

2019-2020



Continuity Across
Transitions
In Care Survey
(Covid-19 module added
April 16th, 2020)



TELEPHONE INTRODUCTION

I1. Hello, my name is _____ . I am calling from R.A. Malatest and Associates Ltd. on behalf of the <AUPLD_FAC_NAME>. We are doing a survey about healthcare. Is this <AUPLD_FName><AUPLD_LName>?

[IF UPLD_PED=1] Hello, my name is _____ . I am calling from R.A. Malatest and Associates Ltd. on behalf of the <AUPLD_FAC_NAME>. We are doing a survey about healthcare. Is this the parent or guardian of <AUPLD_FName><AUPLD_LName>?

[IF UPLD_Y=1: SURVEYOR NOTE: If answered by parent/sibling/other individual who asks the following:

Q1. What is this survey about?

A. This survey is to collect information from people who have visited emergency departments about their experiences and satisfaction with healthcare and services in British Columbia.

Q2. I would prefer to do the survey myself on behalf of my child.

A. Unfortunately, we have to talk to the person who received care. It is important that we have representation from all age groups in our study, so we do need to do the survey with <AUPLD_FName><AUPLD_LName>.]

I2. May I please speak with <AUPLD_FName><AUPLD_LName>?

[IF UPLD_PED=1] May I please speak with the parent or guardian of <AUPLD_FName><AUPLD_LName>?

Yes1 → **SKIP TO I3**

No2 → **SKIP TO [Set callback time]**

PARTICIPANT REACHED

I3. I am calling today to talk with you about the care you recently received at <AUPLD_FAC_NAME>. Your name was randomly chosen from all patients who recently had care at <AUPLD_FAC_NAME>. This survey will help us to understand your experiences and your ideas about improving the quality of care in our hospitals. The questions will focus on your experiences as you moved from home to hospital and back again. We are interested in how well you were prepared for your return home - specifically, how well your discharge was planned, and how well you were supported after discharge with things like follow-up medical care in the community.

The survey may take about 30 minutes to complete. Is now a good time to speak with you?

[IF UPLD_PED=1] I am calling today to talk with you about the care your child recently received at <AUPLD_FAC_NAME>. Your child's name was randomly chosen from all patients who recently received care at <AUPLD_FAC_NAME>. This survey will help us to understand your experiences and your ideas about improving the quality of care in our hospitals. The questions will focus on your experiences as you and your child moved from home to hospital and back again. We are interested in how well you were prepared for your return home - specifically, how well your child's discharge was

planned, and how well you were supported after discharge with things like follow-up medical care in the community.

Your opinions are very important, because the results of this survey will be used to improve the care and services provided in our hospitals. **The survey asks questions about your care experiences and about your health. How patients view their health and how it relates to their health care experiences helps us improve the quality of care for all patients.** The survey may take about 30 minutes to complete. Is now a good time to speak with you?

- Yes, I consent to continue1 → SKIP TO PRIVACY
 No – set call-back time2 → SKIP TO [Set call-back time]
 No – does not want to do survey via phone.....3 → SKIP TO I4
 No – refuses to participate..... 4 → SKIP TO ENDO

ONLINE OPTION

I4. You may also complete the survey online. This option will take about 30 minutes, and it does not need to be completed all at once. In order for you to complete the survey online, all you need to do is to log onto the website that is shown on the front page of the letter that you received in the mail and enter your secure password. Alternatively, we can send you an email with a link to the survey and your password.

- Wants to do survey online and has letter with login ID.....1 → SKIP TO ENDO
 Has lost/misplaced letter with login ID and wants this emailed.....2 → SKIP TO I5
 Does not want to do survey online either3 → SKIP TO ENDO

I5. We will only use your email address for the purpose of sending you a link to this survey. At all times your personal information is protected and will only be used as authorized under the BC Freedom of Information and Protection of Privacy Act. Could I please have your email address?

- [enter email]

[SURVEYOR NOTE: re-read email address back to respondent using NATO phonetic alphabet as needed to clarify individual letters.]

We will keep your email address for up to 18 days in order to send a reminder message to you. The email will include an unsubscribe function. If activated, this function will remove your email address from our database.

ENDO

Thank you for your time. Goodbye.

PRIVACY

Please note your participation in this survey is voluntary and any information you provide is confidential. <AUPLD_HA> collects health information in accordance with the BC Freedom of Information and Privacy Protection Act, for the purpose of providing health services or any other purpose authorized under the Act. If you have any questions or concerns regarding the collection, use or disclosure of your information for this survey, please let me know and I can provide you with the

contact information for the project lead.

Any information you provide is voluntary and you can stop the interview at any time. If there are any questions you feel uncomfortable answering, please let me know and I will move on to the next one. Your decision to do the interview will not affect the health care or health care benefits you receive. Your information will be used to improve care and services in BC emergency departments. Your information will not be used to identify or contact you after your participation in the survey. The questions should take approximately 30 minutes to answer. We will NOT record this interview; however, this call may be monitored by my supervisor for Quality Control purposes.

[IF UPLD_PED=1] Please note your participation in this survey is voluntary and any information you provide is confidential. <AUPLD_HA> collects health information in accordance with the BC Freedom of Information and Privacy Protection Act, for the purpose of providing health services or any other purpose authorized under the Act. If you have any questions or concerns regarding the collection, use or disclosure of you or your child's information for this survey, please let me know and I can provide you with the contact information for the project lead.

[IF UPLD_PED=1] Any information you provide is voluntary and you can stop the interview at any time. If there are any questions you feel uncomfortable answering, please let me know and I will move on to the next one. Your decision to do the interview will not affect the health care or health care benefits you or your child receives. Your information will be used to improve care and services in BC emergency departments. Your information will not be used to identify or contact you or your child after your participation in the survey. The questions should take approximately 30 minutes to answer. We will NOT record this interview; however, this call may be monitored by my supervisor for Quality Control purposes.

ONLINE INTRODUCTION

Thank you for taking the time to log into this survey. This survey is about the care you received from <AUPLD_FAC_NAME> during your hospital stay that ended around <UPLD_DDATE>.

[IF UPLD_PED=1] Thank you for taking the time to log in to this survey. This survey is about the care your child received from < AUPLD_FAC_NAME> during their hospital stay that ended around <UPLD_DDATE>.

You have been randomly chosen from patients who were recently in an emergency department. Your opinions are very important, because the results of this survey will be used to improve the care and services provided in health care.

[IF UPLD_PED=1] Your child has been randomly chosen from patients who were recently in an emergency department. Your opinions are very important, because the results of this survey will be used to improve the care and services provided in health care.

Would you like to continue?

Yes, I consent to continue1 →SKIP TO PRIVACY
 No2 →SKIP TO ENDO

ENDO

Thank you for your time. Goodbye.

PRIVACY

Please note your participation in this survey is voluntary and any information you provide is confidential. <INSERT NAME OF HA>collects health information in accordance with the BC Freedom of Information and Privacy Protection Act, for the purpose of providing health services or any other purpose authorized under the Act.

Any information you provide is voluntary and you can stop the survey at any time. If there are any questions you feel uncomfortable answering, please continue on to the next one. Your decision to do the survey will not affect the health care or health care benefits you receive. Your information will be used to improve the care patients receive when they enter and exit hospitals in BC. Your information will not be used to identify or contact you after your participation in the survey. The questions should take approximately 30 minutes to answer.

[IF UPLD_PED=1] Any information you provide is voluntary and you can stop the survey at any time. If there are any questions you feel uncomfortable answering, please continue on to the next one. Your decision to do the interview will not affect the health care or health care benefits you or your child receives. Your information will be used to improve the care patients receive when they enter and exit hospitals in BC. Your information will not be used to identify or contact you or your child after your participation in the survey. The questions should take approximately 30 minutes to answer.

SECTION 1: SURVEY START

[SURVEYOR NOTE: IF THE PATIENT ANSWERS OUTSIDE OF THE ANSWER CATEGORIES PROVIDED, PROBE THE PATIENT BY REPEATING THE ANSWER CATEGORIES ONLY; DO NOT INTERPRET FOR THE PATIENT. DO NOT READ THE RESPONSE CATEGORY: PREFER NOT TO ANSWER. USE THE PREFER NOT TO ANSWER CATEGORY TO PROGRESS THROUGH THE SURVEY WHEN A RESPONDENT REFUSES TO ANSWER THE QUESTION.]

SURVEY INTRO

Please answer the questions in this survey about your experience at <AUPLD_FAC_NAME> that ended on <AUPLD_DDATE>. When thinking about your answers, do not include any other Emergency visits or hospital stays.

[IF UPLD_M=1] Please answer the questions in this survey about your experiences related to your stay at BC Women's Hospital that ended on <AUPLD_DDATE>.

[PROGRAMMING: PRESENT M1 IF UPLD_M=1]

M1 Was your stay at this hospital for a childbirth experience?

- 1 ... Yes
- 2 ... No

[PROGRAMMING: Skip to CAT3 if M1=2]

M22 Was this your first childbirth experience?

- 1 ... Yes
- 2 ... No
- 99... [DO NOT READ] Prefer not to answer

[PROGRAMMING: Skip to CAT3 if M1=1]

INTRO: The first set of survey questions are about your visit at the Emergency Department at <AUPLD_FAC_NAME>.

[IF UPLD_PED=1]The first set of survey questions are about your child's visit at the Emergency Department at <AUPLD_FAC_NAME>.

EDPEC1 Thinking about this visit, what was the main reason you went to the emergency department? Would you say...

[IF UPLD_PED=1] Thinking about this visit, what was the main reason your child went to the emergency department? Would you say...

