

SPLASH Study Questionnaire

Response ID	Start date	Completion date
682252-682243-74759229	18 Mar 2021, 20:09 (GMT)	18 Mar 2021, 20:19 (GMT)

Answers to Questions 1-10 (Participant Agreement Form, Screening and Contact Details sections) removed as these contained non-anonymised participant information.

11	What is your relationship with the person/people with Severe LD/PMLD you care for? (e.g. son, daughter, sister, brother, 1:1 support worker, or physiotherapist in community adult LD team)	Halliwick Association of Swimming Therapy Instructor
12	How often/many hours per week do you care for them? (e.g. 37.5 hours per week, evenings and weekends, monthly visit)	3
13	Age: (if you would prefer not to say, please type this in the box below)	40s
14	Gender: (if you would prefer not to say, please type this in the box below)	Male
15	Diagnoses:	Head injury following motor accident
16	Level of Learning Disability:	Severe
17	Thinking about their muscles, how might you describe their tone? (e.g. high (hypertonic), low (hypotonic), spasticity, rigidity, variable, unknown/unsure)	Unsure

18	Which limbs are affected by altered tone and how? (e.g. increased tone in both arms / both legs / left side / right side, unknown/unsure)	Right side
19	Do they have any issues affecting the position/posture of their trunk? (e.g. bent forwards (kyphosis), bent to their left / right (scoliosis), unknown/unsure)	No
20	Do they have any contractures (unable to fully bend or straighten any joints)?	Unknown/unsure
20.a	If yes, where and what movement are they unable to do? (e.g. unable to straighten their right elbow, unable to bend either knee)	
21	What postural equipment do they have in place at home or use at day centre? (e.g. wheelchair, armchair, sleep system, pacer/body support walker, unknown/unsure)	Unknown
22	Can they walk or transfer at all? (Please select the answer which best fits)	Yes - able to walk with some support, or walking stick/frame. Difficulty walking outdoors. Able to manage stairs but need a rail or support.
23	Do they have any specific communication support needs? (e.g. easy read, pictures/objects of reference, TaSSEs, communication aids, unknown/unsure)	Injury has left K with a speech impediment
24	What type of accommodation do they live in? (e.g. family home, supported living, residential care, unknown/unsure)	Family home with elderly mother
25	What care packages are in place? (e.g. at home / day centre, unknown/unsure)	Unknown
26	Who funds their care?	Unknown/unsure
26.a	If you selected Other, please specify:	

27	Did they access hydrotherapy as a child?	No
27.a	If yes, how often?	
28	Do they access hydrotherapy now?	Yes
29	How regularly did they used to access hydrotherapy as an adult?	
30	When/why did they stop attending hydrotherapy?	
31	How regularly do they access hydrotherapy now?	Weekly when Halliwick club is allowed to meet
32	Have they ever accessed hydrotherapy more or less often than they currently do?	Yes
32.a	If yes, could you explain how often they used to access hydrotherapy and the cause for this change?	<p>After accident hydrotherapy was offered by physio team, but that was some years back.</p> <p>These days K attends a Halliwick AST club that meets weekly</p>
33	Who pays for their access to hydrotherapy as an adult?	Self-funded
33.a	If you selected Other, please specify:	
34	When they last accessed hydrotherapy, was the water:	Warm but not hydro pool temperature (e.g. about the same as a public pool)
35	What did they do during the hydrotherapy session?	Active swimming/exercises without support (e.g. no support needed)
35.a	If you selected Other, please specify:	