CSP survey of adult orthopaedic physiotherapy services
(to be completed online via SurveyMonkey.com)

The CSP membership database identifies you as the service lead within your Trust. If you are not the appropriate manager/lead to provide this information, please email baughs@csp.org.uk as soon as possible to let us know who we should contact.

It is important that we receive only ONE response from each NHS Trust. Please liaise with your colleagues if necessary to collate one definitive response, using this hard copy version as a template, before you complete the online questionnaire. If you have any questions, please contact baughs@csp.org.uk

The questionnaire has three sections:

- general aspects of orthopaedic physiotherapy services
- total knee replacement (TKR) pathway
- hip fracture pathway.

There are different questions to answer in each section depending on whether you provide inpatient, outpatient and/or community services.

The questionnaire is designed to guide you quickly to the questions relating to the services you provide, based on your responses to each question, so please do not skip any questions.

It should not take longer than 15 minutes per section to complete the sections relevant to you.

All data collected will be anonymised and stored in accordance with CSP data protection policy and guidelines. Findings will be reported in BOA and CSP publications about orthopaedic rehabilitation services. Data from individual services will not be identifiable in any publication.

Participation is entirely voluntary and submission of the questionnaire is taken as your informed consent to participate.

We hope that you will support this important project. The findings will only be of value if we get a good representative response across physiotherapy services, so please support your own service and the profession by completing this questionnaire as a priority.
Your information

Name of employing organisation:
Name of person completing the survey:
Job title:

If you consent to being contacted for further information about your orthopaedic services, please provide your contact details (email address / phone number):

Section 1: General
1.1 Services provided

Please select ALL the services that your Trust provides.
- Acute adult inpatient orthopaedic physiotherapy service
- Acute adult outpatient orthopaedic physiotherapy service
- Community adult orthopaedic physiotherapy service

1.2 Acute orthopaedic inpatient physiotherapy service (if provided):

The questions in this section are about your Trust's adult orthopaedic inpatient physiotherapy service AS A WHOLE.

Caseload:
Please enter the AVERAGE number of elective and trauma cases covered by your Trust's service EACH WEEK.
If possible, enter the individual numbers for both elective and trauma orthopaedics.
If this is not possible, please leave those fields blank and only enter the total number for ALL orthopaedic cases.

Number of elective cases
Number of trauma cases
Total number of orthopaedic cases

Staffing and skill mix:
Please enter your staff numbers by grade, as WTEs.
If possible, enter the individual numbers for elective and trauma orthopaedics. If not, leave those boxes blank and enter the total number for all orthopaedic services.

<table>
<thead>
<tr>
<th>Band</th>
<th>2</th>
<th>3</th>
<th>4</th>
<th>5</th>
<th>6</th>
<th>7</th>
<th>8a</th>
<th>8b and above</th>
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<tbody>
<tr>
<td>Elective services</td>
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<td>Trauma services</td>
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<tr>
<td>Total for all orthopaedic services</td>
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Do you currently have any vacant posts? (for example, due to recruitment problems, frozen posts, maternity leave...)  **YES/NO**

If YES, How many vacant posts do you have? (In WTE)

Please give details of your current vacancies if possible (by band/WTE):

Do you feel that your currently funded staffing levels and skills mix are adequate for your orthopaedic caseload and service?  **YES/NO**
If you have any comments on your staffing levels or skill mix, please add them here:

1.3 Acute adult outpatient service (if provided):
Approximately what percentage of your Trust's total outpatient caseload is:

Orthopaedic cases:
Total knee replacement cases:
Hip fracture cases:
Do you have funding specifically ring-fenced for your outpatient orthopaedic services? YES/NO

1.4 Community adult service (if provided):
Approximately what percentage of your Trust's total community caseload is:

Orthopaedic cases:
Total knee replacement cases:
Hip fracture cases:
Do you have funding specifically ring-fenced for your community orthopaedic services? YES/NO

1.5 Service delivery (all services)
7-day working:
What level of physiotherapy orthopaedic services do you provide over a 7-day week? (select all that apply)

<table>
<thead>
<tr>
<th></th>
<th>Full 7-day service</th>
<th>Reduced weekend &amp; holiday staffing</th>
<th>1-day weekend</th>
<th>Extended hours weekdays</th>
<th>Normal 5-day service only</th>
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<tbody>
<tr>
<td>Acute inpatient</td>
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<tr>
<td>orthopaedic services</td>
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<tr>
<td>Acute outpatient</td>
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<td>orthopaedic services</td>
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<td>Community orthopaedic</td>
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<tr>
<td>services</td>
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</table>

Do you have any innovative models of service delivery for your orthopaedic services? YES/NO
If YES, Please give a brief description (2–3 sentences) of the innovative service.
If published information on the service is available, please provide web links or references.

