**Supplemental Digital Content 1**

Survey of Spanish Pediatric Physical Therapists

**BLOCK I. DEMOGRAPHIC DATA**

**1. We appreciate the value of your time and we appreciate your cooperation. By way of confirmation: this survey is aimed at professionals in Pediatric Physiotherapy from all over Spain who work with young children (6 years or less) with cerebral palsy or at risk of developing it**

* I agree to be part of this study

**2. Please, tell us your age:**

* Indicate your age […]

**3. Please, tell us your gender:**

* Female
* Male

**4. Please, indicate your nationality:**

* Indicate your nationality […]

**5. Please, select the Autonomous Community or the Autonomous City in which you carry out your professional activity**

* Andalucía
* Aragón
* Principado de Asturias
* Islas Baleares
* Canarias
* Cantabria
* Castilla-La Mancha
* Castilla y León
* Cataluña
* Comunidad Valenciana
* Extremadura
* Galicia
* La Rioja
* Comunidad de Madrid
* Región de Murcia
* Comunidad Foral de Navarra
* País Vasco
* Ceuta
* Melilla

**6. How many years have you been working with the group of young children (6 years or less)?**

* Indicate the total number of years […]

**7. Where do you do your work as a physical therapist? Select all that apply**

* Early Intervention Center
* School
* Hospital
* Private
* University
* Other (please specify) […]

**8. Are you a member of any society or professional group? Select all that apply**

* No
* European Academy of Childhood Disability (EACD)
* Spanish Society of Physiotherapy in Pediatrics (SEFIP)
* Spanish Society of Perinatal Medicine (SEMPE)
* Spanish Society of Neurology (SEN)
* Spanish Society of Pediatric Neurology (SENEP)
* Spanish Society of Neonatology (SENEO)
* Spanish Society of Pediatric Orthopedics (SEOP)
* Spanish Society for Child Rehabilitation (SERI)
* Association of Early Intervention Professionals of its Autonomous Community
* Other (please specify) […]

**9. How did you find out about the questionnaire for this study? Please select several in case it reached you through multiple sources**

* Spanish Society of Physiotherapy in Pediatrics (SEFIP)
* Professional College of Physiotherapy of my Autonomous Community
* Social Network
* Other (please specify) […]

**10. Indicate the highest degree you have:**

* Physical Therapist Degree
* Master of Science Official
* Master of Science Official in Pediatric Physiotherapy or Child Care
* Master of Science Advanced
* Master of Science Advanced in Pediatric Physiotherapy or Child Care
* Doctorate
* Other (please specify) […]

**BLOCK II. CLINICAL PRACTICE: EVALUATION PROCESSES**

**11. What percentage of your regular clinical practice involves working with children with cerebral palsy?**

0 10 20 30 40 50 60 70 80 90 100

Percentage of clinical practice

**12. Indicate the mean age in months of the diagnosis of Cerebral Palsy or related clinical histories (such as periventricular leukomalacia or others) in the children with whom it works:**

* Average age in months:\_\_\_\_\_\_

**13. Did you know that cerebral palsy can be frequently diagnosed at 12 months of age?**

* Yes
* No

**14. Select the statement that best suits your daily clinical practice**

* I provide a prognosis for cerebral palsy or identify children at high risk of developing cerebral palsy
* I work with children with cerebral palsy but do not provide a prognosis.

**15. If you suspect that a patient may be at risk or have cerebral palsy, what is your usual referral route for diagnosis? Select all that apply**

* Neonatologist
* Child Neurologist
* Neurologist
* Pediatrician
* Infant Rehabilitator
* Child Traumatologist
* Other (please specify) […]
* I do not usually drift, because (please specify) […]

**16. Does your workplace have any standardized referral protocols, procedures, or guidelines for the referral of a child at risk of developing cerebral palsy for diagnosis?**

* Yes
* Yes, but could be improved
* No, but I have my own procedures
* No
* I am not sure

**17. How often do you use these screening tools with or without risk of developing cerebral palsy?**

* Alberta Infant Motor Scale (AIMS)