- 1 ... An accident or injury
- 4 ... A new health problem NOT related to COVID-19
- 5 ... A new health problem related to COVID-19
- 3 ... An ongoing health condition or concern
- 98 ... [DO NOT READ] Don't know
- 99 ... [DO NOT READ] Prefer not to answer

**EDPEC2 For this visit, did you go to the emergency department in an ambulance?
[IF UPLD_PED=1] For this visit, did your child go to the emergency department in an ambulance?**

1 ... Yes

2 ... No

98 ... [DO NOT READ] Don't know

99 ... [DO NOT READ] Prefer not to answer

BCED2 What was the reason for your recent emergency department visit? Would you say... (Please select all that apply)

[IF UPLD_PED=1] What was the reason for your child's recent emergency department visit? Would you say... (Please select all that apply)

1 ... It was clearly an emergency.

2 ... I was told to go to the emergency department by a health professional.

[IF UPLD_PED=1] 2 ... I was told to take my child to the emergency department by a health professional.

3 ... I was told to go to the emergency department by the nurse on the HealthLink BC (8-11) line

12... I completed an online symptom checker, like the BC COVID-19 Self-Assessment Tool, and was told to call 9-1-1 or go to the nearest emergency department

4 ... There were no other options available

5 ... I did not know if my health condition was an emergency or not, but I wanted it checked out

[IF UPLD_PED=1] 5... I did not know if my child's health condition was an emergency or not, but I wanted it checked out

6 ... I did not know where else to go

7 ...I use the emergency department for all my health concerns

[IF UPLD_PED=1] 7 ... I use the emergency department for all my child's health concerns

8 ... I was waiting to see a specialist but my health condition changed

[IF UPLD_PED=1] 8 ... I was waiting to see a specialist but my child's health condition changed

9 ... I was waiting for tests, but my health condition changed

[IF UPLD_PED=1] 9 ... I was waiting for tests, but my child's health condition changed

10 ... I was waiting for tests, but was anxious to get them done sooner

11 ... Other: _____

98... [DO NOT READ] Don't know

99 ... [DO NOT READ] Prefer not to answer

BCED3 Which, if any, health services did you try to contact or access before going to the emergency department? Would you say... (Please select all that apply)

[IF UPLD_PED=1]Which,if any, health services did you try to contact or access before taking your child to the emergency department? Would you say... (Please select all that apply)

- 1 ... I did not contact any other health services
- 2 ... My primary care provider (e.g. my doctor or nurse practitioner)
- 3 ... A walk-in clinic
- 4 ... An urgent primary care centre
- 5 ... HealthLinkBC (8-1-1)
- 6 ... The BC Health Guide Handbook
- 7 ... Other: _____
- 98 ... [DO NOT READ] Don't know
- 99 ... [DO NOT READ] Prefer not to answer

VH_INTRO Virtual Health, sometimes called Telehealth, connects patients with care providers who are not in the same place. Virtual Health/Telehealth visits are scheduled like in-person appointments with a specific date, time, and place. During the COVID-19 pandemic there has been an increase in the use of Virtual Health/Telehealth visits by health care providers, including doctors and nurses.

VH1 Before going to the Emergency Department, did you have a Virtual Health/Telehealth visit for the same health concern that brought you to the ED/hospital...? (Please select the best response)

[IF UPLD_PED=1] Before going to the Emergency Department with your child, did you have a Virtual Health/Telehealth visit for the same health concern that brought your child to the ED/hospital...? (Please select the best response)

- 1 ... Yes, I had a video call from home
- 2 ... Yes, I had a video call at a hospital/health centre
- 3 ... Yes, I had a teleconference or phone visit
- 4 ... No, I did not have the equipment for a Virtual Health/Telehealth visit (e.g. computer, tablet, phone, poor cell phone service or internet coverage, high cost of data or phone plan)
>[SKIP TO CAT1]
- 5 ... No, I did not know how to use Virtual Health/Telehealth >[SKIP TO CAT1]
- 6 ... No, I was not offered Virtual Health/Telehealth visits >[SKIP TO VH8]
- 7 ... No, I was not aware of Virtual Health/Telehealth >[SKIP TO VH8]
- 8 ... No, because my health concern was an emergency >[SKIP TO VH8]
- 98 ... [DO NOT READ] Don't know >[SKIP TO VH10]
- 99 ... [DO NOT READ] Prefer not to answer >[SKIP TO VH10]

VH2 Was your Virtual Health/Telehealth visit with:

- 1 ... Your regular doctor
- 2 ... A doctor through a Virtual Health service, such as Babylon by Telus Health or WELL Health Virtual Clinic+
- 3 ... Another doctor who is not your regular doctor or a Virtual Health/Telehealth doctor
- 4 ... A registered nurse or nurse practitioner
- 7..A psychiatrist or a psychologist
- 5 ... Another care provider (such as a social worker, occupational therapist, etc.)
- 6 ... Other, please specify: _____
- 98 ... [DO NOT READ] Don't know
- 99 ... [DO NOT READ] Prefer not to answer

VH11 Was this your first Virtual Health/Telehealth visit?

- 1...Yes
- 2...No
- 98 ... [DO NOT READ] Don't know
- 99 ... [DO NOT READ] Prefer not to answer

VH3 Overall, how easy or difficult was it for you to participate in your Virtual Health/Telehealth visit?

[IF UPLD_PED=1] Overall, how easy or difficult was it for you to participate in your child's Virtual Health/Telehealth visit?

- 1 ... Very difficult
- 2 ... Difficult
- 3 ... Neither easy nor difficult
- 4 ... Easy
- 5 ... Very easy
- 98 ... [DO NOT READ] Don't know
- 99 ... [DO NOT READ] Prefer not to answer

VH4 Did you have any problems during your Virtual Health/Telehealth visit...? (Please select all that apply)

- 1 ... No, I did not have any problems
- 2 ... Yes, I had equipment problems (such as computer glitches, poor cell phone service or internet coverage)
- 3 ... Yes, I was not familiar using the technology
- 4 ... Yes, I was concerned for the privacy of my health information
- 5 ... Yes, there were not many Virtual Health/Telehealth options available
- 6 ... Other: _____
- 98 ... [DO NOT READ] Don't know
- 99 ... [DO NOT READ] Prefer not to answer

**VH5 Was the care advice you received during your Virtual Health/Telehealth visit helpful to you?
[IF UPLD_PED=1] Was the care advice you received for your child during your Virtual Health/Telehealth visit helpful to you?**

- 1 ... Very unhelpful
- 2 ... Unhelpful
- 3 ... Somewhat helpful
- 4 ... Helpful
- 5 ... Very helpful
- 98 ... [DO NOT READ] Don't know
- 99 ... [DO NOT READ] Prefer not to answer

VH6 Using any number from 0 to 10, where 0 is the worst experience possible and 10 is the best experience possible, overall, how would you rate your experience with the Virtual Health/Telehealth visit that brought you to the emergency department?

- 0 Worst experience possible
- 1
- 2
- 3
- 4
- 5
- 6
- 7
- 8
- 9
- 10 ... Best experience possible
- 98 ... [DO NOT READ] Don't know
- 99 ... [DO NOT READ] Prefer not to answer

VH7 Would you recommend Virtual Health/Telehealth visits to your friends and family?

- 1 ... Definitely no
- 2 ... Probably no
- 3 ... Probably yes
- 4 ... Definitely yes
- 98 ... [DO NOT READ] Don't know
- 99 ... [DO NOT READ] Prefer not to answer

VH8 Due to the COVID-19 pandemic more appointments with care providers (like doctors, nurse practitioners and other care providers) are being conducted by Virtual Health/Telehealth visits. Do you think Virtual Health/Telehealth visits could be a good alternative to in-person visits for you in the future?

- 1 ... Definitely no
- 2 ... Probably no
- 3 ... Probably yes
- 4 ... Definitely yes
- 98 ... [DO NOT READ] Don't know
- 99 ... [DO NOT READ] Prefer not to answer

VH9 Please tell us more about when you think Virtual Health/Telehealth visits would or would not be a good alternative to in-person visits for you?

1 ... [ENTER COMMENT]

98 ... [DO NOT READ] Don't Know

99 ... [DO NOT READ] Prefer not to answer

VH10 [IF VH1 ≠ 1 | 2 | 3] Would you use Virtual Health/Telehealth if offered to you by your care providers?

[IF VH1 = 1 | 2 | 3] Would you use Virtual Health/Telehealth again if offered to you by your care providers?

1 ... Definitely no

2 ... Probably no

3 ... Probably yes

4 ... Definitely yes

98 ... [DO NOT READ] Don't know

99 ... [DO NOT READ] Prefer not to answer

CAT1 Was your visit to the emergency department about a health concern you were treated for in the last 3 months? Would you say...

[IF UPLD_PED=1] Was your visit to the emergency department about a health concern your child were treated for in the last 3 months? Would you say...

1 ... Yes, I was treated for this same health concern in the last 3 months.

[IF UPLD_PED=1] Yes, my child was treated for this same concern in the last 3 months.

2 ... No, this was a new health concern.

98 ... [DO NOT READ] Don't know

99 ... [DO NOT READ] Prefer not to answer

[PROGRAMMING: SKIP CAT2 if CAT1 = 2 | 98 | 99]

CAT2 The last time you were treated for the same health concern, was it at...?

[IF UPLD_PED=1] The last time your child was treated about this same health concern, was it at...?

1 ... This emergency department/hospital

2 ... Another emergency department/hospital

3 ... An urgent primary care centre

4 ... My primary care provider (e.g., my doctor or nurse practitioner)

5 ... A walk-in clinic

6 ... Other: _____

98 ... [DO NOT READ] Don't know

99 ... [DO NOT READ] Prefer not to answer

[PROGRAMMING: SKIP ALL AMB Questions if EDPEC2 =2 | 98 | 99]

- AMB1** You indicated you came to the Emergency Department by ambulance. Before you left the care of the paramedics, did the paramedics explain what would happen next in your care? Would you say...
- [IF UPLD_PED=1]** Before you left the care of the paramedics, did the paramedics explain what would happen next in your child's care? Would you say...
- 1 ... Not at all
 - 2 ... Partly
 - 3 ... Quite a bit
 - 4 ... Completely
 - 77 ... I was unconscious during transport. **[PROGRAMMING: IF UPLD_PED=1, CATEGORY 77 IS NOT ASKED]**
 - 98... **[DO NOT READ]** Don't know
 - 99 ... **[DO NOT READ]** Prefer not to answer

[PROGRAMMING: add DR_SCREENINTRO if UPLD_ACU=1]

DR_SCREENINTRO: The next set of questions ask you about your emergency department experience. If you are asked a question about care that you received from nurses and doctors, please think about experiences you had in the emergency department only.

