



UBC CENTRE FOR
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The TRANSFORMATION primary health care patient experiences survey in French and English

A technical report

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TRANSFORMATION

Improving the science and reporting of performance in primary health care



THE UNIVERSITY OF BRITISH COLUMBIA

The TRANSFORMATION primary health care patient experiences survey in French and English:
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About CHSPR

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- Population-based
- Policy relevant
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About TRANSFORMATION

TRANSFORMATION is a Canadian multi-provincial research project meant to improve the science and reporting of performance measurement in the primary health care system.

Team

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Activities

1. Comparing comprehensive measures of primary health care performance and healthcare equity between three regions in Canada: British Columbia, Ontario, and Nova Scotia.
2. Identifying and examining the factors that are unique to each of the three regions that may explain why primary health care system performance varies across the regions.
3. Working with clinicians, decision-makers and the public to identify their priorities for reporting of primary health care performance.
4. Identifying innovations of service delivery that are associated with better primary health care performance and healthcare equity.
5. Creating real-world problem-solving ability in a learning community that includes researchers, clinicians, decision-makers, students and patients.

Funders

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Executive Summary

A good patient experience of care is an essential part of high performing primary health care (PHC). *Previous work* led by the Canadian Institute for Health Information (CIHI) identified key indicators for PHC. Subsequent task forces identified potential indicators and subscales to capture these indicators, including content for a patient experience survey. This report presents the results of the first application of the refined patient-experience survey tool to compare PHC performance in three Canadian regions. We focus primarily on the aggregation of multiple patient experience indicators and scales into overarching PHC performance dimensions; these were created to facilitate the sharing of results with key stakeholders. The experience is summarized in the body of the report and the appendices provide details of the survey dimensions, components, item and scoring.

An extensive questionnaire (116 questions) was administered to 1,929 consecutive patients (n=1,929) in waiting rooms of 87 PHC practices in three regions. A total of 49 questions (indicators and validated subscales) were used to construct seven dimensions of PHC performance based on patient experience:

1. Accessibility Orientation
2. Relationship-based Care
3. Promoting Health
4. Self-management Support
5. Coordination Orientation
6. Safe Healthcare System Contribution
7. Equity Orientation.

Fourteen of the 49 questions can be used to capture the *CIHI PHC indicators*. The dimensions also map well to quality of care dimensions in the Patient's Medical Home.

Aggregation of the scores to the practice and then the regional level demonstrates statistically significant between-region variation in Accessibility Orientation, Relationship-Based Care, Self-management Support, Coordination Orientation, and Contribution to a Safe Healthcare System.

We have built on previous work that created the CIHI PHC patient experience survey. The work of TRANSFORMATION has further refined the questions and dimensions. The TRANSFORMATION Patient Experiences Survey could form the basis of routine and comparative measurement and reporting in Canada. This remains a proposal that will benefit from further refinement. Nonetheless, it represents a concrete step toward a system of routine and comparative measurement and reporting of PHC performance across Canada. The aggregation into dimensions of PHC based on patient experience can present a high level portrait about PHC for decision-makers and practices, offering further detailed exploration for those who wish to address specific areas for improvement at either a practice or regional level.

We recommend that the seven patient reported dimensions of PHC performance are:

1. Administered through automated systems using “modules” of select dimensions in order to enhance sustainability;
2. Used in conjunction with other means of collecting comprehensive PHC performance data (e.g. surveys of clinicians, organizations and teams, administrative and clinical data); and,
3. Offered in multiple languages in order to enhance representativeness of performance information.



Introduction

Patient experience is an essential part of the Quadruple Aim of health reform within which high-performing primary health care (PHC) plays a foundational role.¹⁻³ Data-driven PHC performance measurement remains nascent in Canada. In 2006, the Canadian Institute of Health Information (CIHI) released 105 pan-Canadian PHC indicators, which were identified as essential to measure and compare PHC performance at multiple levels within and across jurisdictions in Canada. Yet, many of the indicators required data collection from patients. A valid PHC performance measurement system cannot be based solely on secondary analysis of administrative data; it requires primary data collection, especially of patient experience. To support the incorporation of patient experiences, work was completed by Wong and Haggerty^{4,5} to develop what was known as the CIHI PHC patient experience survey. The work documented in this report builds on the CIHI PHC patient experience survey, previous pan-Canadian, and international work.^{6,7}

The CIHI PHC patient experience survey items, along with other items, were part of TRANSFORMATION, a Canadian multi-provincial research project, funded by the Canadian Institutes of Health Research and the Michael Smith Foundation for Health Research. The practice-based data collection strategy entailed collecting provider, organizational, and patient surveys for participating practices in three Canadian geographic regions: Fraser East, British Columbia (BC); Eastern Ontario Health Unit, Ontario (ON); and Central Zone, Nova Scotia (NS). These linked surveys enabled us to obtain data from the best sources to measure core attributes of PHC.⁸ This report presents the refined patient-experience survey tool used in TRANSFORMATION. We detail here the patient reported dimensions of PHC and their components: item stems and response categories. We focus primarily on the aggregation of multiple patient experience indicators and scales into overarching PHC performance dimensions; these were created to facilitate sharing results with key stakeholders.*

* Details of the analytic support for the final tool will be reported in a future publication. A link will be made available at <http://www.transformationphc.ca/publications/>.



Methods

The TRANSFORMATION Patient Experiences Survey was built on the foundation of the CIHI Patient Experiences in Primary Health Care (PHC) Survey,⁴ which was developed by Wong and Haggerty.⁵ CIHI's Patient Experiences survey incorporated items and subscales from 17 instruments to capture dimensions of PHC quality important to patients.⁵ The TRANSFORMATION study selected 59 of the 87 questions from the CIHI Patient Experiences Survey tool, most of which had been previously validated.⁹⁻¹⁶ We also incorporated other previously validated indicators and publicly-available scales to capture socio-demographic characteristics, health states, and patient-reported outcomes.^{10-15,17-24} We preferentially selected tools with French and English equivalents in order to measure pan-Canadian PHC indicators.²⁵ Response options and referring frames were adjusted to provide coherence and ease response burden. We identified key questions from these sources using consultation from Canadian experts in PHC to obtain a comprehensive picture of patient experience in this sector.

The resulting questionnaire included 116 questions to capture patient reported experiences in PHC, patient reported outcomes and sociodemographic characteristics. It was administered in waiting rooms to a consecutive sample of patients (n=1,929) across 87 PHC practices (n=22 in Fraser East, BC; n=26 in Eastern Ontario Health Unit, ON; n=39 in Central Zone, NS). The sample size was determined principally to provide reliability at the regional level, not the practice level. More details about recruitment of practices and administration of the survey have been reported by Wong et al.²⁶ Most of the patient experience questions refer to usual care in the previous 12 months, but the final questions are visit-based and are designed to be answered after the clinical encounter. The English and French versions of the questionnaire that was administered can be found in Appendix A. For the survey question item stems and response categories used in each dimension (French and English) and how they are scored, see Appendix B.

We developed seven patient-reported dimensions of PHC performance using psychometric analytic techniques (publication under review). Briefly, we used a factor analytic framework to identify stand-alone indicators and sub-scales that appear to be associated to a common underlying construct that could be considered an overarching performance dimension. Aggregated to the practice, then the regional level, these dimensions provide a high-level overview of a region's PHC performance, highlighting points of variation and the strengths and weaknesses across regions on dimensions of PHC performance.



Results

A total of 1,929 patients participated in the TRANSFORMATION Patient Experience Survey (Table 1). Two-thirds (66%) of the sample were female and had two or more chronic conditions, and the mean

age of survey participants was 54 years old; this is an expected snapshot of a typical PHC waiting room.²⁷ Eight out of ten participants were of European descent.

Table 1. Patient self-reported characteristics of the TRANSFORMATION survey sample

Demographics	Fraser East, BC	Eastern Ontario Health Unit, ON	Central Zone, NS	Total	Missing
N	504	547	878	1929	
Percent of overall sample	26.1%	28.4%	45.5%	100%	
Percent female**	66.3%	59.9%	70.5%	66.4%	1.4%
Age, mean (SD)***	55.8 (17.8)	55.2 (15.8)	51.6 (16.5)	53.7 (16.8)	0.6%
Education***					5.2%
Less than high school	13.8%	12.2%	6.9%	10.3%	
High school	28.3%	29.6%	19.0%	24.6%	
Some university or college	42.9%	39.3%	40.2%	40.7%	
Completed undergraduate degree	10.9%	14.0%	21.7%	16.6%	
Graduate degree	4.1%	4.9%	12.1%	7.9%	
Employment status**					4.8%
Full-time	29.7%	41.8%	40.3%	37.9%	
Part-time	10.9%	7.8%	11.1%	10.1%	
Not employed outside the home	15.6%	11.4%	15.1%	14.2%	
Long-term sickness or disability	9.4%	8.8%	9.1%	9.1%	
Retired	34.4%	30.2%	24.4%	28.8%	
Financial status					5.6%
Poor/very tight	13.4%	12.0%	14.9%	13.7%	
Tight	17.1%	16.2%	16.3%	16.5%	
Modestly comfortable	35.5%	34.4%	38.1%	36.3%	
Comfortable/very comfortable	33.9%	37.4%	30.8%	33.5%	
Married/co-habiting**	70.0%	70.5%	61.1%	66.2%	5.1%

*p < 0.05, **p < 0.001, ***p < 0.0001.

Note: Statistical tests (Chi-squared test for categorical variables, and Anova test for continuous variables) are for overall differences.



Demographics	Fraser East, BC	Eastern Ontario Health Unit, ON	Central Zone, NS	Total	Missing
Ethnicity***					10.6%
European descent	75.8%	80.6%	80.1%	79.1%	
Aboriginal/First Nations/Métis	5.6%	2.4%	3.9%	3.9%	
Asian	9.1%	0.0%	1.5%	3.1%	
Other	4.0%	2.0%	3.8%	3.3%	
Unknown	5.6%	15.0%	10.8%	10.6%	
Born outside Canada***	23.8%	7.6%	7.0%	11.7%	4.8%
Language(s) spoken at home (check all that apply)***					4.5%
English	95.3%	67.1%	98.5%	88.5%	
French	1.4%	45.4%	3.8%	15.3%	
Other	13.3%	2.2%	2.3%	5.2%	
Number of chronic conditions					3.0%
No chronic conditions	12.7%	16.9%	15.9%	15.3%	
One chronic condition	18.5%	20.1%	17.9%	18.7%	
Two chronic conditions	18.1%	13.6%	15.3%	15.6%	
Three or more chronic conditions	50.7%	49.4%	50.9%	50.4%	
Health status*					3.0%
Excellent/very good	28.6%	33.9%	30.7%	31.1%	
Good	39.8%	39.2%	35.2%	37.6%	
Fair/poor	31.6%	26.9%	34.1%	31.4%	

*p < 0.05, **p < 0.001, ***p < 0.0001.

Note: Statistical tests (Chi-squared test for categorical variables, and Anova test for continuous variables) are for overall differences.