 Never / Sometimes / Almost always

* Ages & Stages Questionnaires (ASQ)

 Never / Sometimes / Almost always

* Bayley Scales of Infant and Toddler Development

 Never / Sometimes / Almost always

* Developmental Assessment of Young Children (DAYC)

 Never / Sometimes / Almost always

* Dubowitz Neurological assessment

 Never / Sometimes / Almost always

* Hammersmith Infant Neurological Examination (HINE)

 Never / Sometimes / Almost always

* Clinical history. Clinical signs and symptoms or clinical protocol

 Never / Sometimes / Almost always

* Motor Assessment of Infants (MAI)

 Never / Sometimes / Almost always

* Neuro Sensory Motor Development Assessment (NSMDA)

 Never / Sometimes / Almost always

* Pretchl’s Qualitative assessment of General Movements (GMA)

 Never / Sometimes / Almost always

* Vojta Valuation Procedure

 Never / Sometimes / Almost always

* Test of Infant Motor Performance (TIMP)

 Never / Sometimes / Almost always

* Touwen infant neurological examination

 Never / Sometimes / Almost always

* Other (please specify) […] or press “Never” if DK / NA

**18. Are you familiar with any of the following assessment tools for young children?**

* Hammersmith Infant Neurological Examination (HINE) (YES/NO)
* Pretchl’s Qualitative Assessment of General Movements (GMA) (YES/NO)
* Test of Infant Motor Performance (TIMP) (YES/NO)
* Developmental Assessment of Young Children (DAYC) (YES/NO)
* Motor Assessment of Infants (MAI) (YES/NO)
* Alberta Infant Motor Scale (AIMS) (YES/NO)
* Bayley Scales of Infant and Toddler Development (YES/NO)
* Peabody Developmental Motor Scales-2 (PDMS-2) (YES/NO)

**19. Have you received specific training in any of the following assessment tools for young children?**

* Hammersmith Infant Neurological Examination (HINE) (YES/NO)
* Pretchl’s Qualitative Assessment of General Movements (GMA) (YES/NO)
* Test of Infant Motor Performance (TIMP) (YES/NO)
* Developmental Assessment of Young Children (DAYC) (YES/NO)
* Motor Assessment of Infants (MAI) (YES/NO)
* Alberta Infant Motor Scale (AIMS) (YES/NO)

**The following questions refer to the use of assessment tools for diagnosis in children under 1 year old, between 1-2 years old, and over 2 years old.**

**20. Do you work with children under 1 year of age?**

* YES
* NO

**21. If you suspect that a child may have cerebral palsy, which of the following assessment tools do you use to support the assessment processes in children under 1 year of age? Select all that apply**

* Alberta Infant Motor Scale (AIMS)
* Ages & Stages Questionnaires (ASQ)
* Bayley Scales of Infant and Toddler Development
* Developmental Assessment of Young Children (DAYC)
* Dubowitz Neurological assessment
* Hammersmith Infant Neurological Examination (HINE)
* Clinical history. Clinical signs and symptoms or clinical protocol
* Motor Assessment of Infants (MAI)
* Neuro Sensory Motor Development Assessment (NSMDA)
* Pretchl’s Qualitative assessment of General Movements (GMA)
* Vojta Valuation Procedure
* Test of Infant Motor Performance (TIMP)
* Touwen infant neurological examination
* DK / NA
* Other (please specify) […]

**22. How often do you use these screening tools in children at risk or with cerebral palsy under 1 year of age?**

* Alberta Infant Motor Scale (AIMS)

 Never / Sometimes / Almost always

* Ages & Stages Questionnaires (ASQ)

 Never / Sometimes / Almost always

* Bayley Scales of Infant and Toddler Development

 Never / Sometimes / Almost always

* Developmental Assessment of Young Children (DAYC)

 Never / Sometimes / Almost always

* Dubowitz Neurological assessment

 Never / Sometimes / Almost always

* Hammersmith Infant Neurological Examination (HINE)