[IF UPLD_PED=1] The next set of questions ask you about your child's emergency department experience. If you are asked a question about care that your child received from nurses and doctors, please think about experiences your child had in the emergency department only.

- DR_SCREEN** Were you seen by a doctor in the Emergency Department?
- [IF UPLD_PED=1]** Was your child seen by a doctor in the Emergency Department?**[Programming: Ask this question of everyone, regardless of whether they arrived via ambulance]**
- 1 ... Yes
 - 2 ... No
 - 98 ... Don't know
 - 99 ... Prefer not to answer
- AMB2** **[IF DR_SCREEN=1 & AMB1 ≠77]**During this emergency department visit, did doctors seem up-to-date on the information you or your family gave to the paramedics? Would you say...
- 1 ... Not at all
 - 2 ... Partly
 - 3 ... Quite a bit
 - 4 ... Completely
 - 77 ... **[DO NOT READ]** I was unconscious during transport.
 - [PROGRAMMING: IF UPLD_PED=1, CATEGORY 77 IS NOT ASKED]**
 - 98 ... **[DO NOT READ]** Don't know
 - 99 ... **[DO NOT READ]** Prefer not to answer

- AMB3** [DO NOT ASK IF AMB1=77] During this emergency department visit, did nurses seem up-to-date on the information you or your family gave to paramedics? Would you say...
 [IF UPLD_PED=1] During your child's emergency department visit, did nurses seem up-to-date on the information you or your family gave to paramedics? Would you say...
 1 ... Not at all
 2... Partly
 3... Quite a bit
 4... Completely
 77... [DO NOT READ] I was unconscious during transport.
[PROGRAMMING: IF UPLD_PED=1, CATEGORY 77 IS NOT ASKED]
 98 ... [DO NOT READ] Don't know
 99 ... [DO NOT READ] Prefer not to answer
- EDPEC3** When you first arrived at the emergency department, how long was it before someone talked to you about the reason why you were there? Would you say...
 [IF UPLD_PED=1] When you first arrived at the emergency department, how long was it before someone talked to you about the reason why your child was there? Would you say...
 1 ... Less than 5 minutes
 2 ... 5 to 15 minutes
 3 ... More than 15 minutes
 98... [DO NOT READ] Don't Know
 99 ... [DO NOT READ] Prefer not to answer
- CAT3** Was your admission into the emergency department organized? Would you say...
 [IF UPLD_PED=1] Was your child's admission into the emergency department organized? Would you say...
 [IF UPLD_M=1] Was your admission into the hospital organized? Would you say...
 1 ... Not at all
 2 ... Partly
 3 ... Quite a bit
 4 ... Completely
 98 ... [DO NOT READ] Don't know
 99 ... [DO NOT READ] Prefer not to answer
- CAT4** When you arrived at the emergency department, were you kept informed about how long it would be before a nurse or doctor would see you? Would you say...
 [IF UPLD_PED=1] When you arrived in the emergency department, were you kept informed about how long it would be before a nurse or doctor would see your child? Would you say...
 [IF UPLD_M=1] When you arrived in the hospital, were you kept informed about how long it would be before a nurse or doctor would see you?...
 1 ... Yes, definitely
 2 ... Yes, somewhat
 3 ... No
 98 ... [DO NOT READ] Don't know
 99 ... [DO NOT READ] Prefer not to answer

- CAT5** When you arrived at the emergency department, were you asked if you were in pain?
 [IF UPLD_PED=1] When you arrived in the emergency department, was your child asked if they were in pain?
 [IF UPLD_M=1] When you arrived in the hospital, were you asked if you were in pain?
 1 ... Yes
 2 ... No
 98 ... [DO NOT READ] Don't know
 99 ... [DO NOT READ] Prefer not to answer
- EDPEC6** During this emergency department visit, did the doctors or nurses ask about all of the medicines you were taking? Would you say...
 [IF UPLD_PED=1] During this emergency department visit, did the doctors or nurses ask about all of the medicines your child was taking? Would you say...
 [IF UPLD_M=1] When you arrived in the hospital, did the doctors or nurses ask about all of the medicines you were taking? Would you say...
 1 ... Yes, definitely
 2 ... Yes, somewhat
 3 ... No
 98 ... [DO NOT READ] Don't know
 99 ... [DO NOT READ] Prefer not to answer
- EDPEC17** During your emergency department visit, how often did nurses listen carefully to you? Would you say...
 [IF UPLD_PED=1] During your emergency department visit, how often did your child's nurses listen carefully to you? Would you say...
 [IF UPLD_M=1] During your hospital stay, how often did nurses listen carefully to you? Would you say...
 1 ... Never
 2 ... Sometimes
 3 ... Usually
 4 ... Always
 98 ... [DO NOT READ] Don't know
 99 ... [DO NOT READ] Prefer not to answer
- EDPEC18** During this emergency department visit, how often did nurses explain things in a way that you could understand? Would you say...
 [IF UPLD_PED=1] During this emergency department visit, how often did your child's nurses explain things in a way that you could understand? Would you say...
 [IF UPLD_M=1] During your hospital stay, how often did nurses explain things in a way that you could understand? Would you say...
 1 ... Never
 2 ... Sometimes
 3 ... Usually
 4 ... Always
 98 ... [DO NOT READ] Don't know
 99 ... [DO NOT READ] Prefer not to answer

- CAT6** During this emergency department visit, how often did nurses explain what would happen next in your care? Would you say...
- [IF UPLD_PED=1] During this emergency department visit, how often did nurses explain what would happen next in your child's care? Would you say...
- [IF UPLD_M=1] During this hospital stay, how often did nurses explain what would happen next in your care? Would you say...
- 1 ... Never
 - 2 ... Sometimes
 - 3 ... Usually
 - 4 ... Always
 - 98 ... [DO NOT READ] Don't know
 - 99 ... [DO NOT READ] Prefer not to answer
- EDPEC20** [IF DR_SCREEN=1] During this emergency department visit, how often did doctors listen carefully to you? Would you say...
- [IF DR_SCREEN=1 & UPLD_PED=1] During your emergency department visit, how often did your child's doctors listen carefully to you? Would you say...
- [IF DR_SCREEN=1 & UPLD_M=1] During this hospital stay, how often did doctors listen carefully to you? Would you say...
- 1 ... Never
 - 2 ... Sometimes
 - 3 ... Usually
 - 4 ... Always
 - 98 ... [DO NOT READ] Don't know
 - 99 ... [DO NOT READ] Prefer not to answer
- EDPEC21** [IF DR_SCREEN=1] During this emergency department visit, how often did doctors explain things in a way that you could understand? Would you say...
- [IF DR_SCREEN=1 & UPLD_PED=1] During this emergency department visit, how often did your child's doctors explain things in a way that you could understand? Would you say...
- [IF DR_SCREEN=1 & UPLD_M=1] During this hospital stay, how often did doctors explain things in a way that you could understand? Would you say...
- 1 ... Never
 - 2 ... Sometimes
 - 3 ... Usually
 - 4 ... Always
 - 98 ... [DO NOT READ] Don't know
 - 99 ... [DO NOT READ] Prefer not to answer

- CAT7** [IF DR_SCREEN=1] During this emergency department visit, how often did doctors explain what would happen next in your care? Would you say...
 [IF DR_SCREEN=1 & UPLD_PED=1] During this emergency department visit, how often did your child's doctors explain what would happen next in your child's care? Would you say...
 [IF DR_SCREEN=1 & UPLD_M=1] During this hospital stay, how often did doctors explain what would happen next in your care? Would you say...
 1 ... Never
 2 ... Sometimes
 3 ... Usually
 4 ... Always
 98 ... [DO NOT READ] Don't know
 99 ... [DO NOT READ] Prefer not to answer
- CONT6** During this emergency department visit, when your nurses changed, did the next nurse seem up-to-date on your care? Would you say...
 [IF UPLD_PED=1] During this emergency department visit, when your child's nurses changed, did the next nurse seem up-to-date on your child's care? Would you say...
 [IF UPLD_M=1] During this hospital stay, when your nurses changed, did the next nurse seem up-to-date on your care? Would you say...
 1 ... Never
 2 ... Sometimes
 3 ... Usually
 4 ... Always
 77 ... [DO NOT READ] Not applicable
 98 ... [DO NOT READ] Don't know
 99 ... [DO NOT READ] Prefer not to answer
- CONT4** [IF DR_SCREEN=1] During this emergency department visit, when your doctors changed, did the next doctor seem up-to-date on your care? Would you say...
 [IF DR_SCREEN=1 & UPLD_PED=1] During this emergency department visit, when your child's doctors changed, did the next doctor seem up-to-date on your child's care? Would you say...
 [IF DR_SCREEN=1 & UPLD_M=1] During this hospital stay, when your doctors changed, did the next doctor seem up-to-date on your care? Would you say...
 1 ... Never
 2 ... Sometimes
 3 ... Usually
 4 ... Always
 77 ... [DO NOT READ] Not applicable
 98 ... [DO NOT READ] Don't know
 99 ... [DO NOT READ] Prefer not to answer

- EDPEC16** During this emergency department visit, how often did nurses treat you with courtesy and respect? Would you say...
- [IF UPLD_PED=1] During this emergency department visit, how often did your child's nurses treat you with courtesy and respect? Would you say...
- [IF UPLD_M=1] During this hospital stay, how often did nurses treat you with courtesy and respect? Would you say...
- 1 ... Never
 - 2 ... Sometimes
 - 3 ... Usually
 - 4 ... Always
 - 98 ... [DO NOT READ] Don't know
 - 99 ... [DO NOT READ] Prefer not to answer
- EDPEC19** [IF DR_SCREEN=1]During this emergency department visit, how often did doctors treat you with courtesy and respect? Would you say...
- [IF DR_SCREEN=1 & UPLD_PED=1] During this emergency department visit, how often did your child's doctors treat you with courtesy and respect? Would you say...
- [IF DR_SCREEN=1 & UPLD_M=1] During this hospital stay, how often did doctors treat you with courtesy and respect? Would you say...
- 1 ... Never
 - 2 ... Sometimes
 - 3 ... Usually
 - 4 ... Always
 - 98 ... [DO NOT READ] Don't know
 - 99 ... [DO NOT READ] Prefer not to answer

COVID3 INTRO Coronaviruses are viruses that can cause the common cold or that can cause more serious diseases. The disease caused by the new coronavirus has been named COVID-19.