After psychometric analyses we arrived at seven overarching dimensions of patient-reported experience described through 49 questions. Definitions of the seven patient-reported dimensions, the dimension components and the number of items used to create each dimension are shown in Table 2. The number of survey questions per dimension range from four

to eleven. Several of these survey questions (zero to five per dimension) contain CIHI PHC Indicators (see Appendix B for further detail). The components of each dimension includes both visit-based experience and the patient's usual experience in the past 12 months. The visit-based experience provides specific insight into the consistency of the usual experience.



Table 2. Summary dimensions of primary health care performance as reflected in patient experience, showing component sub-dimensions, number of questions and concordance with CIHI PHC indicators

Dimension definition	Components	# of Items	# of items that are CIHI PHC Indicators
Accessibility orientation The clinic's organizational procedures make it easy for patients to get information (and advice) by telephone and consistently provide timely visits for new health problems, urgent problems, or prescription renewal, and patients don't report frequent difficulties in accessing primary health care.	Telephone accessibility; Timeliness; Access difficulty	4	1
Relationship-based care The clinicians demonstrate whole-person knowledge of their patients, are willing to talk about sensitive issues and listen well during visits.	Whole-person knowledge; Open talk; Elicitation	7	0
Promoting health Patients receive health advice and health promotion appropriate to their life context, and the staff actively encourages patients to attend groups or classes to help manage their health concerns.	Assessment and advice; Health empowerment; Healthy living orientation	11	5
Self-management support For patients undergoing treatment. Clinicians engage in shared decision-making with patients receiving treatment and patients consistently report feeling better enabled to stick to treatment and care for their health.	Usual shared decision-making; Visit shared decision-making; Activation	7	0
Coordination orientation The clinicians have a robust role in initiating and following the care that patients receive from other providers, and patients do not report incidents of the care team at the clinic being disorganized or giving conflicting recommendations.	Coordination role; Healthcare team support; Lack of role clarity	7	4
Safe healthcare system contribution Clinicians inform patients about risks associated with prescribing medicines and, for patients who receive care from other providers, patients do not experience gaps in the flow of information between providers nor report medical errors.	Medication risk management; Information gaps between providers	7	4
Equity orientation Patients experience respectful treatment from front office staff and clinicians respect the patient's time, autonomy and dignity and protect low-income patients from incurring additional payments or having unmet needs due to cost.	Respectful front office staff; Respectful clinician; Long wait; Payment at point of care for low-income patients	6	0



The components in each dimension are combined, usually anchored in the most robust measure among them, then points are added or subtracted based on answers to the other components. All final scores are transformed to a scale from one to ten, where a higher score represents a more positive report of performance on a given dimension. Table 3 provides the scores in our study sample, showing statistically

significant between-region variation in various dimensions. Despite small samples per practice, the between-practice variance was even more pronounced (results not shown). Other performance, outcome, and demographic measures collected by TRANSFORMATION are not reported here but are outlined in Appendices C and D.

Table 3. Mean of regional clinic mean dimension scores, showing dimensions with statistically significant variation between regions (*)

Dimension	Total [Mean (SD)]	Fraser East, BC	Eastern ON Health Unit, ON	Central Zone, NS
Accessibility orientation**	6.78 (0.82)	6.46 (0.08)	7.36 (0.57)	6.58 (0.79)
Relationship-based care*	7.80 (0.67)	7.50 (0.65)	8.16 (0.44)	7.74 (0.72)
Promoting health	7.31 (0.64)	7.19 (0.55)	7.47 (0.48)	7.28 (0.76)
Self-management support**	7.64 (0.79)	7.21 (0.77)	8.05 (0.70)	7.61 (0.73)
Coordination orientation**	8.19 (0.47)	8.01 (0.42)	8.53 (0.34)	8.06 (0.47)
Safe healthcare system contribution**	7.68 (0.75)	7.43 (0.68)	8.07 (0.70)	7.57 (0.75)
Equity orientation	9.09 (0.40)	8.98 (0.35)	9.17 (0.45)	9.09 (0.39)

*p < 0.05, **p < 0.001.

Note: Statistical tests are for overall differences.



Discussion and recommendations

Part of a primary health care information system

In order to incorporate patient experience measures across the spectrum of care improvement into policy and planning, we need high quality instruments that can be used by relevant stakeholders as part of a learning health system.²⁸ We propose that these seven patient-reported dimensions of PHC performance, using 49 of the 116 questions in the TRANSFORMATION Patient Experiences Survey, could form the basis for routine and comparative measurement and reporting. These patient reported experience dimensions provide important information on key PHC attributes^{29,30} and provide a high-level overview of patient reported experience. Aggregating items into these dimensions can make high level information more easily digestible for decision-makers and practices. Individual items offer further detailed exploration for those who then wish to address specific areas for improvement. Decision-makers can identify individual items which contribute to higher or lower scores, as it is at that level that actions would likely be taken.

Quadruple Aim

Development and administration of a patient reported experience survey can meet two of the Quadruple Aims: improving patient experience and improving population health.³

Improving patient experiences

At a practice level, capturing sufficient numbers of patient experiences can show where progress is being made and offer more actionable information about where work is needed on accessibility, relationship-based care, etc. There may be trade-offs in improvements so promoting a more comprehensive

measurement strategy will help us see where there are trade-offs or unintended consequences of some efforts.

Improving population health

Data from patients within a jurisdiction can be aggregated and used to inform program planning and public reporting.³¹ We suggest administering patient experience surveys regularly as one piece of data to inform a learning health system.

The Patient's Medical Home

A framework that is specific to PHC and for the current Canadian context is the Patients' Medical Home (PMH). Many health regions are moving towards understanding PHC performance through this framework.³²⁻³⁴ The seven dimensions created through this work can speak to aspects of certain pillars in the PMH framework (Table 4). The dimensions also align with other conceptual frameworks for good PHC delivery.³⁵⁻³⁷

Cautions

We recognize that the proposed patient experience survey tool poses a considerable response burden to patients, even if many of the descriptive elements are removed. Additional development is needed to further shorten it and/or test different data collection strategies that could provide equivalent information with lower response burden. One suggestion would be to administer shorter "modules" of survey sub-sections, with different samples responding to different modules to cover all dimensions. The selection of which modules to administer and at what time can be purposefully aligned with practice and regional initiatives. For example, automated survey administration systems could decrease burden on participants and enhance sustainability of data collection.^{31 *}



Table 4. Pillars of the Patient's Medical Home and their relevance to the patient-reported experience dimensions of PHC performance from TRANSFORMATION

PMH pillar	Relevant patient-reported dimension of PHC performance from TRANSFORMATION
Patient-centred: Clinics provide services that are responsive to patients and their families. ³³	<ul style="list-style-type: none"> • Relationship-based care • Promoting health • Self-management support • Equity orientation
Timely access: Patients are able to make timely appointments in their practices and experience advocacy for timely appointments with other health and medical services. ³³	<ul style="list-style-type: none"> • Accessibility orientation
Continuity: Clinics offer continuous care, advocate for patients' continuity of care across the health system, and maintain relationships and medical information. ³³	<ul style="list-style-type: none"> • Coordination orientation
Evaluation: Clinics engage in evaluation as part of continuous quality improvement. ³³	<ul style="list-style-type: none"> • Safe healthcare system contribution

Additional data need to be incorporated for a more comprehensive portrait of PHC performance. Specifically, we would recommend enhancing the information provided within the Accessibility Orientation, since this dimension is so critical to patients and there are robust tools available. Given the complexity of PHC, a meaningful system of PHC performance measurement would be comprehensive, also utilizing data sources from practice surveys (clinics, clinicians, patients, practice teams), administrative data, and clinical data.³¹ The work presented on the TRANSFORMATION Patient Experiences Survey can be used as one of several tools needed to understand PHC performance.

Patient experience surveys need to be available in other languages in addition to French and English. Sixteen percent of Canadians most often speak a non-official language or a combination of an official and non-official language at home,³⁸ and there is wide variation and concentration of people speaking non-official languages in different parts of Canada. Studies have shown that offering surveys in multiple languages enhances survey participation and representativeness.^{39,40}

*Also see <http://clintonex.com/>



Conclusion

This work represents one step in moving closer toward a Canadian PHC information system which could be used for performance measurement and reporting. The work started in 2001 with the massive investments in PHC transformation, which led to the early proposal for evaluating the implementation and impact of reforms and to an early proposal for a pan-Canadian PHC Patient Experience Survey. In TRANSFORMATION we refined and administered this tool and have proposed a method for scoring and representing the results. The resulting PHC Patient Experiences Survey tool and scoring remains a proposal that will benefit from further refinement. Nonetheless, we offer this to the community as a concrete step toward a system of routine and comparative measurement and reporting of PHC performance across Canada.



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Appendix A. TRANSFORMATION Patient Experiences Survey

View the full TRANSFORMATION *Patient Experience Survey in English*.

View the full TRANSFORMATION *Patient Experience Survey in French*.



Appendix B. Survey questions and scoring rules for patient-reported dimensions of primary health care performance

Component	Item stem	Response categories	Scoring rules	Source
Dimension: Accessibility Orientation				
The clinic's organizational procedures make it easy for patients to get information (and advice) by telephone and consistently provide timely visits for new health problems, urgent problems, or prescription renewal and patients don't report frequent difficulties in accessing primary health care. Flowchart detailing scoring rules.				
Telephone accessibility	<p><i>Think about being able to get the healthcare or advice you need here at this place...</i></p> <p>Based on your experience in this time period [12 months], how easy is it for you to get health advice here over the phone?</p> <p><i>Veillez penser à la possibilité d'obtenir les soins ou les conseils dont vous avez besoin ici même, à cet endroit...</i></p> <p>En vous basant sur votre expérience durant cette période, est-ce facile pour vous d'obtenir des conseils d'ordre médical ici par téléphone?</p>	<p>Not at all easy / Not very easy / Moderately easy / Easy / Very easy / Does not apply to me</p> <p>Pas facile du tout / Pas très facile / Moyennement facile / Facile / Très facile / Ne s'applique pas</p>	<p>Dimension anchored in a single item</p>	<p>CIHI's Patient Experiences in PHC Survey⁴</p>
Timeliness	<p>Why did you come here today?</p> <p>Pourquoi êtes-vous venu(e) ici aujourd'hui?</p>	<p>Routine examination/annual examination / Follow-up of a health problem/pregnancy follow-up / New health problem / An urgent but minor health problem / Prescription renewal / Many issues to discuss / Other, please specify_____</p> <p>Examen de routine/examen annuel / Suivi d'un problème de santé/suivi de grossesse / Nouveau problème de santé / Problème de santé urgent mais pas trop grave / Renouvellement de prescription pour des médicaments / Plusieurs sujets à discuter / Autre, veuillez préciser_____</p>	<p>Adjustments: if time-sensitive reason for visit (urgent but minor health problem, prescription renewal, or new health problem):</p> <p>+1 for timely visit (< 3 days wait)</p> <p>-1 if wait > 1 week</p> <p>-2 if wait > 2 weeks</p> <p>If non-time-sensitive reason for visit, no adjustments made.</p>	<p>CIHI's Patient Experiences in PHC Survey⁴</p>
	<p>How long was the delay between making this appointment and your visit today?</p> <p>Combien de temps avez-vous attendu entre la prise du rendez-vous et la visite d'aujourd'hui?</p>	<p>I had a walk-in appointment / 1 to 2 days / Between 2 days and 1 week / 1 to 2 weeks / 2 to 4 weeks / 4 to 6 weeks / More than 6 weeks</p> <p>Je suis venu(e) au sans rendez-vous / De 1 à 2 jours / Plus de 2 jours mais moins d'une semaine / De 1 à 2 semaines / De 2 à 4 semaines / De 4 à 6 semaines / Plus de 6 semaines</p>		
Access difficulty	<p><i>Think about being able to get the healthcare or advice you need here at this place...</i></p> <p>Were there times when you had difficulty getting the healthcare or advice you needed?*</p> <p><i>Veillez penser à la possibilité d'obtenir les soins ou les conseils dont vous avez besoin ici même, à cet endroit...</i></p> <p>Y a-t-il eu des moments où vous avez eu de la difficulté à obtenir les soins ou les conseils de santé dont vous aviez besoin?*</p>	<p>No / Yes, once / Yes, several times</p> <p>Non / Oui, une seule fois / Oui, plusieurs fois</p>	<p>Adjustments if experienced access difficulty:</p> <p>-1 if once</p> <p>-2 if > once</p>	<p>CIHI's Patient Experiences in PHC Survey⁴</p>