1.6 Service evaluation (all services):
Do you evaluate your orthopaedic physiotherapy service(s)? (Inpatient, outpatient and/or community as appropriate) YES/NO
If **YES**, how do you evaluate your service?

<table>
<thead>
<tr>
<th>Service</th>
<th>Snapshot audits</th>
<th>Data collected continuously</th>
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</thead>
<tbody>
<tr>
<td>Acute adult inpatient orthopaedic physiotherapy service</td>
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<tr>
<td>Acute adult outpatient orthopaedic physiotherapy service</td>
<td></td>
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<tr>
<td>Community adult orthopaedic physiotherapy service</td>
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</tr>
</tbody>
</table>

In order to evaluate your service, what data do you collect? (e.g. patient satisfaction, waiting times ...)

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**Section 2: Elective surgery - total knee replacement**

Does your Trust provide physiotherapy services within part or all of the total knee replacement (TKR) pathway? **YES/NO**

If **NO**, go straight to Section 3  
If **YES**, please continue with section 2.1.

**2.1 Pre-operative assessment for TKR patients**

Does your physiotherapy service provide pre-operative assessment:

- For all TKR patients / For some TKR patients / No

If for **some** TKR patients only, go to Section 2.1.1.  
If for all TKR patients, go to section 2.1.2  
If for none, go to section 2.1.3.

**2.1.1 If for some patients only:**

Approximately what percentage of TKR patients receive pre-op assessment?

- 0-25%  
- 26-50%  
- 51-75%  
- 76-100%

Do you have any comments, e.g. on qualifying criteria for pre-op assessment?

**Now continue with section 2.1.2.**

**2.1.2**

Is pre-op physiotherapy assessment for TKR patients provided by:

- Inpatient physiotherapy service  
- Outpatient physiotherapy service  
- Community physiotherapy service

In the pre-operative assessment of TKR patients, do physiotherapists:

<table>
<thead>
<tr>
<th>For all patients</th>
<th>For some patients</th>
<th>No</th>
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<tr>
<td>set expectations, mobility and discharge goals?</td>
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<tr>
<td>provide education, including post operative exercise, and rehabilitation plans?</td>
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<td></td>
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<tr>
<td>provide written educational information?</td>
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</tbody>
</table>
include assessment of discharge rehabilitation needs?  
**For all patients**  **For some patients**  **No**

<table>
<thead>
<tr>
<th>assess for rehabilitation equipment needs at home?</th>
<th></th>
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<tbody>
<tr>
<td>organise delivery and installation of rehabilitation equipment?</td>
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</tbody>
</table>

Is physiotherapy assessment and planning offered: *(select all that apply)*

To patients individually / As group classes / As part of multidisciplinary team service

Do you have any comments about pre-operative assessment and planning?

**Now go to 2.2.**

2.1.3

If pre-operative assessment is *not* provided by physiotherapy staff, is it provided by another member of the multidisciplinary team?  **YES/NO**

**2.2 Inpatient physiotherapy services for TKR patients**

Does your Trust provide inpatient physiotherapy for TKR patients?  **YES/NO**

**If NO. go to section 2.3**  **If YES, please continue.**

How soon after surgery are routine (non-complex) TKR patients normally mobilised?

- Day of surgery
- 1st day post op
- 2nd day post op
- More than 2 days post op

Who normally mobilises TKR patients for the first time post-operatively?

- Physiotherapist
- Physiotherapy support worker
- Other

Do you have multidisciplinary team protocols for early mobilisation?  **YES/NO**

Do you provide a weekend and public holiday physiotherapy service for TKR patients?