COVID3 [if UPLD_ED2C=1] During your emergency department visit, did you receive information related to COVID-19 about what to do if...? Check all that apply:

[if UPLD_ACU=1] During your hospital stay, did you receive information related to COVID-19 about what to do if...? Check all that apply:

[if UPLD_PED=1 & UPLD_ED2C=1] During your child's emergency department visit, did you receive information related to COVID-19 about what to do if...? Check all that apply:

[if UPLD_PED=1 & UPLD_ACU=1] During your child's hospital stay, did you receive information related to COVID-19 about what to do if...? Check all that apply:

1 ... You think or know you have the COVID-19 virus.

[UPLD_PED=1] You think or know you or your child have the COVID-19 virus.

2 ... You have been in close contact with someone who may have the virus.

[if UPLD_PED=1] You or your child have been in close contact with someone who may have the virus.

3 ... You have travelled outside of Canada.

[IF UPLD_PED=1] You or your child have travelled outside of Canada.

4 ... You have been in physical contact with someone who has travelled outside of Canada.

[if UPLD_PED=1] You or your child have been in physical contact with someone who has travelled outside of Canada

5 ... You have some COVID-19 symptoms but have not been to an infected region or had contact with anyone who has.

[if UPLD_PED=1] You or your child have some COVID-19 symptoms but have not been to an infected region or had contact with anyone who has.

6 ... You have a chronic lung condition, a serious heart condition, are immunocompromised, or have another medical condition that is not well-controlled.

[if UPLD_PED=1] Your child has a chronic lung condition, a serious heart condition, is immunocompromised, or has another medical condition that is not well-controlled.

7.. I did not receive any information

98 ... [DO NOT READ] Don't know

99 ... [DO NOT READ] Prefer not to answer

COVID4 [if UPLD_ED2C=1] During your emergency department visit, did you feel comfortable asking your health care providers what steps were being taken to keep you from contracting COVID-19 while in the ED?

[if UPLD_ACU=1] During your hospital stay, did you feel comfortable asking your health care providers what steps were being taken to keep you from contracting COVID-19 while in the hospital?

[if UPLD_PED=1 & UPLD_ED2C=1] During your child's emergency department visit, did you feel comfortable asking their health care providers what steps were being taken to keep you and your child from contracting COVID-19 while in the ED?

[if UPLD_PED=1 & UPLD_ACU=1] During your child's hospital stay, did you feel comfortable asking their health care providers what steps were being taken to keep you and your child from contracting COVID-19 while in the hospital?

1 ... Not at all

2 ... Partly

3 ... Quite a bit

4 ... Completely

98 ... [DO NOT READ] Don't know

99 ... [DO NOT READ] Prefer not to answer

COVID1 [IF UPLD_ED2C=1] During your emergency department visit did you have confidence in the steps your health care providers were taking to keep you from contracting COVID-19 while in the ED?

[IF UPLD_ACU=1] During your hospital stay did you have confidence in the steps your health care providers were taking to keep you from contracting COVID-19 while in the hospital?

[IF UPLD_PED=1 & UPLD_ED2C=1] During your child's emergency department visit did you have confidence in the steps your child's health care providers were taking to keep your child from contracting COVID-19 while in the ED?

[IF UPLD_PED=1 & IF UPLD_ACU=1] During your child's hospital stay did you have confidence in the steps your child's health care providers were taking to keep your child from contracting COVID-19 while in the hospital?

Please answer on a scale from 0 to 10, with 0 being 'Not confident at all' and 10 being 'Extremely confident'.

0 Not confident at all

1

2

3

4

5

6

7

8

9

10 ... Extremely confident

98 ... [DO NOT READ] Don't know

99 ... [DO NOT READ] Prefer not to answer

BCED10 On a scale of 0 to 10, what was your overall experience with your emergency department visit? Please answer on a scale where 0 is “I had a very poor experience” and 10 is “I had a very good experience”. [DO NOT READ SCALE]

[IF UPLD_PED=1] On a scale of 0 to 10, what was your overall experience with your child’s emergency department visit? Please answer on a scale where 0 is “I had a very poor experience” and 10 is “I had a very good experience.” [DO NOT READ SCALE]

[IF UPLD_M=1] On a scale of 0 to 10, what was your overall experience with your hospital visit? Please answer on a scale where 0 is “I had a very poor experience” and 10 is “I had a very good experience”. [DO NOT READ SCALE]

0 ... I had a very poor experience

1

2

3

4

5

6

7

8

9

10 ... I had a very good experience

98 ... [DO NOT READ] Don’t know

99 ... [DO NOT READ] Prefer not to answer

[DO NOT ASK IF UPLD_ED2C=1 OR UPLD_M=1]

BCED10B On a scale of 0 to 10, what was your overall experience with your hospital stay once you were transferred from the emergency department? Please answer on a scale where 0 is “I had a very poor experience” and 10 is “I had a very good experience”. [DO NOT READ SCALE]

[IF UPLD_PED=1] On a scale of 0 to 10, what was your overall experience with your child’s hospital stay once he or she was transferred from the emergency department? Please answer on a scale where 0 is “I had a very poor experience” and 10 is “I had a very good experience.” [DO NOT READ SCALE]

0 ... I had a very poor experience

1

2

3

4

5

6

7

8

9

10 ... I had a very good experience

98 ... [DO NOT READ] Don’t know

99 ... [DO NOT READ] Prefer not to answer

COVID5_INTRO Cleaning one's hands is the single most important thing you, your care providers, your family members and your visitors can do to prevent infections like COVID-19. Hand cleaning includes washing with soap and water or using an alcohol-based hand rub or hand sanitizer.

COVID5 During your emergency department visit, did staff tell you about the importance of washing or cleaning your own hands?

[If UPLD_PED=1] During your child's emergency department visit, did staff tell you/your child about the importance of washing or cleaning your own hands?

1 ... Not at all

2 ... Partly

3 ... Quite a bit

4 ... Completely

98 ... [DO NOT READ] Don't know

99 ... [DO NOT READ] Prefer not to answer

COVID6 During your emergency department visit, did staff show you how to properly wash or clean your own hands?

[IF UPLD_PED=1] During your child's emergency department visit, did staff show you/your child how to properly wash or clean your own hands?

1 ...Yes

2 ...No

98 ... [DO NOT READ] Don't know

99 ... [DO NOT READ] Prefer not to answer

COVID7 During your emergency department visit, did staff tell you about products available for you to wash or clean your own hands?

[IF UPLD_PED=1] During your child's emergency department visit, did staff tell you about products available for you and your child to wash or clean your own hands?

1 ...Yes

2 ...No

98 ... [DO NOT READ] Don't know

99 ... [DO NOT READ] Prefer not to answer

COVID8 During your emergency department visit, would you have been comfortable asking your care providers if they had washed or cleaned their own hands before caring for you?

[IF UPLD_PED=1] During your child's emergency department visit, would you have been comfortable asking your care providers if they had washed or cleaned their own hands before caring for your child?

1 ... Never

2 ... Sometimes

3 ... Usually

4 ... Always

98 ... [DO NOT READ] Don't know

99 ... [DO NOT READ] Prefer not to answer

COVID9 Has the COVID-19 pandemic increased your awareness about the importance of handwashing?

- 1... Yes, definitely
- 2... Yes, somewhat
- 3... No
- 98 ... [DO NOT READ] Don't know
- 99 ... [DO NOT READ] Prefer not to answer

COVID10 Are you washing your hands more often than before the start of the COVID-19 pandemic? Would you say...?

- 1 ... Yes, definitely
- 2 ... Yes, somewhat
- 3 ... No
- 98 ... [DO NOT READ] Don't know
- 99 ... [DO NOT READ] Prefer not to answer

IV1 INTRO: Sometimes an intravenous (IV) catheter is put into a vein with a needle so patients can receive fluids or medication. The next questions ask about your experiences if you had an IV put into a vein during your emergency department visit, in the ambulance, or in the hospital.

[IF UPLD_PED=1] Sometimes an intravenous (IV) catheter is put into a vein with a needle so patients can receive fluids or medication. The next questions ask about your child's experiences if your child had an IV put into a vein during the emergency department visit, in the ambulance, or in the hospital.

[IF UPLD_M=1] Sometimes an intravenous (IV) catheter is put into a vein with a needle so patients can receive fluids or medication. The next questions ask about your experiences if you had an IV put into a vein in the hospital.