Component	Item stem	Response categories	Scoring rules	Source
Dimension: Relationship-based care				
The clinicians demonstrate whole-person knowledge of their patients, are willing to talk about sensitive issues and listen well during visits. Flowchart detailing scoring rules.				
Whole-person knowledge	<p><i>These next questions are about the care you get from your usual family doctor or nurse practitioner (herein referred to as a nurse) at this place...</i></p> <p>How well does your family doctor or nurse seem to know about your whole medical history? <i>Les prochaines questions portent sur les soins reçus ici même de la part de votre médecin de famille habituel ou infirmière...</i></p> <p>À quel point est-ce que votre médecin de famille ou infirmière semble connaître l'ensemble de votre histoire médicale?</p> <hr/> <p>Does your family doctor or nurse seem to know about what worries you most about your health? <i>Est-ce que votre médecin de famille ou infirmière semble connaître ce qui vous inquiète le plus au sujet de votre santé?</i></p> <hr/> <p>Does your family doctor or nurse seem to know about your responsibilities at work or home? <i>Est-ce que votre médecin de famille ou infirmière semble connaître vos responsabilités au travail ou à la maison?</i></p> <hr/> <p>Does your family doctor or nurse seem to know about your personal values? <i>Est-ce que votre médecin de famille ou infirmière semble connaître vos valeurs personnelles?</i></p>	<p>Hardly at all / A little / Moderately / A lot / Totally</p> <p>À peu près pas / Un peu / Moyennement / Beaucoup / Totalement</p>	<p>Dimension anchored in the average of two subscales: 'whole person knowledge' and 'open talk'</p>	<p>CIHI's Patient Experiences in PHC Survey⁴</p>
Open talk	<p><i>These next questions are about the care you get from your usual family doctor or nurse practitioner (herein referred to as a nurse) at this place...</i></p> <p>How often does your family doctor or nurse seem open to talking about sensitive issues for example grief, mental health problems or abuse experiences? <i>Les prochaines questions portent sur les soins reçus ici même de la part de votre médecin de famille habituel ou infirmière...</i></p> <p>Dans quelle mesure est-ce que votre médecin de famille ou infirmière vous semble ouvert(e) à parler de sujets sensibles tels que le deuil, les problèmes de santé mentale ou les expériences d'abus?</p>	<p>Never or rarely / Sometimes / Often or very often / Does not apply to me</p> <p>Jamais ou rarement / Parfois / Souvent ou très souvent / Ne s'applique pas</p>		<p>E-HoCS¹²</p>
Elicitation	<p><i>These next questions are about the care you get from your usual family doctor or nurse practitioner (herein referred to as a nurse) at this place...</i></p> <p>How good was the family doctor or nurse at giving you enough time? <i>Pour les prochaines questions, nous faisons référence à la personne que vous avez vue aujourd'hui en utilisant le terme "le médecin de famille ou infirmière » car c'est habituellement le cas...</i></p> <p>Comment évaluez-vous le médecin de famille ou l'infirmière sur le fait : De vous avoir donné assez de temps?</p> <hr/> <p>How good was the family doctor or nurse at listening to you? <i>Comment évaluez-vous le médecin de famille ou l'infirmière sur le fait: D'avoir été à l'écoute?</i></p>	<p>Very poor / Poor / Fair – neither good nor poor / Good / Very good</p> <p>Très mauvais(e) / Mauvais(e) / Ni bon(ne), ni mauvais(e) / Bon(ne) / Très bon(ne)</p>	<p>Adjustments for average of elicitation items: +1 if 'very good' -1 if 'fair to very poor'</p>	<p>CIHI's Patient Experiences in PHC Survey⁴</p>



Component	Item stem	Response categories	Scoring rules	Source
Dimension: Promoting health				
Patients receive health advice and health promotion appropriate to their life context, and the staff actively encourages patients to attend groups or classes to help manage their health concerns. Flowchart detailing scoring rules.				
Assessment & advice	Who here at this place talks to you about the impact of healthy and non-healthy foods on your health? Qui ici même, à cet endroit, vous parle des impacts des bons et mauvais aliments sur votre santé?	My usual family doctor / A nurse / Someone else, please specify ____ / No one Mon médecin de famille habituel / Une infirmière / Une autre personne, veuillez préciser ____ / Personne	Dimensions anchored in six health promotion areas: healthy eating; exercise; tobacco use (if applicable); alcohol or drug use (if applicable); family conflicts; accident prevention.	CIHI's Patient Experiences in PHC Survey ⁴
	Who here at this place talks to you about the importance of exercise or an active lifestyle? Qui ici même, à cet endroit, vous parle de l'importance de faire de l'exercice ou d'avoir un mode de vie sain?			
	Who here at this place talks to you about the impact of tobacco use on your health? Qui ici même, à cet endroit, vous parle de l'impact du tabac sur votre santé?			
	Who here at this place talks to you about alcohol or drug use or abuse? Qui ici même, à cet endroit, vous parle de la consommation ou surconsommation d'alcool ou de drogues?			
	Who here at this place talks to you about ways to handle family conflicts that may arise from time to time? Qui ici même, à cet endroit, vous parle de moyens pour gérer les conflits familiaux qui peuvent se produire à l'occasion?			
	Who here at this place talks to you about prevention of accidents in the home (falls, burns from hot water) or at work? Qui ici même, à cet endroit, vous parle de la prévention des accidents à la maison (chutes, brûlures par l'eau chaude) ou au travail?			
	Health empowerment			
<i>Nous faisons maintenant référence à TOUS les différents types de professionnels que vous avez identifiés ci-dessus en utilisant le terme « équipe de soins », même si vous n'avez vu qu'une seule personne...</i> Est-ce que l'équipe de soins ici vous donne le sentiment que vous êtes en contrôle de votre santé?*				
Does the healthcare team here help you feel confident about your ability to take care of your health?*				
	Est-ce que l'équipe de soins ici vous aide à vous sentir confiant(e) de pouvoir prendre soins de votre santé ?*			
	Does the healthcare team here help you feel that sticking with your treatment would make a difference?*	No, not at all / No, not really / Yes to some extent / Yes, definitely / Does not apply to me Non, pas du tout / Non, pas vraiment / Oui, jusqu'à un certain point / Oui, absolument / Ne s'applique pas		
	Est-ce que l'équipe de soins ici vous aide à comprendre que suivre votre traitement pourrait faire une différence?*			



Component	Item stem	Response categories	Scoring rules	Source
Education empowerment	Were you encouraged to go to a specific group or class to help you manage your health concerns?*	No, not at all / Not, not really / Maybe, not sure / Yes, sometimes / Yes, always / This is not available in my area / No, I haven't needed such support	The above scores are averaged with a single question about education empowerment	CIHI's Patient Experiences in PHC Survey ⁴
Healthy living orientation	<i>We refer to ALL the different types of people you checked in the previous question as the "healthcare team", even if you see just one person...</i> Does the healthcare team here help you feel that your everyday activities such as diet and lifestyle make a difference to your health?*	No, not at all / No, not really / Yes, to some extent / Yes, definitely	Adjustments for healthy living orientation: +1 if yes, definitely -1 if not at all	CIHI's Patient Experiences in PHC Survey ⁴
<p><i>Nous faisons maintenant référence à TOUS les différents types de professionnels que vous avez identifiés ci-dessus en utilisant le terme « équipe de soins », même si vous n'avez vu qu'une seule personne...</i> Est-ce que l'équipe de soins ici vous aide à sentir que vos activités de tous les jours, comme votre alimentation et votre style de vie, font une différence sur votre santé?*</p>				
<p>Dimension: Self-management support For patients undergoing treatment. Clinicians engage in shared decision-making with patients receiving treatment and patients consistently report feeling better enabled to stick to treatment and care for their health. Flowchart detailing scoring rules.</p>				
Usual shared decision-making	<i>A treatment plan is a set of actions your family doctor or nurse recommends to manage your health problem. Think about how well your family doctor or nurse adapted your treatment plans to your personal needs over the last 12 months...</i> Does your family doctor or nurse ask if you felt you could do the recommended treatment plan?	No / Yes, sometimes / Yes, often / I did not have any treatment	Dimension is calculated only for persons undergoing a treatment; anchored in the average of two items on usual shared decision-making	CIHI's Patient Experiences in PHC Survey ⁴
	<i>Un plan de traitement est un ensemble d'actions que votre médecin de famille habituel ou votre infirmière propose dans le but de gérer votre problème de santé. Veuillez penser dans quelle mesure votre médecin de famille ou votre infirmière a adapté votre plan de traitement à vos besoins au cours des 12 derniers mois...</i> Est-ce que votre médecin de famille ou votre infirmière vous a demandé si vous pensiez être capable de suivre le traitement recommandé?	Non / Oui, parfois / Oui, souvent / Je n'ai reçu aucun traitement		
	When there are treatment choices, does your family doctor or nurse ask you what treatment you would prefer? Lorsqu'il y a des choix de traitements, est-ce que votre médecin de famille ou votre infirmière vous demande lequel vous préféreriez?			



