factors
- who someone lives with or where they live, such as in a city or a remote area

You can tell us anything you think is relevant for the Evidence Advisory Committee to understand the support. (free text)

Personal Role – these questions are shown if people answer "I have used the support" (7 questions)

Question 1 – length of use

How long did you use the support? (please choose one)

- Less than 3 months
- 3-12 months
- More than 12 months

Question 2 – why stopped

Why did you stop using the support? (please provide details) (free text)

Question 3 - safety

Did you have any problems or safety issues because of using the support? These could be short-term problems or long-term problems.

- No
- Yes (please provide details). (free text)

If this question has raised concerns please see the list of help lines and services on the last page. If you have pain or ongoing problems that need medical attention, please seek medical advice.

Question 4 – how often

How often did you use a prosthetic with a microprocessor and for how long each time, on average? (please provide details) (free text)

I used a prosthetic with a microprocessor

- daily
- weekly
- other (please give details) (free text)

And/or I used it for

- less than 10 min per day
- around 30 min
- between 1-2 hours
- the whole morning
- the whole afternoon
- the whole day
- other amount (free text)

Question 5 – who provides

Who provided the prosthetic with a microprocessor for you to use?

- Bought a prosthetic with a microprocessor myself
- Rented a prosthetic with a microprocessor
- Someone else provided the prosthetic with a microprocessor (please specify)

Did anyone assist you to use a prosthetic with a microprocessor? (choose all that apply)

- I used a prosthetic with a microprocessor myself
- An allied health professional such as a physiotherapist (please specify)
- A paid carer or support worker
- An informal carer such as family or friends
- I don't know
- Other (please specify) (free text)

Question 6 – what used now

What support do you use now instead of a prosthetic with a microprocessor? (please provide details) (free text)

Question 7 - General context question

Are there any situations where a prosthetic with a microprocessor works well or does not work well for people?

Please tell us about anything that makes it easier or harder to use a prosthetic with a microprocessor.

This could include things like

- access to prosthetics with microprocessors
- access to supports that aim to achieve similar goals
- access to allied health or other professionals
- cost factors
- where they are used (such as a clinic, gym or at home)
- how they fit into a therapy or exercise plan, supervised or unsupervised
- age, gender, ethnicity or cultural factors
- who someone lives with or where they live, such as in a city or a remote area

You can tell us anything you think is relevant for the Evidence Advisory Committee to understand the support. (free text)

Personal Role – these questions are shown if people answer "I don't use the support but I use something else to achieve the same goals" **(2 questions)**

Question 1 – what support instead

Prosthetics with microprocessors aim to help people with mobility, balance, hand movement and grasping. What alternative support do you use to perform these tasks, and why?

(please provide details) (free text)

Question 2 – general context question

Are there any situations where a prosthetic with a microprocessor works well or does not work well for people?

Please tell us about anything that makes it easier or harder to use a prosthetic with a microprocessor.

This could include things like:

- access to prosthetics with microprocessors
- access to supports that aim to achieve similar goals
- access to allied health or other professionals

- cost factors
- where they are used (such as a clinic, gym or at home)
- how they fit into a therapy or exercise plan, supervised or unsupervised
- age, gender, ethnicity or cultural factors
- who someone lives with or where they live, such as in a city or a remote area

You can tell us anything you think is relevant for the Evidence Advisory Committee to understand the support. (free text)

Carer/supporter Role – these questions are shown if people answer that they care for someone who uses or has used the support

Question 1 – length of use

Please select how long the person you care for has used (or did use) the support? (please choose one)

- Less than 3 months
- 3-12 months
- More than 12 months

Question 2 – continued use

Is your family member or the person you care for still using the support?

- Yes
- No
- Don't know

[Display if Yes

Do you think they will keep using the support?

- Yes
- No
- Don't know]

Please describe the reasons for your answer above.

You could include things like:

- how well it works for them
- other supports tried
- cost, availability
- how long the support is expected to last.

Question 3 - safety

Has your family member or the person you care for had any problems or safety issues because of using the support? These could be short-term problems or long-term problems.

- No
- Yes (please provide details). (free text)

If this question has raised concerns please see the list of help lines and services on the last page. If you have pain or ongoing problems that need medical attention, please seek medical advice.