 Never / Sometimes / Almost always

* Clinical history. Clinical signs and symptoms or clinical protocol

 Never / Sometimes / Almost always

* Motor Assessment of Infants (MAI)

 Never / Sometimes / Almost always

* Neuro Sensory Motor Development Assessment (NSMDA)

 Never / Sometimes / Almost always

* Pretchl’s Qualitative assessment of General Movements (GMA)

 Never / Sometimes / Almost always

* Vojta Valuation Procedure

 Never / Sometimes / Almost always

* Test of Infant Motor Performance (TIMP)

 Never / Sometimes / Almost always

* Touwen infant neurological examination

 Never / Sometimes / Almost always

* Other (please specify) […] or press “Never” if DK / NA

**23. What are the reasons why you do not use the Pretchl’s Qualitative assessment of General Movements (GMA) for children under 1 year? Select all that apply**

* Not trained
* Not familiar4
* Lack of resources
* Out of my practice
* Not age appropriate
* Too much time to assess
* Training is too expensive
* Unsure about its effectiveness
* My center doesn't accept
* Limited experience with this tool
* Lack of professionals
* Late referral
* Other better tools
* Other (specify) […]

**24. What are the reasons you are not using the Hammersmith Infant Neurological Exam for children under 1 year of age? Select all that apply**

* Not trained
* Not familiar
* Lack of resources
* Out of my practice
* Too much time to assess
* Unsure about its effectiveness
* Limited experience with this tool
* Not age appropriate
* Lack of professionals
* Other better tools
* My center doesn't accept
* Training is too expensive
* Other (specify) […]

**25. Do you work with children between the ages of 1-2 years?**

* Yes
* No

**26. If you suspect that a patient may have cerebral palsy, which of the following screening tools do you use to support screening processes in children ages 1-2 years? Select all that apply**

* Alberta Infant Motor Scale (AIMS)
* Ages & Stages Questionnaires (ASQ)
* Bayley Scales of Infant and Toddler Development
* Developmental Assessment of Young Children (DAYC)
* Hammersmith Infant Neurological Examination (HINE)
* Clinical history. Clinical signs and symptoms or clinical protocol
* Motor Assessment of Infants (MAI)
* Neuro Sensory Motor Development Assessment (NSMDA)
* Vojta Valuation Procedure
* Touwen infant neurological examination
* DK / NA
* Other (specify) […]

**27. How often do you use these screening tools in children at risk or with cerebral palsy aged 1-2 years?**

* Alberta Infant Motor Scale (AIMS)

 Never / Sometimes / Almost always

* Ages & Stages Questionnaires (ASQ)

 Never / Sometimes / Almost always

* Bayley Scales of Infant and Toddler Development

 Never / Sometimes / Almost always

* Developmental Assessment of Young Children (DAYC)

 Never / Sometimes / Almost always

* Hammersmith Infant Neurological Examination (HINE)

 Never / Sometimes / Almost always

* Clinical history. Clinical signs and symptoms or clinical protocol

 Never / Sometimes / Almost always

* Motor Assessment of Infants (MAI)

 Never / Sometimes / Almost always

* Neuro Sensory Motor Development Assessment (NSMDA)

 Never / Sometimes / Almost always

* Vojta Valuation Procedure

 Never / Sometimes / Almost always

* Touwen infant neurological examination

 Never / Sometimes / Almost always

* Other (please specify) […] or press “Never” if DK / NA

**28. What are the reasons you are not using the Hammersmith Infant Neurological Exam for 1-2 year olds? Select all that apply**

* Not trained
* Not familiar
* Lack of resources
* Out of my practice
* Too much time to assess
* Unsure about its effectiveness
* Limited experience with this tool
* Not age appropriate
* Lack of professionals
* Other better tools
* My center doesn't accept
* Training is too expensive
* Other (specify) […]

**29. Do you work with children over 2 years of age?**

* Yes
* No

**30. If you suspect that a patient may have cerebral palsy, which of the following screening tools do you use to support screening processes in children older than 2 years of age? Select all that apply**