Component	Item stem	Response categories	Scoring rules	Source
Visit shared decision-making	<p><i>Today...</i> How good was the family doctor or nurse at explaining tests and treatments? <i>Aujourd'hui...</i> Comment évaluez-vous le médecin de famille ou l'infirmière sur le fait : De vous avoir expliqué les examens et les traitements?</p>	<p>Very poor / Poor / Fair – neither good nor poor / Good / Very good Très mauvais(e) / Mauvais(e) / Ni bon(ne), ni mauvais(e) / Bon(ne) / Très bon(ne)</p>	<p>Adjustments for average of visit shared decision-making items: +1 if very good -1 if very poor, poor, or fair</p>	<p>CIHI's Patient Experiences in PHC Survey⁴</p>
	<p>How good was the family doctor or nurse at involving you in decisions about your care? Comment évaluez-vous le médecin de famille ou l'infirmière sur le fait : De vous avoir impliqué dans les décisions concernant vos soins?</p>			
Activation	<p>After seeing the family doctor or nurse today, how much do you know about your problem(s) or illness? Après avoir vu le médecin de famille ou l'infirmière aujourd'hui, à quel point connaissez-vous vos problèmes de santé ou maladies?</p>	<p>Less than before the visit / About the same as before the visit / A little more than before the visit / Much more than before the visit Moins qu'avant la visite / À peu près comme avant la visite / Un peu plus qu'avant la visite / Beaucoup plus qu'avant la visite</p>	<p>Adjustments for average of activation items: +1 if much more than before -1 if less than before or about the same</p>	<p>CIHI's Patient Experiences in PHC Survey⁴</p>
	<p>After seeing the family doctor or nurse today, how confident are you to deal with your problem(s) or illness? Après avoir vu le médecin de famille ou l'infirmière aujourd'hui, à quel point êtes-vous confiant(e) de pouvoir faire face à vos problèmes de santé ou maladies?</p>			
	<p>After seeing the family doctor or nurse today, how confident are you about keeping yourself healthy? Après avoir vu le médecin de famille ou l'infirmière aujourd'hui, à quel point êtes-vous confiant(e) de pouvoir vous garder en bonne santé?</p>			
<p>Dimension: Coordination orientation The clinicians have a robust role in initiating and following the care that patients receive from other providers, and patients do not report incidents of the care team at the clinic being disorganized or giving conflicting recommendations. Flowchart detailing scoring rules.</p>				
Coordination role	<p><i>Think about what your family doctor or nurse does when you need care from other places...</i> How much does your family doctor or nurse help you get the healthcare you need from other places?*</p>	<p>No help at all / A little / Moderately / Quite a lot / A great deal Ne m'aide pas du tout / Un peu / Moyennement / Beaucoup / M'aide énormément</p>	<p>The dimension is anchored in the validated scale which is the average of three items</p>	<p>CIHI's Patient Experiences in PHC Survey⁴</p>
	<p><i>Pensez à ce que fait votre médecin de famille ou votre infirmière quand vous avez besoin de soins dans d'autres endroits...</i> À quel point votre médecin de famille ou votre infirmière vous aide-t-il(elle) à obtenir les soins dont vous avez besoin dans d'autres endroits?*</p>			
	<p>How much does your family doctor or nurse contact other health professionals about your care?*</p>			
	<p>À quel point votre médecin de famille ou votre infirmière contacte-t-il(elle) les autres professionnels à propos de votre santé?*</p>			
	<p>How much does your family doctor or nurse keep in contact with you even when you receive care in other places?*</p>			
	<p>À quel point votre médecin de famille ou votre infirmière garde-t-il(elle) contact avec vous, même lorsque vous recevez des soins dans d'autres endroits?*</p>			



Component	Item stem	Response categories	Scoring rules	Source
Healthcare team support	<p><i>We refer to ALL the different types of people you checked in the previous question as the “healthcare team”, even if you see just one person...</i></p> <p>In the last 12 months, has the healthcare team here provided everything you need to help you manage your health concerns?*</p> <p><i>Nous faisons maintenant référence à TOUS les différents types de professionnels que vous avez identifiés ci-dessus en utilisant le terme « équipe de soins », même si vous n’avez vu qu’une seule personne...</i></p> <p>Au cours des 12 derniers mois, est-ce que l’équipe de soins ici vous a procuré tout ce dont vous aviez besoin pour vous aider à gérer vos problèmes de santé?*</p>	<p>No, not at all / Not, not really / Maybe, not sure / Yes, sometimes / Yes, always / No, I haven’t needed such support</p> <p>Non, pas du tout / Non, pas vraiment / Peut-être, pas certain / Oui, jusqu’à un certain point / Oui, en general / Oui, absolument / Non, je n’ai pas eu besoin de ce type de support</p>	<p>The above scores are averaged with a response to a single question on whether the healthcare team provides everything they need to manage their health concerns</p>	<p>CIHI’s Patient Experiences in PHC Survey⁴</p>
Lack of role clarity	<p>In the past 12 months, were there times when the healthcare team here did not seem to work well together?</p> <p>Au cours des 12 derniers mois, y a-t-il eu des moments où l’équipe de soins ici semblait ne pas bien travailler ensemble?</p> <hr/> <p>In the past 12 months, were there times when the healthcare team here told you different things (that didn’t make sense together) about your health?</p> <p>Au cours des 12 derniers mois, y a-t-il eu des moments où l’équipe de soins ici vous a dit des choses différentes (qui ne vont pas dans le même sens) à propos de votre santé?</p> <hr/> <p>Were there times when the healthcare team here did not seem to know who should be doing what in your healthcare?</p> <p>Y a-t-il eu des moments où l’équipe de soins ici semblait ne pas savoir qui devait faire quoi pour vos soins?</p>	<p>Never or rarely / Sometimes / Often or very often / Does not apply to me</p> <p>Jamais ou rarement / Parfois / Souvent ou très souvent / Ne s’applique pas</p>	<p>Adjustments for coordination problem: -1 if one problem -1.5 if two problems -2 if three problems</p>	
<p>Dimension: Safe healthcare system contribution</p> <p>For patients who receive care from other providers. Clinicians inform patients about risks associated with prescribing medicines and, for patients who receive care from other providers, patients do not experience gaps in the flow of information between providers nor report medical errors. Flowchart detailing scoring rules.</p>				
Medication risk management	<p>Does your family doctor or nurse tell you about side effects you might get from a medicine?</p> <p>Est-ce que votre médecin de famille ou infirmière vous informe des effets secondaires possibles d’un médicament?</p> <hr/> <p>How often does your family doctor or nurse tell you what could happen if you don’t take the medicine they prescribe for you?</p> <p>Dans quelle mesure est-ce que votre médecin de famille ou infirmière vous dit ce qui pourrait arriver si vous ne prenez pas le médicament qu’il (elle) vous a prescrit?</p>	<p>No / Yes, sometimes / Yes, often or always / I don’t take any medicines</p> <p>Non / Oui, parfois / Oui, souvent / Je ne prends aucun médicament</p> <hr/> <p>Never / Rarely / Sometimes / Often / Always / I haven’t been prescribed any medicines</p> <p>Jamais / Rarement / Parfois / Souvent / Toujours / On ne m’a prescrit aucun médicament</p>	<p>Dimension is anchored in a validated scale of two items</p>	<p>CIHI’s Patient Experiences in PHC Survey⁴</p>



Component	Item stem	Response categories	Scoring rules	Source
Information gaps between providers	<p><i>About your experiences with any kind of care in other places. This section asks about health-care you got in other places in the last 12 months...</i></p> <p>Other than people seen here, who else have you seen in the past 12 months to manage your health condition?</p> <p><i>À propos des expériences vécues avec tous les soins reçus dans d'autres endroits. Cette section concerne les soins que vous avez reçus dans d'autres endroits au cours des 12 derniers mois...</i></p> <p>À part les personnes vues ici, qui d'autre avez-vous vu au cours des 12 derniers mois pour gérer votre condition de santé?</p>	<p>Only my usual doctor / Other family doctor or general practitioner / A specialist doctor / A nurse / A nurse practitioner or specialist nurse / A nutritionist or a dietician / A physiotherapist or an occupational therapist / Agist or a social worker / Indigenous healer / Complementary/Alternative healer, please specify____, Other, please specify____</p> <p>Seulement mon médecin habituel / Un autre médecin de famille ou généraliste / Un médecin spécialiste / Une infirmière / Une infirmière spécialisée (praticienne) / Un(e) nutritionniste ou un(e) diététiste / Un(e) physiothérapeute ou un(e) ergothérapeute / Un(e) psychologue ou un(e) travailleur(se) social(e) / Un guérisseur autochtone / Médecine douce/ alternative (ex: acuponcteur, chiropraticien, massothérapeute), veuillez préciser____ / Autre, veuillez préciser____ / Je ne reçois aucun soin en dehors d'ici</p>	<p>Adjustments for gaps in the flow of information between providers (for those who receive care from other providers)</p> <p>-0.5 for each occurrence of gaps (up to a maximum of -2 points)</p>	CIHI's Patient Experiences in PHC Survey ⁴
	<p><i>Think about the care you received from all the persons you saw in all the places you received care over the past 12 months...</i></p> <p>Were there times when the person you were seeing did not know your most recent medical history?*</p> <p><i>En pensant aux soins que vous avez reçus de TOUTES les personnes consultées dans TOUS les endroits où vous êtes allé(e) pour vos soins au cours des 12 derniers mois...</i></p> <p>Est-il arrivé que la personne que vous consultiez ne soit pas au courant de votre histoire médicale récente?*</p>	<p>Never or rarely / Sometimes / Often or very often</p> <p>Jamais ou rarement / Parfois / Souvent ou très souvent</p>		
	<p>Were there times when the person you were seeing did not know about changes in your treatment that another person recommended?*</p> <p>Est-il arrivé que la personne que vous consultiez ne soit pas au courant des changements de traitement recommandés par une autre personne?*</p>			
	<p>Were there times when you had to repeat information that should be in your medical record?*</p> <p>Est-il arrivé que vous ayez à répéter de l'information qui aurait due être dans votre dossier médical?*</p>			
	<p>Were there times when the person you were seeing did not have access to your recent tests or exam results?*</p> <p>Est-il arrivé que la personne que vous consultiez n'ait pas accès à vos résultats récents de tests ou d'examen?*</p>	<p>Never or rarely / Sometimes / Often or very often / Do not think this person needs to have this access</p> <p>Jamais ou rarement / Parfois / Souvent ou très souvent / Je ne pense pas que cette personne doit y avoir accès</p>		



Component	Item stem	Response categories	Scoring rules	Source
Dimension: Equity orientation				
Patients experience respectful treatment from front office staff and clinicians respect the patient's time, autonomy and dignity and protect low-income patients from incurring additional payments or having unmet needs due to cost. Flowchart detailing scoring rules.				
Respectful front office staff	<p><i>Today...</i> How helpful did you find the front office staff? <i>Aujourd'hui...</i> À quel point avez-vous trouvé aidant le personnel à l'accueil?</p> <hr/> <p>Did the front office staff treat you with courtesy and respect? Est-ce que le personnel à l'accueil vous a traité avec courtoisie et respect?</p>	<p>Not at all helpful / Not very helpful / Fairly helpful / Very helpful Pas du tout aidant / Pas très aidant / Moyennement aidant / Très aidant</p> <hr/> <p>No, not at all / No, not really / Yes, a little / Yes, mostly / Yes, completely Non, pas du tout / Non, pas vraiment / Oui, un peu / Oui, généralement / Oui, Totalemment</p>	Dimension is anchored in a validated scale that is the average of two items	CIHI's Patient Experiences in PHC Survey ⁴
Respectful clinician	<p>How often does your family doctor or nurse ask your permission before touching or examining you? Dans quelle mesure est-ce que votre médecin de famille ou infirmière vous demande la permission avant de vous toucher ou de vous examiner?</p>	<p>Never or rarely / Sometimes / Often or very often Jamais ou rarement / Parfois / Souvent ou très souvent</p>	The above score is averaged with a single item; This reflects the need within the clinical encounter for sensitivity to structural violence	EQUIP ⁴¹
Long wait	<p>How long did you wait in the waiting room today? Combien de temps avez-vous attendu dans la salle d'attente aujourd'hui?</p>	<p>Less than 5 minutes / 5 to 10 minutes / 11 to 15 minutes / 16 to 30 minutes / 31 to 60 minutes / 61 to 90 minutes / 91 to 120 minutes / More than 120 minutes Moins de 5 minutes / De 5 à 10 minutes / De 11 à 15 minutes / De 16 à 30 minutes / De 31 à 60 minutes / De 61 à 90 minutes / De 91 à 120 minutes / Plus de 120 minutes</p>	Based on the premise that long waits for a scheduled appointment indicate a lack of respectfulness Penalty if longer than accepted standards for an acceptable wait: -1 if wait is longer than 30 minutes	CIHI's Patient Experiences in PHC Survey ⁴