Question 4– how often

How often does your family member or the person you care for use a prosthetic with a microprocessor and for how many hours at a time? (please provide details) (free text)

They use a prosthetic with a microprocessor

- daily
- weekly
- other (please give details) (free text)

And/or they use it for

- less than 10 min per day
- around 30 min
- between 1-2 hours
- the whole morning
- the whole afternoon
- the whole day
- other amount (free text)

Question 5 – who provides/assistant

Who provided the prosthetic with a microprocessor to your family member or the person you care for to use?

- Bought the prosthetic with a microprocessor themself
- Rented a prosthetic with a microprocessor
- Someone else provided the prosthetic with a microprocessor (please specify)

Did or does anyone assist your family member or the person you care for in using a prosthetic with a microprocessor? (choose any that apply)

- My family member or the person I care for uses or used a prosthetic with a microprocessor themselves

- An allied health professional such as a physiotherapist (please specify)
- A paid carer or support worker
- An informal carer such as family or friends
- I don't know
- Other (please specify) (free text)

Question 6 – general context question

Are there any situations where a prosthetic with a microprocessor works well or does not work well for people?

Please tell us about anything that makes it easier or harder to use a prosthetic with a microprocessor.

This could include things like:

- access to prosthetics with microprocessors
- access to supports that aim to achieve similar goals
- access to allied health or other professionals
- cost factors
- where they are used (such as a clinic, gym or at home)
- how they fit into a therapy or exercise plan, supervised or unsupervised
- age, gender, ethnicity or cultural factors
- who someone lives with or where they live, such as in a city or a remote area

You can tell us anything you think is relevant for the Evidence Advisory Committee to understand the support. (free text)

Provider/clinician/researcher Role – these questions are shown if people answer that they provide the support, or are a clinician or researcher in the area of the support

Question 1 – only for providers/clinicians/researchers –not recommend?

In what circumstances would you **not recommend** the support and why?

Question 2 – Alternative q only for providers/clinicians/researchers on recommending the support.

In what circumstances would you **recommend** the support and why? (free text)

Question 3 -safety

Are there any problems, safety issues or adverse events related to using the support that you have observed or know about? These could be short-term problems or long-term problems.

- No

- Yes (please provide details). (free text)

If this question has raised concerns please see the list of help lines and services on the last page.

Question 4 – alternative supports

What other supports would you recommend instead of prosthetics with microprocessors, or if prosthetics with microprocessors were unavailable or unsuitable? (please

[Text item before the next questions]

The following questions relate to how a support is used, in cases when it would be recommended for at least some participants. Please skip any questions that are not relevant.

Question 5

When are prosthetics with microprocessors more or less suitable than mechanical or any other type of prosthetics? (free text)

Question 6 – who provides/assists

Who should assist with using prosthetics with microprocessors if assistance is needed? In what way should they assist (choose all that apply)?

- An allied health professional such as a physiotherapist (please specify) (free text)
- A paid carer or support worker (free text)
- An informal carer such as family or friends (free text)
- Other (please specify) (free text)

Are there qualifications or regulations that should apply to people providing or assisting with the support? (free text)

Question 7 – general context question

Are there any situations where a prosthetic with a microprocessor works well or does not work well for people?

Please tell us about anything that makes it easier or harder to use a prosthetic with a microprocessor.

This could include things like:

- access to prosthetics with microprocessors
- access to supports that aim to achieve similar goals
- access to allied health or other professionals
- cost factors

- where they are used (such as a clinic, gym or at home)
- how they fit into a therapy or exercise plan, supervised or unsupervised
- age, gender, ethnicity or cultural factors
- who someone lives with or where they live, such as in a city or a remote area

You can tell us anything you think is relevant for the Evidence Advisory Committee to understand the support. (free text)

Question 8 – for providers/clinicians and researchers only, grey lit question

A systematic review will be conducted to inform the Evidence Advisory Committee's work. It will include peer reviewed research as well as key sources of grey literature. Are there other sources of evidence in your area, such as professional journals or conferences, that we should be checking for evidence on prosthetics with microprocessors?