**For all TKR patients / For some TKR patients / No**

**If NO, go to 2.2.1**  **If for all or some patients, please continue.**

On average, how many times would a TKR patient be seen on:

- Saturday
- Sunday
- Public holiday

(answer all that apply)

2.2.1

Do TKR patients normally receive rehabilitation every day until discharge?  **YES/NO**

**If NO, go to 2.2.2**  **If YES please continue**
On average how many times a day do TKR patients receive rehabilitation?
Once / Twice.

2.2.2
Do you have any further comments on your TKR inpatient rehab service?

2.2.3 TKR service general questions
Do physiotherapists attend regular MDT meetings to discuss TKR patients? YES/NO
What percentage of your inpatient TKR patients require a home visit prior to discharge?
0-10% 11-20% 21-30% 31-40% 41-50% Over 50%
Who normally carries out a home visit? (select all that apply)
Physiotherapist / occupational therapist / other
What percentage of your TKR patients experience a delay in their discharge for non-medical reasons? (if you do not have exact figures, please estimate)
0-25% 26-50% 51-75% 76-100%
Where do delays most commonly occur?
(Choose 1 for the most common cause, 2 for the second most common cause)
Your physiotherapy services
Your hospital services, other than physiotherapy
Community or other hospital physiotherapy services
Community or other hospital services, other than physiotherapy
Do you have any comments about delays?

Do all your TKR patients have a discharge plan? YES/NO
On discharge, do physiotherapists provide TKR patients with follow-up advice and information? YES/NO
Are your TKR patients routinely offered post-discharge rehabilitation?
All TKR patients / Some TKR patients / No
If NO or ALL, go to 2.2.4 If SOME, please continue.
What percentage of your TKR patients are offered post discharge rehabilitation? (if you do not have exact figures, please estimate)
0-25% 26-50% 51-75% 76-100%
Do you have any comments, e.g. on qualifying criteria for post discharge rehabilitation?

2.2.4 Communications around transfer between inpatient services and post discharge rehabilitation
Do you have clear communication channels between the clinical care teams within your hospital and all the care teams in other hospitals or in the community? YES/NO
Does your inpatient physiotherapy service routinely communicate with the community or other hospital physiotherapy services PRIOR TO discharge of your TKR patients?
Yes, for all patients / Yes, for some patients / No
Does your inpatient physiotherapy service routinely communicate with the community or other hospital physiotherapy services AFTER discharge of your TKR patients?

Yes, for all patients / Yes, for some patients / No

Do you have any comments on communications around transfer?

Do you send a copy of your pre-operative assessment and plan, or discharge plan, to the community or other hospital physiotherapy services? YES/NO

If NO, go to 2.2.5

If YES, please continue.

When are these plans sent?

<table>
<thead>
<tr>
<th></th>
<th>At time of assessment</th>
<th>Prior to discharge</th>
<th>At time of discharge</th>
<th>Post discharge</th>
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</thead>
<tbody>
<tr>
<td>Pre-op assessment and plan</td>
<td></td>
<td></td>
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<tr>
<td>Discharge plan</td>
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</tbody>
</table>

Now go to 2.3.

2.2.5

Would you like to comment on why these plans are not shared?

Now go to 2.3.

2.3 Outpatient/community physiotherapy services for TKR patients

Does your Trust offer outpatient or community physiotherapy services for TKR patients? YES/NO

If NO, go to Section 3. If YES, please continue.

2.3.1 Communications around transfer between inpatient services and outpatient/community services

Do you have clear communication channels between your outpatient/community clinical care teams and the inpatient care teams? YES/NO

Does the referring physiotherapy service routinely communicate with your physiotherapy service PRIOR TO discharge of TKR patients?

Yes, for all patients / Yes, for some patients / No

Does your physiotherapy service routinely communicate with the referring physiotherapy service AFTER discharge of your TKR patients?

Yes, for all patients / Yes, for some patients / No

Do you have any comments on communications around transfer/discharge?

Do you receive a copy of the pre-operative assessment and plan, or discharge plan, from the referring physiotherapy service? YES/NO

If NO, go to 2.3.2 If YES, please continue.
When are these plans received?