- IV1 Did you have at least one IV put into a vein while in the ambulance, during this emergency department visit or while in the hospital? (Please select all that apply)**
- [IF UPLD_PED=1] **Did your child have at least one IV put into a vein while in the ambulance, during this emergency department visit or while in the hospital? (Please select all that apply)**
- [IF UPLD_M=1] **Did you have at least one IV put into a vein during your stay in the hospital?**
- [PROGRAMMING: DO NOT ASK IF UPLD_M=1] 1 ... Yes – in the ambulance
- [PROGRAMMING: DO NOT ASK IF UPLD_M=1] 2 ... Yes – in the Emergency Department
- 3 ... Yes – in the hospital
- 4 ... No →SKIP TO M3 if UPLD_M=1 & M1=1, else SKIP to DISCHARGE QUESTIONS INTRO
- 98 ... [DO NOT READ] Don't know →SKIP TO M3 if UPLD_M=1 & M1=1, else SKIP to DISCHARGE QUESTIONS INTRO
- 99 ... [DO NOT READ] Prefer not to answer →SKIP TO M3 if UPLD_M=1 & M1=1, else SKIP to DISCHARGE QUESTIONS INTRO

- IV3** **Were you told what to expect when your IV was being put into your vein? Would you say...**
[IF UPLD_PED=1] Were you told what to expect when your child's IV was being put into his/her vein? Would you say...
- 1 ... Yes, definitely
 - 2 ... Yes, somewhat
 - 3 ... No
 - 98 ... [DO NOT READ] Don't know
 - 99 ... [DO NOT READ] Prefer not to answer

[PROGRAMMING: Use "emergency department" if UPLD_ED2C=1. Use "hospital" if UPLD_ACU=1 | UPLD_M=1].

- IV6** **[IF UPLD_ED2C=1] During this emergency department visit, did you experience any of the following problems with your IV? Would you say... (Please select all that apply)**
[IF UPLD_ACU=1] During this hospital visit, did you experience any of the following problems with your IV? Would you say... (Please select all that apply)
[IF UPLD_PED=1 & UPLD_ED2C=1] During this emergency department visit, did your child experience any of the following problems with the IV? Would you say... (Please select all that apply)
[IF UPLD_PED=1 & UPLD_ACU=1] During this hospital visit, did your child experience any of the following problems with the IV? Would you say... (Please select all that apply)
- 1 ... Pain
 - 2 ... Soreness
 - 3 ... Redness
 - 4 ... Swelling
 - 5 ... Bruising
 - 6 ... My IV fell out
 - [IF UPLD_PED=1] 6 ... My child's IV fell out
 - 77 ... I had no problems
 - [IF UPLD_PED=1] 77 ... My child had no problems
 - 98 ... [DO NOT READ] Don't know
 - 99 ... [DO NOT READ] Prefer not to answer

[PROGRAMMING: SKIP to IV9 if IV6 = 77|98|99]

- IV7** **How often did your nurses, doctors or paramedics handle problems with your IV in a timely manner? Would you say...**
[IF UPLD_PED=1] How often did your child's nurses, doctors or paramedics handle problems with your child's IV in a timely manner? Would you say...
- 1 ... Never
 - 2 ... Rarely
 - 3 ... Most of the time
 - 4 ... Always
 - 98 ... [DO NOT READ] Don't know
 - 99 ... [DO NOT READ] Prefer not to answer

IV9 When it is safe and appropriate, intravenous treatments can be provided to patients at home or in the community. In this case an IV catheter or similar IV device remains inserted in a vein when a patient returns home.

[IF UPLD_ED2C=1] Did you leave the emergency department with an IV device?

[IF UPLD_ACU=1] Did you leave the hospital with an IV device?

[IF UPLD_PED=1] When it is safe and appropriate, intravenous treatments can be provided to patients at home or in the community. In this case an IV catheter or similar IV device remains inserted in a vein when a patient returns home.

[IF UPLD_PED=1 & UPLD_ED2C=1] Did your child leave the emergency department with an IV device?

[IF UPLD_PED=1 & UPLD_ACU=1] Did your child leave the hospital with an IV device?

1 ... Yes

2 ... No

98 ... [DO NOT READ] Don't know

99 ... [DO NOT READ] Prefer not to answer

[PROGRAMMING: SKIP IV10A & IV10B if IV9 =2|98|99]

IV10AINTRO: [IF UPLD_ED2C=1] Before leaving the emergency department with an IV catheter or similar IV device, patients should be shown how to care for the IV device and should receive written instructions to take home.

[IF UPLD_ACU=1] Before leaving the hospital with an IV catheter or similar IV device, patients should be shown how to care for the IV device and should receive written instructions to take home.

[IF UPLD_PED=1 & UPLD_ED2C=1] Before leaving the emergency department with an IV catheter or similar IV device, patients should be shown how to care for the IV device and should receive written instructions to take home.

[IF UPLD_PED=1 & UPLD_ACU=1] Before leaving the hospital with an IV catheter or similar IV device, patients should be shown how to care for the IV device and should receive written instructions to take home.

IV10A [IF UPLD_ED2C=1] Before you left the emergency department, were you shown how to care for your IV device at home?

[IF UPLD_ACU=1] Before you left the hospital, were you shown how to care for your IV device at home?

[IF UPLD_PED=1 & UPLD_ED2C=1] Before you left the emergency department, were you shown how to care for your child's IV device at home?

[IF UPLD_PED=1 & UPLD_ACU=1] Before you left the hospital, were you shown how to care for your child's IV device at home?

1 ... Yes

2 ... No

98 ... [DO NOT READ] Don't know

99 ... [DO NOT READ] Prefer not to answer

- IV10B [IF UPLD_ED2C=1] Before you left the emergency department, were you given written instructions on how to care for your IV device at home?**
[IF UPLD_ACU=1] Before you left the hospital, were you given written instructions on how to care for your IV device at home?
[IF UPLD_PED=1 & UPLD_ED2C=1] Before you left the emergency department, were you given written instructions on how to care for your child's IV device at home?
[IF UPLD_PED=1 & UPLD_ACU=1] Before you left the hospital, were you given written instructions on how to care for your child's IV device at home?
- 1 ... Yes
 - 2 ... No
 - 98 ... [DO NOT READ] Don't know
 - 99 ... [DO NOT READ] Prefer not to answer

[DO NOT ASK COVID11 IF UPLD_PED=1]

COVID11_INTRO To prevent the spread of COVID-19 hospitals are limiting visits by family members and friends.

COVID11 Did the hospital staff get enough information about how you were doing to someone close to you (such as your family or a friend)?

- 1 ... Not at all
- 2 ... Partly
- 3 ... Quite a bit
- 4 ... Completely
- 5 ... I did not want or need the staff to contact my family or friends
- 98 ... [DO NOT READ] Don't know/Don't remember
- 99 ... [DO NOT READ] Prefer not to answer

[PROGRAMMING: Skip to DISCHARGE QUESTIONS INTRO if M1≠1]

M3 While in the hospital, were you given enough information about what to expect about your own physical recovery after birth?

- 1 ... Not at all
- 2 ... Partly
- 3 ... Quite a bit
- 4 ... Completely
- 98 ... [DO NOT READ] Don't know
- 99... [DO NOT READ] Prefer not to answer

M4 While in the hospital, were you given enough information about any emotional changes you might experience after birth?

- 1 ... Not at all
- 2 ... Partly
- 3 ... Quite a bit
- 4 ... Completely
- 98... [DO NOT READ] Don't know
- 99... [DO NOT READ] Prefer not to answer

M7 While in the hospital, did you get enough information about caring for your baby?

- 1 ... Not at all
- 2 ... Partly
- 3 ... Quite a bit
- 4 ... Completely
- 98 ...[DO NOT READ] Don't know
- 99... [DO NOT READ] Prefer not to answer

M10 While in the hospital, did you get enough information about bathing your baby?

- 1 ... Not at all
- 2 ... Partly
- 3 ... Quite a bit
- 4 ... Completely
- 98 ... [DO NOT READ] Don't know
- 99... [DO NOT READ] Prefer not to answer

M13 While in the hospital, did you get enough information about caring for yourself?

- 1 ... Not at all
- 2 ... Partly
- 3 ... Quite a bit
- 4... Completely
- 98 ...[DO NOT READ] Don't know
- 99... [DO NOT READ] Prefer not to answer

COVIDMAT1 Did the hospital staff talk with you about your plan of care to ensure you and your baby would remain safe while in the hospital during the COVID-19 pandemic?

- 1 ... Not at all
- 2 ... Partly
- 3 ... Quite a bit
- 4... Completely
- 98 ...[DO NOT READ] Don't know
- 99... [DO NOT READ] Prefer not to answer

DISCHARGE QUESTIONS INTRO: [IF UPLD_ED2C=1] For the following questions, we want you to think about the plans made to prepare you for leaving the emergency department.

[IF UPLD_ACU=1] For the following questions, we want you to think about the plans made to prepare you for leaving the hospital.

[IF UPLD_PED=1 & UPLD_ED2C=1] For the following questions, we want you to think about the plans made to prepare you and your child for leaving the emergency department.

[IF UPLD_PED=1 & UPLD_ACU=1] For the following questions, we want you to think about the plans made to prepare you and your child for leaving the hospital.

CAT8 [IF UPLD_ED2C=1] Before you left the emergency department, did you get a link to online information or information in writing about what symptoms or health problems to look out for after you left?

[IF UPLD_ACU=1] Before you left the hospital, did you get a link to online information or information in writing about what symptoms or health problems to look out for after you left?

[IF UPLD_PED=1 & UPLD_ED2C=1] Before you left the emergency department, did you get a link to online information or information in writing about what symptoms or health problems to look out for after your child left?

[IF UPLD_PED=1 & UPLD_ACU=1] Before you left the hospital, did you get a link to online information or information in writing about what symptoms or health problems to look out for after your child left?

1 ... Yes

2 ... No

77 ... [DO NOT READ] Not applicable

98 ... [DO NOT READ] Don't know

99 ... [DO NOT READ] Prefer not to answer

[PROGRAMMING: Skip to CONT11 if UPLD_M=1 & M1≠1]

M16 Before you left the hospital, did hospital staff tell you what symptoms to watch for in your baby?