Please provide details below if they are publicly available. If you have specific articles or papers that you think the Evidence Advisory Committee should be aware of, you may also send them via email to disabilityevidence@health.gov.au.

- professional journals (free text for titles etc.)
- conference publications (free text)
- technical documents (free text)
- policy or guidelines documents (free text)
- other relevant documents (free text)

Other Role – these questions are shown if people answer "none of the above"

Question 1- general context q

Are there any situations where a prosthetic with a microprocessor works well or does not work well for people?

Please tell us about anything that makes it easier or harder to use a prosthetic with a microprocessor.

This could include things like:

- access to prosthetics with microprocessors
- access to supports that aim to achieve similar goals
- access to allied health or other professionals
- cost factors
- where they are used (such as a clinic, gym or at home)
- how they fit into a therapy or exercise plan, supervised or unsupervised
- age, gender, ethnicity or cultural factors

- who someone lives with or where they live, such as in a city or a remote area

You can tell us anything you think is relevant for the Evidence Advisory Committee to understand the support. (free text)

Therapy suits

Scope questions - shown to everyone

Question 1 – Support

This assessment will consider therapy suits.

Therapy suits are specially designed garments that some people wear on their body to support their movement. Specifically, this includes supporting their posture, movement, or function.

Made primarily of elastic fabric, therapy suits may include components such as electrical stimulation accessories, elasticated cords, and frames.

For this assessment, we will not consider lymphedema garments, weighted blankets, burn compression garments, and stand-alone dynamic taping as therapy suits.

Does the description above accurately describe what therapy suits are and how they are used? (please choose one)

- Yes
- No, I want to change something (please say what you want to change and why) (text box)

Question 2 – Disability group/population for this item

Based on what we know so far, we think the people who might use therapy suits are:

People with:

- cerebral palsy
- stroke
- multiple sclerosis
- spinal cord injury
- conditions with spasticity
- autism
- hypermobile Ehlers-Danlos syndrome
- balance impairments

Do these groups cover all the people who may use therapy suits? (please choose one)

- Yes
- No, I want to change something (please say what you want to change and why) (text box)

Question 3 – Outcomes

Supports are used to achieve certain outcomes. These outcomes can be to improve people's life (provide benefit) or to reduce harm. We want to make sure the assessment examines outcomes that are important to people.

Based on what we know so far, we think therapy suits aim to help with the following outcomes:

- Gross motor function
- Spasticity
- Postural control and trunk alignment
- Proprioception
- Functional mobility
- Quality of life
- Goal attainment and self-reported function

Are these the most important outcomes for the people using this support? (please choose one)

  - Yes (you can provide additional comments if you want to, such as if some outcomes are more important to you) (text box)
  - No, I want to change the list (please tell us what you want to change and why, you could add something or remove something). (text box)

Question 4 - Comparator

We will need to compare how effective therapy suits are at achieving their goals compared to some other supports which might help with the same things, or very similar things.

Depending on the goal, we think the most relevant supports to compare therapy suits to are:

- conventional physiotherapy/occupational therapy
- orthotic devices (braces, Lycra-based splints)
- functional electrical stimulation
- pharmacological spasticity management (oral medications, botulinum toxin, intrathecal baclofen)

We chose these supports to compare to therapy suits because they aim to help achieve similar outcomes.

If you have used or suggested something other than therapy suits to achieve similar outcomes, that is not included in this list, please add it below.

Are these the best supports to compare therapy suits to? (please choose one)

- Yes
- No, I want to change something (please say what you want to change and why) (text box)

Use questions – the first question will be a branching question

Branching question

Do you use a therapy suit or provide it to someone else/assist someone else with it? (choose the most relevant)

- I use the support
- I have used the support, but I don't use it any more
- I don't use the support but I use something else to achieve the same goals
- I have a family member who uses or has used the support
- I care for someone who uses or has used the support
- I provide or have provided the support to someone else or assist them to use it
- I am a clinician or researcher who works with or studies the support
- None of the above

Personal Role branch – these questions are shown if people answer "I use the support myself" (6 questions)

Question 1 – length of use

How long have you been using the support? (please choose one)

- Less than 3 months
- 3-12 months
- More than 12 months

Question 2 – continued use

Do you think you will continue using the support? (please choose one)

- Yes
- No
- Don't know

Please provide details of why. You could include things like:

- how well it works for you
- other supports you have tried
- cost and availability
- how long the support is expected to last.
  (text box)

Question 3 -safety

Have you had any problems or safety issues because of using the support? These could be short-term problems or long-term problems.