<table>
<thead>
<tr>
<th></th>
<th>At time of assessment</th>
<th>Prior to discharge</th>
<th>At time of discharge</th>
<th>Post discharge</th>
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</thead>
<tbody>
<tr>
<td>Pre-op assessment and plan</td>
<td></td>
<td></td>
<td></td>
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</tr>
<tr>
<td>Discharge plan</td>
<td></td>
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</tbody>
</table>

**Now go to 2.3.3**

2.3.2 Would you like to comment on why these plans are not shared with you?

**Now go to 2.3.3**

2.3.3 TKR rehabilitation

What is the average waiting time for TKR patients to receive rehabilitation?

- 0–1 week
- 1-2 weeks
- 2-4 weeks
- 4-6 weeks
- >6 weeks

On average, how many times are patients seen during their rehabilitation?

<table>
<thead>
<tr>
<th></th>
<th>Once</th>
<th>2-4 times</th>
<th>5-7 times</th>
<th>8 or more</th>
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<tr>
<td>Individually</td>
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<tr>
<td>Group setting</td>
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<tr>
<td>Hydrotherapy</td>
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<tr>
<td>Multidisciplinary team</td>
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</table>

2.3.4 TKR service evaluation

Does your physiotherapy service routinely use outcome measures for your TKR patients? **YES/NO**

If NO, go to Section 3. If YES, please continue.

Which outcome measures do you use for your TKR patients?

When do you collect data? (please select all that apply)

- At initial assessment
- At discharge from your inpatient service
- At discharge from your orthopaedic services
- Other (please specify)

Section 3: Trauma – Fractured neck of femur care pathway

Does your Trust provide physiotherapy services within part or all of the hip fracture care programme/pathway? **YES/NO**

If NO: go to Section 4. If YES, please continue.
3.1 Formal hip fracture programme/pathway

Do your Trust’s hip fracture patients follow a formal hip fracture programme/pathway? YES/NO

If NO, go to 3.1.1 If YES, go to 3.1.2

3.1.1

Would you like to comment on why you do not have a formal hip fracture programme/pathway?

Now go to 3.2.

3.1.2

Does your Trust have a multidisciplinary hip fracture programme/pathway team? YES/NO

If NO, go to 3.1.4 If YES, go to 3.1.3

3.1.3

Who is the overarching clinical lead of the hip fracture programme/pathway team?
- An orthogeriatrician
- Other (please specify)

Do you have a physiotherapist from your service in the hip fracture programme/pathway team? YES/NO

Does a physiotherapist from your service attend:

<table>
<thead>
<tr>
<th>Event</th>
<th>Yes</th>
<th>No</th>
<th>N/A*</th>
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</thead>
<tbody>
<tr>
<td>Hip fracture programme/pathway GOVERNANCE meetings</td>
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<tr>
<td>Regular multidisciplinary team meetings which address the hip fracture programme/pathway AS A WHOLE</td>
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<tr>
<td>Regularly scheduled CLINICAL multidisciplinary team meetings</td>
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<tr>
<td>Daily nursing handovers</td>
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*N/A – e.g. Trust does not hold such meetings

Do your hip fracture patients have a multidisciplinary hip fracture programme/pathway care plan or documentation? YES/NO

3.1.4 Dementia team

Does your Trust have a specialist dementia trained team? YES/NO

If NO, go to 3.1.5 If YES, please continue.

Is there a physiotherapist from your service in the specialist dementia trained team? YES/NO

3.1.5

Do you have any other comments about your hip fracture programme/pathway?
3.2 Hip fracture inpatient physiotherapy service

Do you provide a hip fracture inpatient physiotherapy service?  YES/NO

If NO, go to 3.3  
If YES, please continue.

Are your hip fracture patients offered a physiotherapy assessment on the day after surgery?  YES/NO

Are the physiotherapy assessment and mobilisation plan of your hip fracture patients documented in the patient's care plan?  YES/NO

Do you provide a weekend and public holiday physiotherapy service for hip fracture patients?

For all hip fracture patients / For some patients / No

If NO, go to 3.2.1  
If for all or some patients, go to 3.2.2

3.2.1

Would you like to comment on why you do not have a weekend/public holiday service?