Component	Item stem	Response categories	Scoring rules	Source
Payment at point of care for low-income patients	What phrase best describes your financial situation? Quelle phrase décrit le mieux votre situation financière actuelle?	Poor / Very tight / Tight / Modestly comfortable / Comfortable / Very comfortable Pauvre / Très serrée / Serrée / Moyennement à l'aise / À l'aise / Très à l'aise	Although payments for non-medically necessary services and some medical supplies are permitted, equity-oriented practices will waive these costs for low-income patients. Penalty for services paid by low-income patients:	SV Index ¹⁹
	In the past 12 months, did you ever pay directly for any services you got here? Au cours des 12 derniers mois, avez-vous déjà payé directement un service que vous avez reçu ici?	No / Yes If yes, was it: Opening a file / Filling in forms / Getting a sick note / Medical services not covered by Medicare / Medicine or shots / Administration costs, please specify____ Non/Oui Si oui, veuillez préciser: Ouverture d'un dossier / Remplir un formulaire / Obtenir un billet du médecin (absence pour maladie) / Services médicaux non couverts par l'assurance-maladie (RAMQ) / Médicaments ou vaccins / Frais administratifs, veuillez préciser____	-1 for one service -2 for two or more services	CIHI's Patient Experiences in PHC Survey ⁴

*Canadian Institute for Health Information PHC Indicator



Appendix C. Other composite measures included in the TRANSFORMATION Patient Experience Survey

Scale and item stem	Response categories	Source
Affiliation with Clinic/Practitioner		
Is there a health professional who knows you best at this clinic? Y a-t-il un professionnel de la santé qui vous connaît très bien ici ?	No / Yes Non / Oui	CIHI's Patient Experiences in PHC Survey ⁴
Is that the person you are seeing today? Est-ce la personne que vous avez vue aujourd'hui?		
Would you say this person is responsible for most of your healthcare? Diriez-vous que cette personne est responsable de la plupart de vos soins?	Yes / No, someone else is responsible / No, no one in particular Oui / Non, une autre personne est responsable / Non, il n'y a personne en particulier	
Health Care Affordability		
<i>These next few questions ask you about your experiences with any out of pocket health care costs...</i> Thinking about the past 12 months, were there times when you found it hard to get healthcare services because of the loss of income it involves? <i>Les prochaines questions portent sur votre expérience vécue à propos de frais que vous avez dû payer pour obtenir certains soins ou services...</i> En pensant aux 12 derniers mois, y a-t-il eu des moments où vous avez trouvé difficile d'obtenir des soins de santé à cause des pertes de revenus que ça impliquait?	Never or rarely / Sometimes / Often Jamais ou rarement / Quelques fois / Souvent ou très souvent	CIHI's Patient Experiences in PHC Survey ⁴
In the past 12 months, were there times when you found it hard to get healthcare because of the additional costs? (parking, travel, babysitting, etc.) Au cours des 12 derniers mois, y a-t-il eu des moments où vous avez trouvé difficile d'obtenir des soins de santé à cause des coûts additionnels (garde d'enfants, transport, stationnement, etc.)?		Haggerty ¹⁰
In the past 12 months, were there times when you did not buy prescription medicines because of their costs? Au cours des 12 derniers mois, y a-t-il eu des moments où vous n'avez pas acheté des médicaments prescrits à cause de leurs coûts?	Never or rarely / Sometimes / Often or very often / I don't take any medicines Jamais ou rarement / Quelques fois / Souvent ou très souvent / Je ne prends aucun médicament	
In the past 12 months, were there times when you did not get laboratory tests or exams because of their costs? Au cours des 12 derniers mois, y a-t-il eu des moments où vous n'avez pas fait des tests ou des examens de laboratoire à cause de leurs coûts?	Never or rarely / Sometimes / Often or very often / No lab tests or exams were recommended Jamais ou rarement / Quelques fois / Souvent ou très souvent / Je n'ai pas eu besoin de test ou d'examen	
In the past 12 months, were there times when you did not get recommended services that aren't covered by Medicare because of their costs (such as physiotherapy, psychotherapy, dietetic...)? Au cours des 12 derniers mois, y a-t-il eu des moments où vous n'avez pas reçu des services recommandés mais non couverts par l'assurance-maladie (RAMQ) à cause de leurs coûts (tel que physiothérapie, psychothérapie, diététique)?	Never or rarely / Sometimes / Often or very often / I did not need any of these services Jamais ou rarement / Quelques fois / Souvent ou très souvent / Je n'ai pas eu besoin de ces services	



Scale and item stem	Response categories	Source
Social Vulnerability Index		
What phrase best describes your financial situation? Quelle phrase décrit le mieux votre situation financière actuelle?	Poor / Very tight / Tight / Modestly Comfortable / Comfortable / Very comfortable Pauvre / Très serrée / Serrée / Moyennement à l'aise / À l'aise / Très à l'aise	Haggerty ¹⁹
Which of the following best describes the highest level of education you have completed? Quel énoncé décrit le mieux le plus haut niveau de scolarité que vous avez complété?	Did not complete secondary school or high school / Completed secondary school or high school / Had some university education or completed a community college, technical college, or postsecondary program (e.g. trade, technical or vocational school, CEGEP) / Completed a bachelor's degree (e.g. B.A. B.Sc., B.S.N.) / Completed a graduate or professional degree (e.g. MD, DDS, DMD, DVM, OD, PhD) École secondaire non-complétée / École secondaire complétée / Études universitaires partielles ou études complètes dans un CEGEP, un collège technique ou un programme d'étude postsecondaire (école technique, de métiers ou formation professionnelle) / Baccalauréat terminé (ex: B.A., B.Sc., B.Sc.Inf) / Diplôme d'études supérieures ou diplôme professionnel (ex: M.D., D.M.D., D.M.V., O.D., Ph.D.)	
If you needed it, how many persons, family or friends, could help you with activities of daily living (e.g. dressing, driving)? Si vous en aviez besoin, combien de personnes de votre famille ou de vos amis pourraient vous aider dans vos activités quotidiennes (ex: s'habiller, conduire)?	None / One / More than one Aucune / Une personne / Plus d'une personne	
With how many persons, family or friends, can you freely confide in or talk about yourself or your problems? Avec combien de personnes de votre famille ou de vos amis pouvez-vous vous confier ou parler facilement de vous ou de vos problèmes?		
How many persons, family or friends, show you love and affection when you need it? Combien de personnes de votre famille ou de vos amis vous témoignent de l'amour et de l'affection quand vous en avez besoin?		
With how many persons, family or friends, can you freely share a good time with? Avec combien de personnes de votre famille ou de vos amis pouvez-vous partager du bon temps?		
In the past month, how many hours have friends or family helped you manage your health condition, including time in your home and travelling to medical appointments?*	___ hours / Not needed ___ heures / Aucun besoin	
Au cours du dernier mois, combien d'heures est-ce que les personnes de votre famille ou amis ont passé à vous aider à gérer votre condition de santé, incluant le temps passé à la maison ou à vous amener à des rendez-vous médicaux?*		
In general, how easy is it for you to get healthcare information by yourself when you need it (i.e. through internet, books)? En général, est-ce facile pour vous d'obtenir par vos propres moyens des informations au sujet de votre santé quand vous en avez besoin (ex : par Internet, livres, etc.)?	Not at all easy / Not very easy / A bit easy / Moderately easy / Very easy Pas facile du tout / Pas très facile / Un peu facile / Moyennement facile / Très facile	
What language(s) do you usually speak at home?*	English / French / Another language, please specify: ___ Anglais / Français / Autre langue, veuillez préciser ___	
Quelle(s) langue(s) parlez-vous habituellement à la maison?*		



Scale and item stem	Response categories	Source
EQ-5D-5L Health Utility		
<p><i>About your health. In this section, we ask about various aspects of your health. First, for each heading in BOLD below, please check the one box that best describes your health TODAY...</i></p> <p>MOBILITY*</p> <p><i>À propos de votre santé. Dans cette section, nous vous questionnons à propos de plusieurs aspects de votre santé. Pour chacun des thèmes en GRAS, veuillez cocher la case qui correspond le mieux à votre santé AUJOURD'HUI.</i></p> <p>MOBILITÉ*</p>	<p>I have no problems in walking about / I have slight problems in walking about / I have moderate problems in walking about / I have severe problems in walking about / I am unable to walk about</p> <p>Je n'ai aucun problème à me déplacer à pied / J'ai de légers problèmes à me déplacer à pied / J'ai des problèmes modérés à me déplacer à pied / J'ai de graves problèmes à me déplacer à pied / Je suis incapable de me déplacer à pied</p>	EQ-5D-5L ¹⁸
<p>SELF-CARE today*</p> <p>SOINS PERSONNELS*</p>	<p>I have no problems washing or dressing myself / I have slight problems washing or dressing myself / I have moderate problems washing or dressing myself / I have severe problems washing or dressing myself / I am unable to wash or dress myself</p> <p>Je n'ai aucun problème pour me laver ou m'habiller seul(e) / J'ai de légers problèmes pour me laver ou m'habiller seul(e) / J'ai des problèmes modérés pour me laver ou m'habiller seul(e) / J'ai de graves problèmes pour me laver ou m'habiller seul(e) / Je suis incapable de me laver ou de m'habiller seul(e)</p>	
<p>USUAL ACTIVITIES (e.g. work, study, housework, family or leisure activities)*</p> <p>ACTIVITÉS HABITUELLES (ex: travail, études, travaux ménagers, activités familiales ou loisirs)*</p>	<p>I have no problems doing my usual activities / I have slight problems doing my usual activities / I have moderate problems doing my usual activities / I have severe problems doing my usual activities / I am unable to do my usual activities</p> <p>Je n'ai aucun problème à faire mes activités habituelles / J'ai de légers problèmes à faire mes activités habituelles / J'ai des problèmes modérés à faire mes activités habituelles / J'ai de graves problèmes à faire mes activités habituelles / Je suis incapable de faire mes activités habituelles</p>	
<p>PAIN/DISCOMFORT*</p> <p>DOULEUR / INCONFORT*</p>	<p>I have no pain or discomfort / I have slight pain or discomfort / I have moderate pain or discomfort / I have severe pain or discomfort</p> <p>Je n'ai ni douleur, ni inconfort / J'ai des douleurs légères ou un léger inconfort / J'ai des douleurs ou un inconfort modéré(es) / J'ai des douleurs ou un inconfort intense(s) / J'ai des douleurs ou un inconfort extrême(s)</p>	
<p>ANXIETY/DEPRESSION*</p> <p>ANXIÉTÉ / DÉPRESSION*</p>	<p>I am not anxious or depressed / I am slightly anxious or depressed / I am moderately anxious or depressed / I am severely anxious or depressed / I am extremely anxious or depressed</p> <p>Je ne suis ni anxieux(se) ni déprimé(e) / Je suis légèrement anxieux(se) ou déprimé(e) / Je suis moyennement anxieux(se) ou déprimé(e) / Je suis très anxieux(se) ou déprimé(e) / Je suis extrêmement anxieux(se) ou déprimé(e)</p>	