1 ... Not at all

2 ... Partly

3 ... Quite a bit

4 ... Completely

98 ... [DO NOT READ] Don't know

99... [DO NOT READ] Prefer not to answer

CONT11 [IF UPLD_ED2C=1] Before you left the emergency department, were you told when you could resume your usual activities, such as when to go back to work or drive a car? Would you say...

[IF UPLD_ACU=1] Before you left the hospital, were you told when you could resume your usual activities, such as when to go back to work or drive a car? Would you say...

[IF UPLD_Y=1 & UPLD_ED2C=1] Before you left the emergency department, were you told when you could resume your normal activities, such as when to go back to school or play sports? Would you say...

[IF UPLD_Y=1 & UPLD_ACU=1] Before you left the hospital, were you told when you could resume your normal activities, such as when to go back to school or play sports? Would you say...

[IF UPLD_PED=1 & UPLD_ED2C=1] Before you left the emergency department, were you told when your child could resume their normal activities, such as when to go back to school or play sports? Would you say...

[IF UPLD_PED=1 & UPLD_ACU=1] Before you left the hospital, were you told when your child could resume their normal activities, such as when to go back to school or play sports? Would you say...

1 ... Not at all

2 ... Partly

3 ... Quite a bit

4 ... Completely

98 ... [DO NOT READ] Don't know

99 ... [DO NOT READ] Prefer not to answer

BCED4 [IF UPLD_ED2C=1] Before you left the emergency department, if you had any anxieties or fears about your condition or treatment, did nurses discuss them with you? Would you say...

[IF UPLD_ACU=1] Before you left the hospital, if you had any anxieties or fears about your condition or treatment, did nurses discuss them with you? Would you say...

[IF UPLD_PED=1 & UPLD_ED2C=1] Before you left the emergency department, if you had any anxieties or fears about your child's condition or treatment, did nurses discuss them with you? Would you say...

[IF UPLD_PED=1 & UPLD_ACU=1] Before you left the hospital, if you had any anxieties or fears about your child's condition or treatment, did nurses discuss them with you? Would you say...

1 ... Never

2 ... Sometimes

3 ... Usually

4 ... Always

77 ... Did not have any anxieties or fears

98 ... [DO NOT READ] Don't know

99 ... [DO NOT READ] Prefer not to answer

BCED6 [IF DRSCREEN=1 & UPLD_ED2C=1] Before you left the emergency department, if you had any anxieties or fears about your condition or treatment, did doctors discuss them with you? Would you say...

[IF DRSCREEN=1 & UPLD_ACU=1] Before you left the hospital, if you had any anxieties or fears about your condition or treatment, did doctors discuss them with you? Would you say...

[IF DRSCREEN=1 & UPLD_PED=1 & UPLD_ED2C=1] Before you left the emergency department, if you had any anxieties or fears about your child's condition or treatment, did doctors discuss them with you? Would you say...

[IF DRSCREEN=1 & UPLD_PED=1 & UPLD_ACU=1] Before you left the hospital, if you had any anxieties or fears about your child's condition or treatment, did doctors discuss them with you? Would you say...

1 ... Never

2 ... Sometimes

3 ... Usually

4 ... Always

77 ... Did not have any anxieties or fears

98 ... [DO NOT READ] Don't Know

99 ... [DO NOT READ] Prefer not to answer

CAT9 [IF UPLD_ED2C=1] Before you left the emergency department, were you told who to contact, if you had a question or were worried about your condition or treatment?

[IF UPLD_ACU=1] Before you left the hospital, were you told who to contact, if you had a question or were worried about your condition or treatment?

[IF UPLD_PED=1 & UPLD_ED2C=1] Before you left the emergency department, did you know who to contact, if you had a question or were worried about your child's condition or treatment?

[IF UPLD_PED=1 & UPLD_ACU=1] Before you left the hospital, did you know who to contact, if you had a question or were worried about your child's condition or treatment?

[PROGRAMMING: Skip to CAT10 IF UPLD_M=1 & M=1]

1 ... Yes

2 ... No

77 ... Not applicable

98 ... [DO NOT READ] Don't know

99 ... [DO NOT READ] Prefer not to answer

CAT10 [IF UPLD_ED2C=1] Before you left the emergency department, were you involved as much as you wanted in decisions about your discharge? Would you say...

[IF UPLD_ACU=1] Before you left the hospital, were you involved as much as you wanted in decisions about your discharge? Would you say...

[IF UPLD_PED=1 & UPLD_ED2C=1] Before you left the emergency department, were you involved as much as you wanted in decisions about your child's discharge? Would you say...

[IF UPLD_PED=1 & UPLD_ACU=1] Before you left the hospital, were you involved as much as you wanted in decisions about your child's discharge? Would you say...

1 ... Never

2 ... Sometimes

3 ... Usually

4 ... Always

98 ... [DO NOT READ] Don't know

99 ... [DO NOT READ] Prefer not to answer

EDPEC28 [IF UPLD_ED2C=1] Before you left the emergency department, did someone talk with you about how to treat pain after you got home?

[IF UPLD_ACU=1] Before you left the hospital, did someone talk with you about how to treat pain after you got home?

[IF UPLD_PED=1 & UPLD_ED2C=1] Before you left the emergency department, did someone talk with you about how to treat your child's pain after you got home?

[IF UPLD_PED=1 & UPLD_ACU=1] Before you left the hospital, did someone talk with you about how to treat your child's pain after you got home?

1 ... Yes

2 ... No

77 ... I did not need to treat pain after I got home.

[IF UPLD_PED=1] I did not need to treat my child's pain after we got home.

98 ... [DO NOT READ] Don't know

99 ... [DO NOT READ] Prefer not to answer

EDPEC22 [IF UPLD_ED2C=1] Before you left the emergency department, did a doctor or nurse tell you that you should take any new medicines that you had not taken before?

[IF UPLD_ACU=1] Before you left the hospital, did a doctor or nurse tell you that you should take any new medicines that you had not taken before?

[IF UPLD_PED=1 & UPLD_ED2C=1] Before you left the emergency department, did your child's doctor or nurse tell you that your child should take any new medicines that he/she had not taken before?

[IF UPLD_PED=1 & UPLD_ACU=1] Before you left the hospital, did your child's doctor or nurse tell you that your child should take any new medicines that he/she had not taken before?

1 ... Yes

2 ... No

→SKIP TO BCMEDREC2

98 ... [DO NOT READ] Don't know

→SKIP TO BCMEDREC2

99 ... [DO NOT READ] Prefer not to answer

→SKIP TO BCMEDREC2

EDPEC23 [IF UPLD_ED2C=1] Before you left the emergency department, did a doctor or nurse tell you what the new medicines were for? Would you say...

[IF UPLD_ACU=1] Before you left the hospital, did a doctor or nurse tell you what the new medicines were for? Would you say...

[IF UPLD_PED=1 & UPLD_ED2C=1] Before you left the emergency department, did a doctor or nurse tell you what the new medicines were for? Would you say...

[IF UPLD_PED=1 & UPLD_ACU=1] Before you left the hospital, did a doctor or nurse tell you what the new medicines were for? Would you say...

1 ... Yes, definitely

2 ... Yes, somewhat

3 ... No

77 ... [DO NOT READ] Not applicable

98... [DO NOT READ] Don't know

99 ... [DO NOT READ] Prefer not to answer

CAT11 [IF UPLD_ED2C=1] Before you left the emergency department, did a doctor, a nurse, or a pharmacist describe possible side effects of any new medicines in a way you could understand? Would you say...

[IF UPLD_ACU=1] Before you left the hospital, did a doctor, a nurse, or a pharmacist describe possible side effects of any new medicines in a way you could understand? Would you say...

[IF UPLD_PED=1 & UPLD_ED2C=1] Before you left the emergency department, did a doctor, or nurse, or pharmacist describe possible side effects of any new medicines for your child in a way you could understand? Would you say...

[IF UPLD_PED=1 & UPLD_ACU=1] Before you left the hospital, did a doctor, or nurse, or pharmacist describe possible side effects of any new medicines for your child in a way you could understand? Would you say...

1 ... Not at all

2 ... Partly

3 ... Quite a bit

4 ... Completely

77 ... [DO NOT READ] Not applicable

98 ... [DO NOT READ] Don't know

99 ... [DO NOT READ] Prefer not to answer

BCMEDREC2 [IF UPLD_ED2C=1] Before you left the emergency department, did you have a clear understanding about all of your prescribed medications, including those you were taking before your visit? Would you say...

[IF UPLD_ACU=1] Before you left the hospital, did you have a clear understanding about all of your prescribed medications, including those you were taking before your visit? Would you say...

[IF UPLD_PED=1 & UPLD_ED2C=1] Before you left the emergency department, did you have a clear understanding about all of your child's prescribed medications, including those your child was taking before their visit? Would you say...

[IF UPLD_PED=1 & UPLD_ACU=1] Before you left the hospital, did you have a clear understanding about all of your child's prescribed medications, including those your child was taking before their visit? Would you say...

1 ... Not at all
 2 ... Partly
 3 ... Quite a bit
 4 ... Completely
 77 ... [DO NOT READ] Not applicable
 98 ... [DO NOT READ] Don't know
 99 ... [DO NOT READ] Prefer not to answer

BCMEDREC3 [IF UPLD_ED2C=1] Before you left the emergency department, >, patients should receive information in writing about what medicines to stop, change or start taking. Was the written information you received about your medicines easy to understand? Would you say...

[IF UPLD_ACU=1] Before you left the hospital, >, patients should receive information in writing about what medicines to stop, change or start taking. Was the written information you received about your medicines easy to understand? Would you say...

[IF UPLD_PED=1 & UPLD_ED2C=1] Before you left the emergency department, parents and guardians should receive information in writing about what medicines to stop, change or start taking. Was the written information you received about your child's medicines easy to understand? Would you say...