* Ages & Stages Questionnaires (ASQ)
* Bayley Scales of Infant and Toddler Development
* Developmental Assessment of Young Children (DAYC)
* Clinical history. Clinical signs and symptoms or clinical protocol
* Vojta Valuation Procedure
* Touwen infant neurological examination
* Other (specify) […]

**31. How often do you use these screening tools in children at risk or with cerebral palsy older than 2 years of age?**

* Ages & Stages Questionnaires (ASQ)

 Never / Sometimes / Almost always

* Bayley Scales of Infant and Toddler Development

 Never / Sometimes / Almost always

* Developmental Assessment of Young Children (DAYC)

 Never / Sometimes / Almost always

* Clinical history. Clinical signs and symptoms or clinical protocol

 Never / Sometimes / Almost always

* Vojta Valuation Procedure

 Never / Sometimes / Almost always

* Touwen infant neurological examination

 Never / Sometimes / Almost always

* Other (please specify) […] or press “Never” if DK / NA

**32. Are you familiar with the use of optimal scores on the Hammersmith Infant Neurological Examination?**

* Yes
* No

**33. Are you familiar with the use of optimal scores on the Alberta Infant Motor Scale (AIMS)?**

* Yes
* No

**34. Are you familiar with the use of optimal scores from the Pretchl’s Qualitative assessment of General Movements (GMA)?**

* Yes
* No

**35. Are you familiar with using the optimal Test of Infant Motor Performance (TIMP) scores?**

* Yes
* No

**BLOCK III. CLINICAL PRACTICE: INTERVENTION PROCESSES**

**36. Does your workplace have a standardized protocol, procedure, or guide for the specialized management of a child at risk of developing or with cerebral palsy (for example, spasticity management, postural control, therapies, etc.)**

* Yes
* Yes, but could be improved
* No, but I have my own procedures
* Not
* I'm not sure

**37. Does your workplace have a standardized protocol, procedure, or guide for orthopedic surveillance in children at risk or with cerebral palsy? Select all that apply**

* Yes - Hip monitoring guides
* Yes - Spine Surveillance Guides
* No - Each professional determines their surveillance protocols
* No - Surveillance protocols are not carried out
* I do not know
* Other (please specify) […]

**38. If a child is at risk or has cerebral palsy, what intervention services do they routinely refer to? Select all that apply**

* Cerebral Palsy Associations
* Child Development and Early Intervention Centers
* Needs assessment
* Family support services
* Specific private child development services - Physiotherapy, Occupational Therapy, Speech Therapy, Social Work
* Other (please specify) […]
* None of the above

**39. Do you have any comments or suggestions on current referral procedures for children at risk or with cerebral palsy?**

* […]

**40. Do you use any of the Classification Systems when transferring information regarding children with cerebral palsy?**

* Gross Motor Function Classification System (GMFCS)

Never / Sometimes / Almost always

* Manual Ability Classification System (MACS)

Never / Sometimes / Almost always

* Communication Function Classification System (CFCS)

Never / Sometimes / Almost always

* Eating and drinking ability classification System (EDACS)

Never / Sometimes / Almost always

**BLOCK V. PROFESSIONAL UPDATE**

**41. What are your main sources of information on the most recent evidence in evaluation and early diagnosis in cerebral palsy? Select all that apply**

* Articles from scientific journals
* Conferences
* Courses / workshops (outside my workplace, including online training)
* Meetings of societies, groups or professional associations / updates by email
* Internal training (in my workplace)
* Social media
* Webinars
* Other (please specify) […]

**42. In your current job, what facilitators help you implement new intervention tools / changes in your clinical practice?**

* […]

**43. In your current job, what barriers prevent you from implementing new intervention tools / changes in your clinical practice?**

* […]

**44. Do you think that the existence of standardized clinical guidelines of good practices in the management of cerebral palsy would be useful in Spain?**

* Yes
* No

**45. If you have any additional information to provide on the questions regarding this survey, please respond below**

* […]