- No
- Yes (please provide details). (free text)

If this question has raised concerns please see the list of help lines and services on the last page. If you have pain or ongoing problems that need medical attention, please seek medical advice.

Question 4 – how often

How often do you use the therapy suit and for how long each time on average? (please provide details)

I use a therapy suit

- daily
- weekly
- other (please give details) (free text)

And/or I use it for

- less than 10 min per day
- around 30 min
- between 1-2 hours
- the whole morning
- the whole afternoon
- the whole day
- other amount (free text)

Question 5 – who provides

Who provides the therapy suit for you to use?

- Bought the therapy suit
- Rented the therapy suit
- Use or used a therapy suit at a clinic
- Someone else provided the therapy suit (please specify)

Does anyone assist you to use a therapy suit? (choose all that apply)

- I use a therapy suit myself
- An allied health professional such as a physiotherapist (please specify)
- A paid carer or support worker
- An informal carer such as family or friends

- I don't know
- Other (please specify) (free text)

Question 6 - General context question

Are there any situations where a therapy suit works well or does not work well for people?

Please tell us about anything that makes it easier or harder to use a therapy suit.

This could include things like

- access to therapy suits
- access to supports that aim to achieve similar goals
- access to allied health or other professionals
- cost factors
- where they are used (such as a clinic, gym or at home)
- how they fit into a therapy or exercise plan, supervised or unsupervised
- age, gender, ethnicity or cultural factors
- who someone lives with or where they live, such as in a city or a remote area

You can tell us anything you think is relevant for the Evidence Advisory Committee to understand the support. (free text)

Personal Role – these questions are shown if people answer "I have used the support" (7 questions)

Question 1 – length of use

How long did you use the support for? (please choose one)

- Less than 3 months
- 3-12 months
- More than 12 months

Question 2 – why stopped

Why did you stop using the support? (please provide details) (free text)

Question 3 - safety

Did you have any problems or safety issues because of using the support? These could be short-term problems or long-term problems.

- No
- Yes (please provide details). (free text)

If this question has raised concerns please see the list of help lines and services on the last page. If you have pain or ongoing problems that need medical attention, please seek medical advice.

Question 4 – how often

How often did you use a therapy suit and for how long each time, on average? (please provide details) (free text)

I used a therapy suit

- daily
- weekly
- other (please give details) (free text)

And/or I used it for

- less than 10 min per day
- around 30 min
- between 1-2 hours
- the whole morning
- the whole afternoon
- the whole day
- other amount (free text)

Question 5 – who provides

Who provided therapy suit for you to use?

- Bought the therapy suit
- Rented the therapy suit
- Use or Used a therapy suit at a clinic
- Someone else provided the therapy suit (please specify)

Did anyone assist you to use a therapy suit? (choose all that apply)

- I used a therapy suit myself
- An allied health professional such as a physiotherapist (please specify)
- A paid carer or support worker
- An informal carer such as family or friends
- I don't know
- Other (please specify) (free text)

Question 6 – what used now

What support do you use now to achieve the same aims as a therapy suit? (please provide details) (free text)

Question 7 - General context question

Are there any situations where a therapy suit works well or does not work well for people?

Please tell us about anything that makes it easier or harder to use a therapy suit.

This could include things like:

- access to therapy suits
- access to supports that aim to achieve similar goals
- access to allied health or other professionals
- cost factors
- where they are used (such as a clinic, gym or at home)
- how they fit into a therapy or exercise plan, supervised or unsupervised
- age, gender, ethnicity or cultural factors
- who someone lives with or where they live, such as in a city or a remote area

You can tell us anything you think is relevant for the Evidence Advisory Committee to understand the support. (free text)

Personal Role – these questions are shown if people answer "I don't use the support but I use something else to achieve the same goals" **(2 questions)**

Question 1 – what support instead

Therapy suits aim to help people move better, be more aware of their own body and its position (proprioception and joint feedback), and keep their bodies in the right position (promote correct alignment). What do you use to achieve these goals, and why?