Now go to 3.2.3

3.2.2

On average, how many times would a hip fracture patient be seen on:

- Saturday
- Sunday
- Public holiday

(answer all that apply)

3.2.3 Mobilisation

Are your hip fracture patients offered mobilisation with a physiotherapist and/or physiotherapy support worker on the day after surgery, unless contraindicated?  YES/NO

Are hip fracture patients routinely offered mobilisation at least once a day until discharge?  YES/NO

Does a physiotherapist regularly review the rehabilitation plan of hip fracture patients?  YES/NO

Does the nursing team in your hip fracture programme assist in mobilising patients?  YES/NO

Does a physiotherapist allocate time to regularly provide mobilisation training for other staff?  YES/NO

Does a physiotherapist routinely provide written information to patients and carers?  YES/NO

What percentage of your inpatient hip fracture patients require a home visit prior to discharge?

0-10%  11-20%  21-30%  31-40%  41-50%  50-60%  60-70%  70-80%  80-90%  90-100%

Who normally carries out a home visit? (select all that apply)

Physiotherapist / occupational therapist / other
Do your hip fracture patients have a multifactorial falls assessment?  YES/NO

If NO, go to 3.2.4  
If YES, please continue

How are physiotherapists involved in falls assessment for hip fracture patients?  
- Lead on assessment  
- Involved in assessment  
- No involvement in assessment

If falls assessment is not led by a physiotherapist, who leads the assessment?

3.2.4

Do you have any other comments about your inpatient physiotherapy service for hip fracture patients?

3.2.5 ESD

Do you offer your hip fracture patients multidisciplinary rehabilitation as part of early supported discharge (ESD), if appropriate?  YES/NO

If NO, go to 3.2.7  
If YES, go to 3.2.6

3.2.6

Does the hip fracture programme/pathway team lead ESD?  YES/NO

If NO, who leads?

Is there a physiotherapist from your service in the ESD team?  YES/NO

Do you have discharge protocols for multidisciplinary rehabilitation as part of ESD?  YES/NO

Is multidisciplinary rehabilitation as part of ESD offered to patients admitted from care or nursing homes, if appropriate?  YES/NO

Now go to 3.2.7

3.2.7 Non-ESD

Do you provide 'normal' (non-ESD) discharge pathways for your hip fracture patients?  YES/NO

If NO, go to 3.2.9  
If YES, go to 3.2.8

3.2.8

Do you have discharge protocols for multidisciplinary rehabilitation as part of discharge planning?  YES/NO

Now go to 3.2.9

3.2.9 Discharge – all hip fracture inpatients

Are all your hip fracture patients routinely offered post discharge rehabilitation?  YES/NO

If NO, go to 3.2.12  
If YES, go to 3.2.10
3.2.10

Do all your hip fracture patients have a rehabilitation discharge plan?  YES/NO

What percentage of your hip fracture patients experience a delay in their discharge for non-medical reasons? (If you do not have exact figures, please estimate)

- 0-25%
- 26-50%
- 51-75%
- 76-100%

Where do delays most commonly occur?
(Choose 1 for the most common cause, 2 for the second most common cause)

- Your physiotherapy services
- Your hospital services, other than physiotherapy
- Community or other hospital physiotherapy services
- Community or other hospital services, other than physiotherapy

Do you have any comments about discharge planning for hip fracture patients?

3.3 Communications around transfer between hip fracture inpatient services and post discharge rehabilitation

Do you have clear communication channels between the clinical care teams within your hospital and all the care teams in other hospitals or in the community?  YES/NO

Does your inpatient physiotherapy service routinely communicate with the community or other hospital physiotherapy services PRIOR TO discharge of your hip fracture patients?

Yes, for all patients / Yes, for some patients / No

Does your inpatient physiotherapy service routinely communicate with the community or other hospital physiotherapy services AFTER discharge of your hip fracture patients?

Yes, for all patients / Yes, for some patients / No

Do you have any comments on communications around transfer?

Do you send a rehabilitation discharge plan to the community or other hospital physiotherapy services?  YES/NO

If NO, go to 3.3.2  If YES, go to 3.3.1

3.3.1

When are these plans sent?