Scale and item stem	Response categories	Source
Self-efficacy for managing chronic disease		
<p><i>For these next questions, choose the number that best describes how confident you feel about managing your health in each of these situations: (Please mark "NA" if this does not apply to you)...</i></p>	<p>1 = Not confident at all / 2 / 3 / 4 / 5 / 6 / 7 / 8 / 9 / 10 = Totally confident / NA 1 = Pas du tout confiant(e) / 2 / 3 / 4 / 5 / 6 / 7 / 8 / 9 / 10 = Totalement confiant(e) / NA</p>	<p>Self-efficacy²²</p>
<p>How confident are you that you can keep the fatigue caused by your health condition from interfering with the things you want to do?*</p>		
<p><i>Pour les questions qui suivent, veuillez cocher ce qui correspond le mieux à votre niveau de confiance de pouvoir gérer votre santé par vous-même pour chacune des situations décrites. (Veuillez cocher « NA » si ça ne s'applique pas à vous)...</i></p>		
<p>À quel point êtes-vous confiant(e) de pouvoir empêcher la fatigue causée par votre condition de santé de nuire aux choses que vous voulez faire?*</p>		
<p>How confident are you that you can keep the physical discomfort or pain of your health condition from interfering with the things you want to do?*</p>		
<p>À quel point êtes-vous confiant(e) de pouvoir empêcher l'inconfort physique ou la douleur liée à votre condition de santé de nuire aux choses que vous voulez faire?*</p>		
<p>How confident are you that you can keep the emotional distress caused by your health condition from interfering with the things you want to do?*</p>		
<p>À quel point êtes-vous confiant(e) de pouvoir empêcher le stress émotionnel causé par votre condition de santé de nuire aux choses que vous voulez faire?*</p>		
<p>How confident are you that you can keep any other symptoms or health problems you have from interfering with things you want to do?*</p>		
<p>À quel point êtes-vous confiant(e) de pouvoir empêcher tous les autres symptômes ou problèmes de santé que vous avez, de nuire aux choses que vous voulez faire?*</p>		
<p>How confident are you that you can do the different tasks and activities needed to manage your health condition so as to reduce your need to see a doctor?*</p>		
<p>À quel point êtes-vous confiant(e) de pouvoir faire les tâches et activités nécessaires pour bien gérer votre condition de santé et diminuer votre besoin de voir un médecin?*</p>		
<p>How confident are you that you can do things other than just taking medication to reduce how much your illness affects your everyday life?*</p>		
<p>À quel point êtes-vous confiant(e) de pouvoir faire autre chose que prendre des médicaments pour pouvoir diminuer les effets de votre condition sur votre vie de tous les jours?*</p>		



Scale and item stem	Response categories	Source
Veterans Rand 12-Item Health Survey		
<p><i>Think about your general state of health over the last 4 weeks. In general, would you say your health is:*</i> <i>En pensant à votre état de santé général des 4 dernières semaine En général, diriez-vous que votre santé est:*</i></p>	Poor / Fair / Good / Very good / Excellent Mauvaise / Passable / Bonne / Très bonne / Excellente	VR12 ²⁴
<p><i>The following questions are about activities you might do during a typical day. Does your health now limit you in these activities? If so, how much?</i> Moderate activities, such as moving a table, pushing a vacuum cleaner, bowling or playing golf?*</p> <p><i>Les prochaines questions portent sur les activités que pourriez faire dans une journée normale. Est-ce que votre état de santé actuel vous limite dans ces activités? Si oui, à quel point?</i> Activités modérées, tel que déplacer une table, passer l'aspirateur, jouer aux quilles ou au golf?*</p>	Yes, limited a lot / Yes, limited a little / No, not limited at all Oui, me limite beaucoup / Oui, me limite un peu / Non, ne me limite pas du tout	
<p>Climbing several flights of stairs?*</p> <p><i>Pour monter plusieurs étages à pieds?*</i></p>		
<p><i>During the past 4 weeks, have you had any of the following problems with your work or other daily activities as a result of your physical health?</i> Accomplished less than you would like.* <i>Au cours des 4 dernières semaines, avez-vous eu l'une des difficultés suivantes au travail ou dans une autre activité quotidienne à cause de votre état de santé physique?</i> Accompli moins de choses que vous l'auriez voulu*</p>	No, none of the time / Yes, a little of the time / Yes, some of the time / Yes, most of the time / Yes, all of the time Non, jamais / Oui, rarement / Oui, parfois / Oui, la plupart du temps / Oui, tout le temps	
<p>Were limited in the kind of work or other activities?*</p> <p><i>Avez été limité(e) dans la nature de vos tâches ou autres activités?*</i></p>		
<p><i>During the past 4 weeks, have you had any of the following problems with your work or other daily activities as a result of your emotional problems (such as feeling depressed or anxious)?</i> Accomplished less than you would like.* <i>Au cours des 4 dernières semaines, avez-vous eu l'une des difficultés suivantes au travail ou dans une autre activité quotidienne à cause de votre moral (comme le fait de se sentir déprimé(e) ou anxieux(se))?</i> Accompli moins de choses que vous l'auriez voulu*</p>	No, none of the time / Yes, a little of the time / Yes, some of the time / Yes, most of the time / Yes, all of the time Non, jamais / Oui, rarement / Oui, parfois / Oui, la plupart du temps / Oui, tout le temps	
<p>Didn't do work or other activities as carefully as usual?*</p> <p><i>N'avez pas fait votre travail ou autre activité avec autant de soin qu'à l'habitude?*</i></p>		
<p>During the past 4 weeks, how much did pain interfere with your normal work (including both work outside the home and housework)?*</p> <p><i>Au cours des 4 dernières semaines, dans quelle mesure la douleur a-t-elle nui à vos activités habituelles (au travail comme à la maison)?*</i></p>	Not at all / A little bit / Moderately / Quite a bit / Extremely Pas du tout / Un peu / Moyennement / Beaucoup / Énormément	



Scale and item stem	Response categories	Source
<p><i>How much of the time during the past 4 weeks... Have you felt calm and peaceful?*</i> <i>Au cours des 4 dernières semaines, combien de fois... Vous êtes-vous senti(e) calme et serein(e)?*</i></p>	<p>All of the time / Most of the time / A good bit of the time / Some of the time / A little of the time / None of the time Tout le temps / La plupart du temps / Une bonne partie du temps / Parfois / Rarement / Jamais</p>	
<p><i>Did you have a lot of energy?*</i> <i>Avez-vous eu beaucoup d'énergie?*</i></p>		
<p><i>Have you felt downhearted and blue?*</i> <i>Vous êtes-vous senti(e) triste et démoralisé(e)?*</i></p>		
<p><i>Has your physical health or emotional problems interfered with your social activities (like visiting with friends, relatives, etc.)?*</i> <i>Au cours des 4 dernières semaines, combien de fois votre état de santé physique ou moral a-t-il nui à vos activités sociales (comme visiter des amis, parents, etc.)?</i></p>		

*Canadian Institute for Health Information PHC Indicator



Appendix D. Other individual survey questions included in the TRANSFORMATION Patient Experience Survey

Item stem	Response categories	Source
Demographics		
What is your date of birth?*	Year : _____ Month : _____ Day : _____	
Quelle est votre date de naissance?*	Année : _____ Mois : _____ Jour : _____	
Are you:*	Male / Female / Transgender, transsexual, or a person with a history of transitioning sex	
Vous êtes:*	Homme / Femme / Transgenre, transsexuel, ou une personne avec une histoire ou en processus de changement de sexe	
Your height:	____ cm or ____ft____inches	
Quelle est votre taille:	____ cm OU ____ pieds ____pouces	
Your weight:	____ kg or ____ pounds	
Quel est votre poids:	____ kg OU ____ livres	
Were you born in Canada?*	No / Yes	Canadian Community Health Survey ¹⁷
Êtes-vous né(e) au Canada?*	Non / Oui	
If no, what year did you first come to Canada to live?*	_____	
[If no] In what country were you born?*	China / France / Portugal / Greece / Guyana / United States / Vietnam / Hungary / India / Italy / Jamaica / Netherlands/Holland / Hong Kong / Poland / Sri Lanka / Germany / United Kingdom / Philippines / Other:_____	
[Si non] Dans quel pays êtes-vous né(e)?*	Chine / France / Portugal / Grèce / Guyane / États Unis / Vietnam / Hongrie / Indes / Italie / Jamaïque / Pays-Bas/Hollande / Hong Kong / Pologne / Sri Lanka / Allemagne / Royaume Uni / Philippines / Autre:_____	
Are you an Aboriginal person?*	No / Yes. First Nations (North American Indian) / Yes. Métis / Yes. Inuk/Inuit	
Êtes-vous d'origine autochtone?*	Non / Oui, des Premières Nations (Amérindiens) / Oui, Métis / Oui, Inuk/Inuit(e)	
[If First Nations]*	Status / Non-status	
[Si des Premières Nations (Amérindiens)]*	Membre / Non-Membre	
You may belong to one or more racial or cultural groups on the following list. Are you:*	White (e.g. of European descent) / South Asian (e.g. East Indian, Pakistani, Sri Lankan) / Chinese / Black / Filipino / Latin American / Arab / Vietnamese, Cambodian, Malaysian, Laotian / West Asian / Korean / Japanese Other group, please specify:_____	
Vous pouvez appartenir à un ou plusieurs groupe(s) ethnique(s) ou culturel(s) de la liste qui suit. Êtes-vous... ?*	Blanc (ex: d'origine Européenne) / Sud asiatique (ex : Indien, Pakistanais, Sri Lankais) / Chinois / Noir (ex: d'origine Africaine) / Philippin / Latino américain / Arabe / Asiatique du sud est (ex : Vietnamien, Cambodgien, Malaisien, Laotien) / Asiatique de l'ouest (ex : Iranien, Afghan) / Coréen / Japonais / Autre groupe, veuillez préciser:_____	