(please provide details) (free text)

Question 2 – general context question

Are there any situations where a therapy suit works well or does not work well for people?

Please tell us about anything that makes it easier or harder to use a therapy suit.

This could include things like:

- access to therapy suits
- access to supports that aim to achieve similar goals
- access to allied health or other professionals
- cost factors
- where they are used (such as a clinic, gym or at home)

- how they fit into a therapy or exercise plan, supervised or unsupervised
- age, gender, ethnicity or cultural factors
- who someone lives with or where they live, such as in a city or a remote area

You can tell us anything you think is relevant for the Evidence Advisory Committee to understand the support. (free text)

Carer/supporter Role – these questions are shown if people answer that they care for someone who uses or has used the support

Question 1 – length of use

Please select how long the person you care for has used (or did use) the support? (please choose one)

- Less than 3 months
- 3-12 months
- More than 12 months

Question 2 – continued use

Is your family member or the person you care for still using the support?

- Yes
- No
- I don't know

[Display if Yes

Do you think they will keep using the support?

- Yes
- No
- I don't know]

Please describe the reasons for your answer above.

You could include things like:

- how well it works for them
- other supports tried
- cost, availability
- how long the support is expected to last.

Question 3 - safety

Has your family member or the person you support had any problems or safety issues because of using the support? These could be short-term problems or long-term problems.

- No
- Yes (please provide details). (free text)

If this question has raised concerns please see the list of help lines and services on the last page. If you have pain or ongoing problems that need medical attention, please seek medical advice.

Question 4– how often

How often does your family member or the person you care for use a therapy suit and for how many hours at a time? (please provide details) (free text)

They use a therapy suit

- daily
- weekly
- other (please give details) (free text)

And/or they use it for

- less than 10 min per day
- around 30 min
- between 1-2 hours
- the whole morning
- the whole afternoon
- the whole day
- other amount (free text)

Question 5 – who provides/assistant

Who provided a therapy suit for your family member or the person you care for to use?

- Bought the therapy suit
- Rented the therapy suit themself
- Use or used a therapy suit at a clinic
- Someone else provides or provided the therapy suit (please specify)

Did or does anyone assist your family member or the person you care for use a therapy suit? (choose any that apply)

- My family member or the person I care for uses or used a therapy suit themselves

- An allied health professional such as a physiotherapist (please specify)
- A paid carer or support worker
- An informal carer such as family or friends
- I don't know
- Other (please specify) (free text)

Question 6 – general context question

Are there any situations where a therapy suit works well or does not work well for people?

Please tell us about anything that makes it easier or harder to use a therapy suit. This could include things like:

- access to therapy suits
- access to supports that aim to achieve similar goals
- access to allied health or other professionals
- cost factors
- where they are used (such as a clinic, gym or at home)
- how they fit into a therapy or exercise plan, supervised or unsupervised
- age, gender, ethnicity or cultural factors
- who someone lives with or where they live, such as in a city or a remote area

You can tell us anything you think is relevant for the Evidence Advisory Committee to understand the support. (free text)

Provider/clinician/researcher Role – these questions are shown if people answer that they provide the support, or are a clinician or researcher in the area of the support

Question 1 – only for providers/clinicians/researchers –not recommend?

In what circumstances would you **not recommend** the support and why?

Question 2 – Alternative q only for providers/clinicians/researchers on recommending the support.

In what circumstances would you **recommend** the support and why? (free text)

Question 3 -safety

Are there any problems, safety issues or adverse events related to the support that you have observed or know about? These could be short-term problems or long-term problems.

- No
- Yes (please provide details). (free text)

If this question has raised concerns please see the list of help lines and services on the last page.

Question 4 – alternative supports

What other supports would you recommend instead of therapy suits, or if therapy suits were unavailable or unsuitable? (please provide details) (free text)

[Text item before the next questions]

The following questions relate to how a support is used, in cases when it would be recommended for at least some participants. Please skip any questions that are not relevant.