[IF UPLD_PED=1 & UPLD_ACU=1] Before you left the hospital, parents and guardians should receive information in writing about what medicines to stop, change or start taking. Was the written information you received about your child's medicines easy to understand? Would you say...

1 ... Not at all
 2 ... Partly
 3 ... Quite a bit
 4 ... Completely
 5 ... I did not need any medicine
 [IF UPLD_PED=1] 5.. My child did not need any medicine
 6... I did not receive any written information
 77... [DO NOT READ] Not applicable
 98 ... [DO NOT READ] Don't know
 99 ... [DO NOT READ] Prefer not to answer

CAT12 [IF UPLD_ED2C=1] Before you left the emergency department, did you have a good understanding of the things that you were responsible for in managing your health? Would you say...

[IF UPLD_ACU=1] Before you left the hospital, did you have a good understanding of the things that you were responsible for in managing your health? Would you say...

[IF UPLD_PED=1 & UPLD_ED2C=1] Before you left the emergency department, did you have a good understanding of the things that you were responsible for in managing your child's health? Would you say...

[IF UPLD_PED=1 & UPLD_ACU=1] Before you left the hospital, did you have a good understanding of the things that you were responsible for in managing your child's health? Would you say...

1 ... Not at all

2 ... Partly

3... Quite a bit

4 ... Completely

77... Did not need to manage my health at home

[IF UPLD_PED=1] 77 ... Did not need to manage my child's health at home

98 ... [DO NOT READ] Don't know

99 ... [DO NOT READ] Prefer not to answer

CONT8 [IF UPLD_ED2C=1] Before you left the emergency department, did doctors, nurses, or other staff give your family or someone close to you enough information to help care for you? Would you say...

[IF UPLD_ACU=1] Before you left the hospital, did doctors, nurses, or other staff give your family or someone close to you enough information to help care for you? Would you say...

[IF UPLD_PED=1 or M=1] DO NOT ASK.

1 ... Not at all

2 ... Partly

3 ... Quite a bit

4 ... Completely

5 ... I did not want information provided to anyone

6 ... I did not need information provided to anyone

7 ... I had no family or friends involved

98 ... [DO NOT READ] Don't know

99 ... [DO NOT READ] Prefer not to answer

CPES_IC19CAT [IF UPLD_ED2C=1] Before you left the emergency department, did doctors, nurses, or other staff talk with you about whether you would have the help you needed when you went home? Would you say...

[IF UPLD_ACU=1] Before you left the hospital, did doctors, nurses, or other staff talk with you about whether you would have the help you needed when you went home? Would you say...

[IF UPLD_PED=1 & UPLD_ED2C=1] Before you left the emergency department, did doctors, nurses, or other staff talk with you about whether you would have the help your child needed when you went home? Would you say...

[IF UPLD_PED=1 & UPLD_ACU=1] Before you left the hospital, did doctors, nurses, or other staff talk with you about whether you would have the help your child needed when you went home? Would you say...

1 ... Not at all

2 ... Partly

3 ... Quite a bit

4 ... Completely

97 ... [DO NOT READ] Not applicable

98 ... [DO NOT READ] Don't know

99 ... [DO NOT READ] Prefer not to answer

OSA4 [IF UPLD_ED2C=1] Before you left the emergency department, did you receive information in writing or verbally from doctors, nurses, or other staff about services available to help you manage your care at home? Would you say...

[IF UPLD_ACU=1] Before you left the hospital, did you receive information in writing or verbally from doctors, nurses, or other staff about services available to help you manage your care at home? Would you say...

[IF UPLD_PED=1 & UPLD_ED2C=1] Before you left the emergency department, did you receive information in writing or verbally from doctors, nurses, or other staff about services available to help you manage your child's care at home? Would you say...

[IF UPLD_PED=1 & UPLD_ACU=1] Before you left the hospital, did you receive information in writing or verbally from doctors, nurses, or other staff about services available to help you manage your child's care at home? Would you say...

1 ... Not at all

2 ... Partly

3... Quite a bit

4 ... Completely

77... [DO NOT READ] Not applicable

98 ... [DO NOT READ] Don't know

99 ... [DO NOT READ] Prefer not to answer

[PROGRAMMING: Skip to M19 if UPLD_M=1 & M1=1]

EDPEC26 [IF UPLD_ED2C=1] Before you left the emergency department, did someone discuss with you whether you needed follow-up care?

[IF UPLD_ACU=1] Before you left the hospital, did someone discuss with you whether you needed follow-up care?

[IF UPLD_PED=1 & UPLD_ED2C=1] Before you left the emergency department, did someone discuss with you whether your child needed follow-up care?

[IF UPLD_PED=1 & UPLD_ACU=1] Before you left the hospital, did someone discuss with you whether your child needed follow-up care?

1 ... Yes

2 ... No

→SKIP TO CAT13

98 ... [DO NOT READ] Don't know

→SKIP TO CAT13

99 ... [DO NOT READ] Prefer not to answer

→SKIP TO CAT13

EDPEC27 [IF UPLD_ED2C=1] Before you left the emergency department, did someone ask you if you would be able to get this follow-up care?

[IF UPLD_ACU=1] Before you left the hospital, did someone ask you if you would be able to get this follow-up care?

[IF UPLD_PED=1 & UPLD_ED2C=1] Before you left the emergency department, did someone ask if your child would be able to get this follow-up care?

[IF UPLD_PED=1 & UPLD_ACU=1] Before you left the hospital, did someone ask if your child would be able to get this follow-up care?

1 ... Yes

2 ... No

98 ... [DO NOT READ] Don't know

99 ... [DO NOT READ] Prefer not to answer

CAT13 [IF UPLD_ED2C=1] Before you left the emergency department, did the staff inform you about the services you needed in the community?

[IF UPLD_ACU=1] Before you left the hospital, did the staff inform you about the services you needed in the community?

[IF UPLD_PED=1 & UPLD_ED2C=1] Before you left the emergency department, did the staff refer you to the services your child needed in the community?

[IF UPLD_PED=1 & UPLD_ACU=1] Before you left the hospital, did the staff refer you to the services your child needed in the community?

1 ... Yes

2 ... No

77 ... [DO NOT READ] Not applicable

98 ... [DO NOT READ] Don't know

99 ... [DO NOT READ] Prefer not to answer

CONT10CAT [IF UPLD_ED2C=1] Before you left the emergency department, did you get enough information from the doctors, nurses, and other staff about appointments and tests you needed after you left? Would you say...

[IF UPLD_ACU=1] Before you left the hospital, did you get enough information from the doctors, nurses, and other staff about appointments and tests you needed after you left? Would you say...

[IF UPLD_PED=1 & UPLD_ED2C=1] Before you left the emergency department, did you get enough information from the doctors, nurses, and other staff about appointments and tests your child needed after they left? Would you say...

[IF UPLD_PED=1 & UPLD_ACU=1] Before you left the hospital, did you get enough information from the doctors, nurses, and other staff about appointments and tests your child needed after they left? Would you say...

[IF UPLD_M = 1] Before you left the hospital, did you get enough information from the doctors, nurses, and other staff about appointments and tests you or your baby needed after you left? Would you say...

1 ... Not at all

2 ... Partly

3 ... Quite a bit

4 ... Completely

5 ... [IF UPLD_ED2C=1] I did not need appointments or tests after I left the emergency department

[IF UPLD_ACU=1] I did not need appointments or tests after I left the hospital

[IF UPLD_PED=1 & UPLD_ED2C=1] My child did not need appointments or tests after we left the emergency department

[IF UPLD_PED=1 & UPLD_ACU=1] My child did not need appointments or tests after we left the hospital

98 ... [DO NOT READ] Don't know

99 ... [DO NOT READ] Prefer not to answer

COVIDPD: [if UPLD_ED2C=1] Before you left the emergency department, did the staff talk with you about a plan to manage your care at home during the COVID-19 pandemic?

[if UPLD_ACU=1] Before you left the hospital, did the staff talk with you about a plan to manage your care at home during the COVID-19 pandemic?

[[if UPLD_ED2C=1 & UPLD_PED=1] Before you left the emergency department, did the staff talk with you about a plan to manage your child's care at home during the COVID-19 pandemic?

[if UPLD_ACU=1 & UPLD_PED=1] Before you left the hospital, did the staff talk with you about a plan to manage your child's care at home during the COVID-19 pandemic?

1 ... Not at all

2 ... Partly

3... Quite a bit

4 ... Completely

5... I did not require a plan to manage my care at home.

[if UPLD_PED=1] I did not require a plan to manage my child's care at home.

98 ... [DO NOT READ] Don't know

99 ... [DO NOT READ] Prefer not to answer

CAT14 [IF UPLD_ED2C=1]Before you left the emergency department, did you feel adequately prepared for your discharge? Would you say...
 [IF UPLD_ACU=1] Before you left the hospital, did you feel adequately prepared for your discharge? Would you say...
 [IF UPLD_PED=1 & UPLD_ED2C=1] Before you left the emergency department, did you feel adequately prepared for your child's discharge? Would you say...
 [IF UPLD_PED=1 & UPLD_ACU=1] Before you left the hospital, did you feel adequately prepared for your child's discharge? Would you say...
 1 ... Not at all
 2 ... Partly
 3... Quite a bit
 4 ... Completely
 98 ... [DO NOT READ] Don't know
 99 ... [DO NOT READ] Prefer not to answer

CATOPEN1 Please tell us more about the reasons why you did or did not feel adequately prepared for your discharge.
 [IF UPLD_PED=1]Please tell us more about why you did or did not feel adequately prepared for your child's discharge.
 1 ... [ENTER COMMENT]
 2 ... No
 98 ... [DO NOT READ] Don't know
 99 ... [DO NOT READ] Prefer not to answer

[PROGRAMMING: ONLY ASK PODS1 IF UPLD_UNIT=10212 | 10213]

PODS1 A Patient-Oriented Discharge Summary (PODS) provides instructions to help patients as they transition from hospital to home. How helpful did you find the Patient-Oriented Discharge Summary (PODS) you received before you left the hospital?
 1 ... Not at all
 2 ... Partly
 3 ... Quite a bit
 4 ... Completely
 5 ... I did not receive a PODS
 6 ... I do not remember if it was helpful
 98 ... [DO NOT READ] Don't know
 99 ... [DO NOT READ] Prefer not to answer

[PROGRAMMING: ONLY ASK M19 and COVIDMAT IF M1=1]

COVIDMAT2 Before you left the hospital, did the hospital staff provide you with information about what steps to take at home during the COVID-19 pandemic to keep you and your baby safe?
 1 ... Not at all
 2 ... Partly
 3 ... Quite a bit
 4 ... Completely
 98 ... [DO NOT READ] Don't know
 99 ... [DO NOT READ] Prefer not to answer

M19 When you first brought your baby home, how confident did you feel about caring for your baby? Would you say...