Item stem	Response categories	Source
What language(s) do you usually speak at home?* Quelle(s) langue(s) parlez-vous habituellement à la maison?*	English / French / Another language, please specify: ____ Anglais / Français / Autre langue, veuillez préciser: ____	
What best describes your current civil status?* Qu'est-ce qui décrit le mieux votre situation actuelle?*	Married or living with a partner / Separated / Divorced / Widowed / Never married Marié(e) ou conjoint(e) de fait / Séparé(e) / Divorcé(e) / Veuf(ve) / Célibataire (jamais marié(e))	
Which of the following best describes the highest level of education you have completed?* Quel énoncé décrit le mieux le plus haut niveau de scolarité que vous avez complété?*	Did not complete secondary school or high school / Completed secondary school or high school / Had some university education or completed a community college, technical college, or postsecondary program (e.g. trade, technical or vocational school, CEGEP) / Completed a bachelor's degree (e.g. B.A. B.Sc., B.S.N.) / Completed a graduate or professional degree (e.g. MD, DDS, DMD, DVM, OD, PhD) École secondaire non-complétée / École secondaire complétée / Études universitaires partielles ou études complètes dans un CEGEP, un collège technique ou un programme d'étude postsecondaire (école technique, de métiers ou formation professionnelle) / Baccalauréat terminé (ex: B.A., B.Sc., B.Sc.Inf) / Diplôme d'études supérieures ou diplôme professionnel (ex: M.D., D.M.D., D.M.V., O.D., Ph.D.)	
Please estimate in which of the following groups your total 2014 household income fell?* Veuillez estimer dans laquelle des catégories suivantes le revenu total de 2014 de votre ménage se situe: *	Less than \$5,000 / \$5,000 to less than \$10,000 / \$10,000 to less than \$15,000 / \$15,000 to less than \$20,000 / \$20,000 to less than \$30,000 / \$30,000 to less than \$40,000 / \$40,000 to less than \$50,000 / \$50,000 to less than \$60,000 / \$60,000 to less than \$70,000 / \$70,000 to less than \$80,000 / \$80,000 to less than \$90,000 / \$90,000 to less than \$100,000 / \$100,000 to less than \$150,000 / \$150,000 and over Moins de 5 000\$ / De 5 000\$ à moins de 10 000\$ / De 10 000\$ à moins de 15 000\$ / De 15 000\$ à moins de 20 000\$ / De 20 000\$ à moins de 30 000\$ / De 30 000\$ à moins de 40 000\$ / De 40 000\$ à moins de 50 000\$ / De 50 000\$ à moins de 60 000\$ / De 60 000\$ à moins de 70 000\$ / De 70 000\$ à moins de 80 000\$ / De 80 000\$ à moins de 90 000\$ / De 90 000\$ à moins de 100 000\$ / De 100 000\$ à moins de 150 000\$ / 150 000\$ et plus	
Which of the following describes what you are doing at present?* Lequel des énoncés suivant décrit le mieux ce que vous faites présentement? *	Employed full time (including self-employed or on a work training program; 30 hours or more each week) / Employed part time (including self-employed or on a work training program; under 30 hours each week) / Unemployed / Full-time education at school, college or university / Unable to work due to a long-term sickness or disability / Looking after your home/family / Retired from paid work / Doing something else Travail à temps plein (y compris travail autonome ou programmes de formation au travail pendant 30 heures et plus chaque semaine) / Travail à temps partiel (y compris travail autonome ou programmes de formation au travail de moins de 30 heures chaque semaine) / Sans emploi / Étudiant(e) à temps plein dans une école, collège (CEGEP) ou université / Incapable de travailler en raison d'une maladie ou d'une invalidité de longue durée / Mère/père au foyer / À la retraite d'un emploi rémunéré / Je fais autre chose	



Item stem	Response categories	Source
General health status		
<p>In general, how would you rate the health of your teeth and mouth? En général, comment évaluez-vous la santé de vos dents et de votre bouche?</p>	<p>Poor / Fair / Good / Very good / Excellent Mauvaise / Passable / Bonne / Très bonne / Excellente</p>	CCHS ¹⁷
<p>Compared to one year ago, how would you rate your physical health in general now? Par comparaison à l’an dernier, comment évaluez-vous votre état de santé physique actuel en général?</p>	<p>Much better / Slightly better / About the same / Slightly worse / Much worse Bien meilleur / Un peu meilleur / À peu près le même / Pire / Bien pire</p>	VR12 ²⁴
<p>Compared to one year ago, how would you rate your emotional problems (such as feeling anxious, depressed or irritable) now? Par comparaison à l’an dernier, comment évaluez-vous l’état de votre moral actuel (comme le fait de se sentir anxieux(se), déprimé(e) ou irritable) ?</p>	<p>Much better / Slightly better / About the same / Slightly worse / Much worse / Does not apply to me Bien meilleur / Un peu meilleur / À peu près le même / Pire / Bien pire / Ne s’applique pas</p>	
<p>For each of the following conditions, please indicate if you have the condition “Yes” or “No”. Check “Yes” only for conditions confirmed by a doctor or for which you are taking prescribed drugs.* Pour chacune des conditions suivantes, veuillez indiquer si la condition est présente “oui” ou “non”. Veuillez cocher “oui” seulement si la condition a été confirmée par un médecin ou pour laquelle vous prenez des médicaments.*</p>	<p>Yes / No; Hypertension (high blood pressure) / Depression or anxiety / Chronic musculoskeletal conditions causing pain or limitation / Osteoarthritis and other arthritis (e.g. rheumatoid) / Osteoporosis / Asthma, chronic obstructive pulmonary disease or chronic bronchitis / Cardiovascular disease (angina, previous myocardial infarction, atrial fibrillation, lower limbs, circulation problems) / Heart failure (including heart valve disease or replacement) / Stroke and transient ischemic attacks (TIA) / Stomach problem (reflux or peptic ulcer symptoms); Colon problem (chronic inflammatory disease or irritable bowel syndrome) / Chronic liver disease / Diabetes / Thyroid disorder / Any cancer in the previous 5 years (including melanoma but not other skin cancers) / Chronic kidney disease or failure / Chronic urinary problem / Dementia or Alzheimer’s / Cholesterol problem (hyperlipidemia) / Obesity / Other: specify _____ Oui / Non; Hypertension (haute pression) / Dépression ou problème d’anxiété / Problème musculosquelettique chronique causant de la douleur ou des limitations / Arthrite ou polyarthrite rhumatoïde / Ostéoporose / Asthme, maladie pulmonaire obstructive chronique (MPOC) ou bronchite chronique / Maladie cardiaque (angine, infarctus, fibrillation auriculaire, mauvaise circulation dans les membres inférieurs) Insuffisance cardiaque (incluant un problème ou le remplacement des valves cardiaques) / AVC (accident vasculaire cérébral) / Reflux ou ulcère ou brûlement d’estomac / Maladie de l’intestin (côlon irritable, maladie de Crohn, colite ulcéreuse, diverticulose, etc.) / Hépatite chronique / Diabète / Trouble de la glande thyroïde / Cancer dans les 5 dernières années (incluant mélanomes mais excluant autres cancers de peau) / Maladie rénale chronique ou insuffisance rénale / Problème urinaire chronique / Démence ou Alzheimer / Problème de cholestérol (hyperlipidémie) / Obésité / Autre: précisez _____</p>	Fortin ²¹



Item stem	Response categories	Source
Access		
<p><i>Overall experiences at this place of care...</i> How acceptable is this wait? [delay between making this appointment and your visit today] À quel point trouvez-vous ce délai acceptable? [attente entre la prise du rendez-vous et la visite d'aujourd'hui]</p>	<p>Not at all acceptable / Not very acceptable / Moderately acceptable / Acceptable / Very acceptable Pas du tout acceptable / Pas très acceptable / Moyennement acceptable / Acceptable / Tout à fait acceptable</p>	<p>CIHI's Patient Experiences in PHC Survey⁴</p>
<p><i>[Were there times when you had difficulty getting the healthcare or advice you needed?]</i> If yes, what types of difficulties did you experience? <i>[Y a-t-il eu des moments où vous avez eu de la difficulté à obtenir les soins ou les conseils de santé dont vous aviez besoin?]</i> Si oui, quel genre de difficultés avez-vous eues?</p>	<p>Difficulty contacting a physician / A specialist was unavailable / Difficulty getting an appointment / Do not have personal/family physician / Waited too long to get an appointment / Waited too long in the waiting room / Service not available at time required / Service not available in the area / Transportation problems / Cost issues / Language problems / Did not feel comfortable with the available doctor or nurse / Did not know where to go (i.e., information problems) / Unable to leave the house because of a health problem / Other, please specify: ____ Difficulté à joindre un médecin / Spécialiste non disponible / Difficulté à obtenir un rendez-vous / Je n'ai pas de médecin de famille personnel ou habituel / J'ai attendu trop longtemps pour prendre rendez-vous / J'ai attendu trop longtemps dans la salle d'attente / Service non disponible quand j'en avais besoin / Service non disponible dans la région / Problèmes de transport / Coûts élevés / Problèmes de langue / Je ne me sentais pas à l'aise avec le médecin ou l'infirmière / Je ne savais pas où aller (manque d'information) / J'étais incapable de sortir de chez moi à cause d'un problème de santé / Autre, veuillez préciser: ____</p>	
<p>Did you speak to a family doctor today? Avez-vous parlé à un médecin de famille aujourd'hui?</p>	<p>Yes, my usual family doctor / Yes, another family doctor / No, another type of health professional, please specify: ____ Oui, à mon médecin de famille habituel / Oui, à un autre médecin de famille / Non, à un autre type de professionnel, Veuillez préciser: ____</p>	
<p>Did you have a visit with any other healthcare professional at the clinic today? Avez-vous vu un autre professionnel de la santé lors de votre visite aujourd'hui?</p>	<p>No / Yes; If yes: Other family doctor or general practitioner / A specialist / A nurse / A nurse practitioner / A nutritionist or a dietician / A physiotherapist or an occupational therapist / A psychologist or a social worker / Complementary/Alternative health (e.g. acupuncturist, chiropractor, registered massage therapist, etc.), please specify: ____ / Other, please specify: ____ Si oui: Un autre médecin de famille ou généraliste / Un médecin spécialiste / Une infirmière / Une infirmière spécialisée (praticienne) / Un(e) nutritionniste ou un(e) diététiste / Un(e) physiothérapeute ou un(e) ergothérapeute / Un(e) psychologue ou un(e) travailleur(se) social(e) / Médecine douce/Alternative (ex., acuponcteur, chiropraticien, massothérapeute), veuillez préciser: ____ / Autre, veuillez préciser: ____</p>	



