**Pre-measurement questionnaire**

1. **Do you have any experience using a home-based vision-testing device?** *NB proceed to question 2 if you have selected a, b or c.*
2. *Yes*
3. *No, but I have heard of one before*
4. *No, but I have seen someone using one before*
5. *Not at all*
6. *Optional comment:*
7. **What was/were the name(s) of the device(s)?**
8. **The device(s) was/were used to measure (select all that apply)**
9. *The power of the spectacles I might need to see clearly, i.e. spectacle prescription*
10. *My vision with or without spectacles/ contact lenses*
11. *Others (please specify)*
12. **I was confident in the results generated by the device(s)** *NB if more than one device, please indicate and respond for each device*
13. *Strongly agree*
14. *Agree*
15. *Neither agree nor disagree*
16. *Disagree*
17. *Strongly disagree*
18. *Optional comment:*
19. **I found the device(s) useful** *NB if more than one device, please indicate and respond for each device*
20. *Strongly agree*
21. *Agree*
22. *Neither agree nor disagree*
23. *Disagree*
24. *Strongly disagree*
25. *Optional comment:*

**Post-measurement Questionnaire**

1. **I found the device easy to learn**
2. *Strongly agree*
3. *Agree*
4. *Neither agree nor disagree*
5. *Disagree*
6. *Strongly disagree*
7. *Optional comment:*
8. **I found the device easy to use**
9. *Strongly agree*
10. *Agree*
11. *Neither agree nor disagree*
12. *Disagree*
13. *Strongly disagree*
14. *Optional comment:*
15. **I am confident that the device generated my spectacle prescription with a level of accuracy that would be comparable to that established by a qualified eye care professional, e.g. optometrist, ophthalmologist**
16. *Strongly agree*
17. *Agree*
18. *Neither agree nor disagree*
19. *Disagree*
20. *Strongly disagree*
21. *Optional comment:*
22. **Even if the spectacle prescription generated by the device was not as accurate as that measured by a qualified eye care professional, I think the difference would be negligible and unimportant.**
23. *Strongly agree*
24. *Agree*
25. *Neither agree nor disagree*
26. *Disagree*
27. *Strongly disagree*
28. *Optional comment:*
29. **I would rather visit my optometrist than to use the device alone to get my spectacle prescription**
30. *Strongly agree*
31. *Agree*
32. *Neither agree nor disagree*
33. *Disagree*
34. *Strongly disagree*
35. *Optional comment:*
36. **The device was rather difficult to learn**
37. *Strongly agree*
38. *Agree*
39. *Neither agree nor disagree*
40. *Disagree*
41. *Strongly disagree*
42. *Optional comment:*
43. **The device was rather difficult to use**
44. *Strongly agree*
45. *Agree*
46. *Neither agree nor disagree*
47. *Disagree*
48. *Strongly disagree*
49. *Optional comment:*
50. **I do not think my spectacle prescription generated by the device would be as accurate as that determined by a qualified eye care professional**
51. *Strongly agree*
52. *Agree*
53. *Neither agree nor disagree*
54. *Disagree*
55. *Strongly disagree*
56. *Optional comment:*
57. **Any difference in the spectacle prescription between that generated by the device and that determined by an eye care professional would be unacceptable**
58. *Strongly agree*
59. *Agree*
60. *Neither agree nor disagree*
61. *Disagree*
62. *Strongly disagree*
63. *Optional comment:*
64. **Given the choice to visit an optometrist, I would not be willing to use the device alone to get my spectacle prescription**
65. *Strongly agree*
66. *Agree*
67. *Neither agree nor disagree*
68. *Disagree*
69. *Strongly disagree*
70. *Optional comment:*
71. **What are your views on the use of the device (or one of similar type) as a vision-testing tool?**
72. **What are the greatest obstacles to the use of home-based vision-testing tools among the general public?**
73. **What other features (in addition to its current feature of establishing one’s spectacle prescription) would you like to see added to the current device?**