- Prior to discharge
- At time of discharge
- After discharge

Now go to 3.4

3.3.2

Would you like to comment on why these plans are not shared?

Now go to 3.4
3.4 Hip fracture outpatient/community physiotherapy services

Does your Trust offer outpatient or community services for hip fracture patients? **YES/NO**

If NO, go to Section 4  
If YES, go to 3.4.1

3.4.1 Communications around transfer between inpatient services and outpatient/community services

Do you have clear communication channels between your outpatient/community clinical care teams and the inpatient care teams? **YES/NO**

Does the referring physiotherapy service routinely communicate with the outpatient/community physiotherapy service PRIOR TO discharge of hip fracture patients?

Yes, for all patients / Yes, for some patients / No

Does the referring physiotherapy service routinely communicate with the outpatient/community physiotherapy service AFTER discharge of hip fracture patients?

Yes, for all patients / Yes, for some patients / No

Do you have any comments on communications around transfer/discharge?

Do you receive a copy of the rehabilitation discharge plan from the referring physiotherapy service? **YES/NO**

If NO, go to 3.4.2  
If YES, please continue.

When are these plans received?

Prior to discharge
At time of discharge
After discharge

Now go to 3.4.3

3.4.2

Would you like to comment on why these plans are not shared with you?

Now go to 3.4.3

3.4.3 ESD - outpatient/community rehabilitation

Do you offer outpatient/community rehabilitation as part of early supported discharge (ESD)? **YES/NO**

If NO, go to 3.4.4  
If YES, please continue.

On average, when are your ESD hip fracture patients offered physiotherapy assessment following discharge from hospital?

On day of discharge
First day after discharge
2\textsuperscript{nd} day after discharge
3-5 days after discharge
>5 days after discharge
On average, how many times are your ESD hip fracture patients seen by your physiotherapy service in the first 2 weeks following discharge? (please select all that apply)

<table>
<thead>
<tr>
<th>In patient's home</th>
<th>Daily</th>
<th>Every weekday</th>
<th>4 times a week</th>
<th>3 times a week</th>
<th>Twice a week</th>
<th>Once a week</th>
<th>Less than once a week</th>
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Intermediate care

Nursing or care home

Outpatient clinic

Do you have any other comments on rehabilitation for ESD hip fracture patients?

3.4.4 Non ESD - outpatient/community rehabilitation

Do you provide outpatient/community rehabilitation for hip fracture patients NOT following the ESD pathway? **YES/NO**

*If NO, go to 3.4.5*  
*If YES, please continue.*

For hip fracture patients not following the ESD pathway, on average, when are your patients offered physiotherapy assessment following discharge from hospital?

- On day of discharge
- First day after discharge
- 2<sup>nd</sup> day after discharge
- Within a week of discharge
- 1-2 weeks after discharge
- 2-4 weeks after discharge
- >4 weeks after discharge

On average, how many times are your ESD hip fracture patients seen by your physiotherapy service in the first 2 weeks following discharge? (please select all that apply)

<table>
<thead>
<tr>
<th>In patient's home</th>
<th>Daily</th>
<th>Every weekday</th>
<th>4 times a week</th>
<th>3 times a week</th>
<th>Twice a week</th>
<th>Once a week</th>
<th>Less than once a week</th>
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Intermediate care

Nursing or care home

Outpatient clinic

Do you have any other comments on rehabilitation for non-ESD hip fracture patients?

**Now go to 3.4.5**
3.4.5 Hip fracture service evaluation

Does your outpatient/community physiotherapy service routinely use outcome measures for your hip fracture patients?  **YES/NO**

If NO, go to Section 4.  If YES, please continue.

Which outcome measures do you use for your hip fracture patients?

When do you collect data? (please select all that apply)
- At initial assessment
- At discharge from your inpatient service
- At discharge from the hip fracture programme/pathway
- Other (please specify)

Section 4: End of questionnaire

You have now completed the questionnaire – thank you.

Please use the URL link provided in the email from the CSP to go to the online SurveyMonkey survey and enter the information about your Trust’s orthopaedic services for analysis.

We will keep you informed of progress on the project and publication of the final report.