Question 5 – length of use

How long should the support be used for? (please choose all that apply)

- Less than 3 months
- 3-12 months
- More than 12 months
- Until a specific outcome is achieved (please specify) (text box)

Question 6– how often

How often should therapy suits be used and for how many hours at a time for optimum results? (please provide details) (free text)

People should use a therapy suit

- daily
- weekly
- other (please give details) (free text)

And/or they should use it for

- less than 10 min per day
- around 30 min
- between 1-2 hours
- the whole morning
- the whole afternoon
- the whole day
- other amount (free text)

Question 7 – who should provide/assist

Who should provide a therapy suit?

- The person should rent or buy the therapy suit themself
- A clinic should provide therapy suits
- A specialist provider should provide therapy suits (please specify)

- Other (please specify) (free text)

Who should assist using a therapy suit if assistance is needed? (choose all that apply)

- An allied health professional such as a physiotherapist (please specify)
- A paid carer or support worker
- An informal carer such as family or friends
- Other (please specify)

Are there qualifications or regulations that should apply to people providing or assisting with the support? (free text)

Question 8 – general context question

Are there any situations where a therapy suit works well or does not work well for people?

Please tell us about anything that makes it easier or harder to use a therapy suit.

This could include things like:

- access to therapy suits
- access to supports that aim to achieve similar goals
- access to allied health or other professionals
- cost factors
- where they are used (such as a clinic, gym or at home)
- how they fit into a therapy or exercise plan, supervised or unsupervised
- age, gender, ethnicity or cultural factors
- who someone lives with or where they live, such as in a city or a remote area

You can tell us anything you think is relevant for the Evidence Advisory Committee to understand the support. (free text)

Question 9 – for providers/clinicians and researchers only, grey lit question

A systematic review will be conducted to inform the Evidence Advisory Committee's work. It will include peer reviewed research as well as key sources of grey literature. Are there other sources of evidence in your area, such as professional journals or conferences, that we should be checking for evidence on therapy suits?

Please provide details below if they are publicly available. If you have specific articles or papers that you think the Evidence Advisory Committee should be aware of, you may also send them via email to disabilityevidence@health.gov.au.

- professional journals (free text for titles etc.)
- conference publications (free text)

- technical documents (free text)
- policy or guidelines documents (free text)
- other relevant documents (free text)

Other Role – these questions are shown if people answer “none of the above”

Question 1 – general context question

Are there any situations where a therapy suit works well or does not work well for people?

Please tell us about anything that makes it easier or harder to use a therapy suit.

This could include things like:

- access to therapy suits
- access to supports that aim to achieve similar goals
- access to allied health or other professionals
- cost factors
- where they are used (such as a clinic, gym or at home)
- how they fit into a therapy or exercise plan, supervised or unsupervised
- age, gender, ethnicity or cultural factors
- who someone lives with or where they live, such as in a city or a remote area

You can tell us anything you think is relevant for the Evidence Advisory Committee to understand the support. (free text)

End page – this comes at the end of all versions of the survey

Thank you for your input! We value your ongoing contributions.

If these questions have raised any concerns or uncomfortable feelings for you or someone you are helping, you can seek support from free services such as:

- Lifeline online or by calling 13 11 14
- Beyond Blue online or by calling 1300 22 4636
- Kids helpline online or by calling 1800 55 1800

To report abuse or neglect contact the free National Disability Abuse and Neglect Hotline:

- Call 1800 880 052 and speak with an experienced Hotline staff member
- Email hotline@workfocus.com

If you have a concern about the quality or safety of NDIS supports or services, you can contact the NDIS Quality and Safeguards Commission on their website or 1800 035 544.

Callers who are deaf or have a hearing or speech impairment can contact the National Relay Service (NRS) by calling 133 677 then asking for the phone number you need help with.

Callers from a non-English speaking background can use the Translating and Interpreting Service (TIS) by calling 13 14 50

If you have ongoing medical concerns, please speak to your GP or attend a walk-in clinic. If it is an emergency, please call 000.

If you have any concerns about this consultation, please contact the Disability Evidence Branch:

Email: disabilityevidence@health.gov.au

Your responses to the survey may be combined with others and given to the NDIS Evidence Advisory Committee (EAC) as a consultation summary. The EAC will use the consultation summary to help give advice to Government about the safety, suitability, and cost-effectiveness of various disability supports.