Item stem	Response categories	Source
Confidence		
<p>How confident are you that you can get the services you need at a doctor's office, clinic or community health centre without having to go to the emergency room of a hospital? À quel point avez-vous confiance de pouvoir obtenir les services dont vous avez besoin dans un bureau de médecin ou dans une clinique médicale ou communautaire (CLSC) sans être obligé(e) d'aller à l'urgence d'un hôpital?</p>	<p>1 = Not confident at all / 2 / 3 / 4 / 5 / 6 / 7 / 8 / 9 / 10 =Totally confident 1 = Pas du tout confiance / 2 / 3 / 4 / 5 / 6 / 7 / 8 / 9 / 10 =Totalement confiance</p>	<p>CIHI's Patient Experiences in PHC Survey⁴</p>
<p>On a scale of 1-10, how confident are you in your provincial healthcare system? Sur une échelle de 1 à 10, à quel point faites-vous confiance au système de santé de votre province?</p>		
Continuity and coordination		
<p><i>[Is there a health professional who knows you best at this clinic?]</i> If yes, is this person: <i>[Y a-t-il un professionnel de la santé qui vous connaît très bien ici?]</i> Si oui, de qui s'agit-il:</p>	<p>A family doctor or general practitioner / A nurse practitioner / A specialist doctor / A nurse / Some other health professional, please specify ____ Un médecin de famille ou généraliste / Une infirmière spécialisée (praticienne) / Un médecin spécialiste / Une infirmière / Un autre professionnel de la santé, veuillez préciser: ____</p>	<p>CIHI's Patient Experiences in PHC Survey⁴</p>
<p>When you come here, how often do you see or speak to the person you prefer? Lorsque vous venez ici, dans quelle mesure voyez-vous ou parlez-vous à la personne que vous préférez?</p>	<p>Never or almost never / Some of the time / A lot of the time / Always or almost always / This is not my main place of care Jamais ou presque jamais / Parfois / La plupart du temps / Toujours ou presque toujours / Ce n'est pas mon endroit habituel de soins</p>	
<p>Who do you see at this place to manage your health concerns? Qui voyez-vous à cet endroit pour vos préoccupations liées à votre santé?</p>	<p>Only my usual doctor / Other family doctor or general practitioner / A specialist doctor / A nurse / A nurse practitioner or specialist nurse / A nutritionist or a dietitian / A physiotherapist or an occupational therapist / A psychologist or a social worker / Indigenous healer / Complementary/Alternative healer (e.g., acupuncturist, chiropractor, etc.), please specify: ____ / Other, please specify: ____ Seulement mon médecin habituel / Un autre médecin de famille ou généraliste / Un médecin spécialiste / Une infirmière / Une infirmière spécialisée (praticienne) / Un(e) nutritionniste ou un(e) diététiste / Un(e) physiothérapeute ou un(e) ergothérapeute / Un(e) psychologue ou un(e) travailleur(se) social(e) / Un guérisseur autochtone / Médecine douce/alternative (ex: acuponcteur, chiropraticien, massothérapeute), précisez: ____ / Autre, veuillez préciser: ____</p>	



Item stem	Response categories	Source
Costs		
<p>[In the past 12 months, did you ever pay directly for any services you got here?] [If yes] How much did it cost you in total over the past 12 months? [Au cours des 12 derniers mois, avez-vous déjà payé directement un service que vous avez reçu ici?] [Si oui] Combien avez-vous payé au total au cours des 12 derniers mois?</p>	<p>\$____ ____\$</p>	Guerriere and Coyte ²⁰
<p>Now thinking about the past 3 months: Approximately how much did you spend out of pocket in the following areas? Please check the best category AND tell us the amount. Medicines prescribed by a health professional* En pensant maintenant aux 3 derniers mois : environ combien d'argent avez-vous dépensé (à vos frais) pour les services suivants? Veuillez cocher la catégorie qui correspond le mieux ET indiquer le montant. Pour des médicaments prescrits par un professionnel de la santé?*</p>	<p>I was not prescribed any medicines / \$0 / \$1-100 / \$101-200 / \$201-500 / >\$500; Please specify: \$____ Je n'ai reçu aucune prescription / 0\$ / Entre 1\$ et 100\$ / Entre 101\$ et 200\$ / Entre 201\$ et 500\$ / Plus de 500\$; Veuillez préciser : ____ \$</p>	
<p>Laboratory tests prescribed by a health professional* Pour des tests de laboratoire recommandés par un professionnel de la santé?*</p>	<p>I was not prescribed any laboratory tests / \$0 / \$1-100 / \$101-200 / \$201-500 / >\$500; Please specify: \$____ Je n'ai reçu aucune prescription pour des tests ou examens / 0\$ / Entre 1\$ et 100\$ / Entre 101\$ et 200\$ / Entre 201\$ et 500\$ / Plus de 500\$; Veuillez préciser : ____ \$</p>	
<p>Mental health services/psychological care (such as counselling, psychotherapy)* Pour des services d'aide psychologique (tel que soutien psychologique, psychothérapie)?*</p>	<p>I did not use psychological care services / \$0 / \$1-100 / \$101-200 / \$201-500 / >\$500; Please specify: \$____ Je n'ai pas utilisé de services d'aide psychologique / 0\$ / Entre 1\$ et 100\$ / Entre 101\$ et 200\$ / Entre 201\$ et 500\$ / Plus de 500\$; Veuillez préciser : ____ \$</p>	
<p>Physical health services (such as physiotherapy, chiropractor, deep tissue massage)* Pour des services de santé physique (tel que de la physiothérapie, la chiropratique, le massage des tissus profonds)?*</p>	<p>I was not prescribed physical health services / \$0 / \$1-100 / \$101-200 / \$201-500 / >\$500; Please specify: \$____ Je n'ai reçu aucune prescription pour des services de santé physiques / 0\$ / Entre 1\$ et 100\$ / Entre 101\$ et 200\$ / Entre 201\$ et 500\$ / Plus de 500\$; Veuillez préciser : ____ \$</p>	
Comprehensiveness of services		
<p>In the last 12 months, have you had enough support from local services or organizations to help you to manage your health concerns?*</p>	<p>No, not at all / No, not really / Yes, to some extent / Yes, definitely / No, I haven't needed such support Non, pas du tout / Non, pas vraiment / Oui, jusqu'à un certain point / Oui, Absolument / Non, je n'ai pas eu besoin de ce type de soutien</p>	CIHI's Patient Experiences in PHC Survey ⁴
Equity in health care		
<p>What language(s) do you usually speak with your usual family doctor or nurse? Quelle(s) langue(s) parlez-vous généralement avec votre médecin de famille habituel ou votre infirmière?</p>	<p>English / French / Another language, please specify: ____ Anglais / Français / Autre langue, veuillez préciser: ____</p>	Waibel et al. ⁴²



Item stem	Response categories	Source
Interpersonal processes of care		
How much would you say that your family doctor or nurse knows you as a person?*	Not at all / A little / A fair amount / Very much	IPC ^{13,14}
Dans quelle mesure diriez-vous que votre médecin de famille ou votre infirmière vous connaît en tant que personne?*	Pas du tout / Un peu / Moyennement / Beaucoup	
How often does your family doctor or nurse explore how manageable treatments would be for you?*	Not at all / A little / Mostly / Completely / No treatments have been prescribed	
Dans quelle mesure votre médecin de famille ou votre infirmière a-t-il(elle) exploré à quel point les traitements seraient gérable pour vous?*	Pas du tout / Un peu / En grande partie / Complètement / Aucun traitement ne m'a été recommandé	
How good was the family doctor or nurse at explaining test and treatments?	Very poor / Poor / Fair – neither good nor poor / Good / Very good	CIHI's Patient Experiences in PHC Survey ⁴
Comment évaluez-vous le médecin de famille ou l'infirmière sur le fait: De vous avoir expliqué les examens et les traitements	Très mauvais(e) / Mauvais(e) / Ni bon(ne), ni mauvais(e) / Bon(ne) / Très bon(ne)	
Patient safety		
In the last 12 months, have you been given the wrong medication or wrong dose by a doctor, nurse, or pharmacist?	Yes / No, not that I know of	CIHI's Patient Experiences in PHC Survey ⁴
Au cours des 12 derniers mois, est-il arrivé qu'un médecin, une infirmière ou un pharmacien ne vous donne pas le bon médicament ou la bonne dose?	Oui / Non, pas à ma connaissance	
In the last 12 months, have you been given incorrect results for a diagnostic or lab test?		
Au cours des 12 derniers mois, vous a-t-on donné des résultats incorrects pour un test de laboratoire ou diagnostic?		
Responsiveness		
How long did your consultation last? (include all the health professionals you saw here today)	___ Total mins	New question
Combien de temps a duré votre consultation? (en incluant tous les professionnels que vous avez vus aujourd'hui)	___ minutes au total	
Trust		
If you saw a family doctor, did you have trust in the family doctor you spoke to?*	Yes, definitely / Yes, to some extent / No, not at all / Don't know/can't say	GPAQ ¹¹ & NHS Patient Survey ¹⁵
Si vous avez vu un médecin de famille, aviez-vous confiance au médecin à qui vous avez parlé?*	Oui, totalement / Oui, jusqu'à un certain point / Non, pas du tout / Je ne sais pas/Je ne peux pas dire	
[If yes to <i>Did you have a visit with any other healthcare professional at this clinic today?</i>]		
Did you have trust in this other person you saw or spoke to?*		
[If yes to <i>Avez-vous vu un autre professionnel de la santé lors de votre visite aujourd'hui?</i>]		
Aviez-vous confiance en cette personne que vous avez vue ou avec qui vous avez parlé aujourd'hui?*		



Item stem	Response categories	Source
Utilization		
How many visits have you had here in the past 12 months?*	More than 10 visits / 6 to 10 visits / 4 to 6 visits / 2 to 3 visits / 1 visit (today only)	Wong and Haggerty ⁵
Combien de visites avez-vous faites ici au cours des 12 derniers mois?*	Plus de 10 visites / De 6 à 10 visites / De 4 à 6 visites / 2 to 3 visites / 1 seule visite (aujourd'hui)	
<i>In this section we ask about persons who have been paid to come to your home to help you with medical or personal care in the past 3 months.</i>	I did not need help	Guerriere and Coyte ²⁰
Skip to question 87 if you did not receive home care.*	Je n'ai pas besoin d'aide	
<i>Dans cette section, nous vous posons des questions à propos de personnes qui ont été payées pour venir chez vous pour vous aider avec les soins personnels ou médicaux au cours des 3 derniers mois.</i>		
Si vous n'avez pas reçu les soins à domicile, passez à la question 87.*		
In the past 3 months, about how many times was someone (such as a nurse or physiotherapist) paid to come to help you with your medical care?*	Zero times, I did not need any help / 1 time or more: Please specify how many: ___ times	
Au cours des 3 derniers mois, environ combien de fois est-ce que quelqu'un (tel qu'une infirmière ou un physiothérapeute) a été payé pour venir vous aider avec vos soins médicaux?*	Aucune fois, je n'ai pas eu besoin d'aide / Une fois ou plus; Veuillez préciser: ___ fois	
In the past 3 months, about how many times was someone paid to come to help you with your personal care such as help with bathing or preparing a meal (not meals-on-wheels)?*		
Au cours des 3 derniers mois, environ combien de fois est-ce que quelqu'un a été payé pour venir vous aider avec vos soins personnels comme pour aider pour le bain ou préparer des repas (excluant la popotte roulante)?*		
In the past 3 months, about how many times was someone paid to help you with housework you could not do because of your health condition?*		
Au cours des 3 derniers mois, environ combien de fois est-ce que quelqu'un a été payé pour venir vous aider pour vos travaux ménagers que vous ne pouviez pas faire à cause de votre condition de santé?*		

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