- 1 ... Not at all
- 2 ... Partly
- 3 ... Quite a bit
- 4 ... Completely
- 98 ... [DO NOT READ] Don't Know
- 99... [DO NOT READ] Prefer not to answer

CONT12INTRO: [IF UPLD_ED2C=1]This next set of questions asks about your experiences *after* leaving the emergency department.

[IF UPLD_ACU=1]This next set of questions asks about your experiences *after* leaving the hospital.

CONT12 [IF UPLD_ED2C=1]After you left the emergency department, did someone contact you to see how you were doing? (Please select all that apply)

[IF UPLD_ACU=1] After you left the hospital, did someone contact you to see how you were doing? (Please select all that apply)

[IF UPLD_PED=1 & UPLD_ED2C=1] After you left the emergency department, did someone contact you to see how your child was doing? (Please select all that apply)

[IF UPLD_PED=1 & UPLD_ACU=1] After you left the hospital, did someone contact you to see how your child was doing? (Please select all that apply)

1 ... Yes – someone from the hospital or emergency department

2 ... Yes – someone from my doctor's office

[IF UPLD_PED=1] 2 .. Yes – Someone from my child's doctor's office

3 ... Yes – someone else

4 ... No

98 ... [DO NOT READ] Don't know

99 ... [DO NOT READ] Prefer not to answer

CONT13 [IF UPLD_ED2C=1]After you left the emergency department, did the doctors or other staff who usually provide your medical care seem informed and up-to-date about the care you received in the emergency department? Would you say...

[IF UPLD_ACU=1] After you left the hospital, did the doctors or other staff who usually provide your medical care seem informed and up-to-date about the care you received in the hospital? Would you say...

[IF UPLD_PED=1 & UPLD_ED2C=1] After you left the emergency department, did the doctors or other staff who usually provide your child's medical care seem informed and up-to-date about the care your child received in the emergency department? Would you say...

[IF UPLD_PED=1 & UPLD_ACU=1] After you left the hospital, did the doctors or other staff who usually provide your child's medical care seem informed and up-to-date about the care your child received in the hospital? Would you say...

1 ... Not at all

2 ... Partly

3... Quite a bit

4 ... Completely

5 ... Did not need or receive care after I left the hospital

[IF UPLD_PED=1] My child did not need or receive care after we left the hospital

77 ... Do not have a place where I usually receive care

[IF UPLD_PED=1] Do not have a place where my child usually receives care

98 ... [DO NOT READ] Don't know

99 ... [DO NOT READ] Prefer not to answer

CAT15 [IF UPLD_ED2C=1] Since your return home, have you and your family been able to follow any instructions you received before you left the emergency department to help you manage your care at home? Would you say...

[IF UPLD_ACU=1] Since your return home, have you and your family been able to follow any instructions you received before you left the hospital to help you manage your care at home? Would you say...

[IF UPLD_PED=1 & UPLD_ED2C=1] Since your return home, have you and your family been able to follow any instructions you received before you left the emergency department to help you manage your child's care at home? Would you say...

[IF UPLD_PED=1 & UPLD_ACU=1] Since your return home, have you and your family been able to follow any instructions you received before you left the hospital to help you manage your child's care at home? Would you say...

1 ... Not at all

2 ... Partly

3 ... Quite a bit

4 ... Completely

77 ... **[IF UPLD_ED2C=1]** I did not need any instructions to manage my care at home after leaving the emergency department

[IF UPLD_ACU=1] I did not need any instructions to manage my care at home after leaving the hospital

[IF UPLD_PED=1 & UPLD_ED2C=1] I did not need any instructions to manage my child's care at home after leaving the emergency department

[IF UPLD_PED=1 & UPLD_ACU=1] I did not need any instructions to manage my child's care at home after leaving the hospital

78 ... **[IF UPLD_ED2C=1]** I did not receive instructions to manage my care at home before I left the emergency department

[IF UPLD_ACU=1] I did not receive instructions to manage my care at home before I left the hospital

[IF UPLD_PED=1 & UPLD_ED2C=1] I did not receive instructions to manage my child's care at home before I left the emergency department

[IF UPLD_PED=1 & UPLD_ACU=1] I did not receive instructions to manage my child's care at home before I left the hospital

98 ... [DO NOT READ] Don't know/Don't remember

99 ... [DO NOT READ] Prefer not to answer

[PROGRAMMING: SKIP CATOPEN2 if CAT15=77|78|98|99]

CATOPEN2 [IF UPLD_ED2C=1] Please tell us more about the reasons why you and your family were or were not able to follow any instructions you received before you left the emergency department to manage your care at home.

[IF UPLD_ACU=1] Please tell us more about the reasons why you and your family were or were not able to follow any instructions you received before you left the hospital to manage your care at home.

[IF UPLD_PED=1 & UPLD_ED2C=1] Please tell us more about the reasons why you were or were not able to follow any instructions you received before you left the emergency department to manage your child's care at home.

[IF UPLD_PED=1 & UPLD_ACU=1] Please tell us more about the reasons why you were or were not able to follow any instructions you received before you left the hospital to manage your child's care at home.

1 ... [ENTER COMMENT]

2 ... No

98 ... [DO NOT READ] Don't know

99 ... [DO NOT READ] Prefer not to answer

OSA5 Since your return home, do you and your family have the services you need to manage your care at home? Would you say...

[IF UPLD_PED=1] Since your return home, do you and your family have the services you need to manage your child's care at home? Would you say...

1 ... Not at all

2 ... Partly

3 ... Quite a bit

4 ... Completely

77 ... Not applicable- I did not require services

98 ... [DO NOT READ] Don't know

99 ... [DO NOT READ] Prefer not to answer

CAT16A Since your return home, do you have all the equipment and medical supplies you need to manage at home?

[IF UPLD_PED=1] Since your return home, do you have all the equipment and medical supplies your child needs to manage at home?

1 ... Yes

2 ... No

77 ... Not applicable – I did not require supplies

98 ... [DO NOT READ] Don't know

99 ... [DO NOT READ] Prefer not to answer

[PROGRAMMING: ONLY ASK CAT16B IF CAT16A=2]

CAT16B You indicated that you are missing important equipment and supplies that you need to manage at home. Why is that? (Please select all that apply)

[IF UPLD_PED=1] You indicated that you are missing important equipment and supplies that your child needs to manage at home. Why is that? (Please select all that apply)

1 ... I do not know how to obtain them

2 ... I cannot afford them

3 ... Other reasons

98 ... [DO NOT READ] Don't know

99 ... [DO NOT READ] Prefer not to answer

CSH1INTRO People living in British Columbia come from many different cultural and racial backgrounds. British Columbia's health authorities want all people to feel safe at all times when receiving health care and services.

Do you feel your care providers were respectful of your culture and traditions...

[IF UPLD_PED=1] Do you feel your child's care providers were respectful of the culture and traditions of you and your child...

		1. Not at all	2. Partly	3. Quite a bit	4. Completely	98. Don't Know	99. Prefer not to answer
CSH1 [ONLY ASK IF EDPEC2=1]	When you were being transported to the Emergency Department in the ambulance? [IF UPLD_PED=1] When your child was being transported to the Emergency Department in the ambulance?						
CSH2 [DO NOT ASK IF UPLD_M=1]	When you first arrived at the Emergency Department? [IF UPLD_PED=1] When your child first arrived at the Emergency Department?						
CSH3 [DO NOT ASK IF UPLD_M=1]	During your Emergency Department visit? [IF UPLD_PED=1] During your child's Emergency Department visit?						
CSH4 [ONLY ASK IF UPLD_ACU=1]	When you were transferred to a hospital bed or hospital unit? [IF UPLD_PED=1] When your child was transferred to a hospital bed or hospital unit?						
CSH5 [ONLY ASK IF UPLD_ACU=1]	During your hospital stay? [IF UPLD_PED=1] During your child's hospital stay?						

		1. Not at all	2. Partly	3. Quite a bit	4. Completely	98. Don't Know	99. Prefer not to answer
CSH6	[IF UPLD_ED2C=1] During your discharge from the emergency department? [IF UPLD_ACU=1] During your discharge from the hospital? [IF UPLD_PED=1 & UPLD_ED2C=1] During your child's discharge from the emergency department? [IF UPLD_PED=1 & UPLD_ACU=1] During your child's discharge from the hospital?						

- CAT17 Do you feel your care providers treated you with compassion at <AUPLD_FAC_NAME>? Would you say...**
[IF UPLD_PED=1] Do you feel your care providers treated your child with compassion at <AUPLD_FAC_NAME>? Would you say...
[IF UPLD_M =1] During this hospital stay, do you feel your care providers treated you with compassion at <AUPLD_FAC_NAME>? Would you say...
- 1 ... Not At All
 - 2 ... Partly
 - 3 ... Quite a Bit
 - 4 ... Completely
 - 98 ... [DO NOT READ] Don't know
 - 99 ... [DO NOT READ] Prefer not to answer

- EDPEC30 Would you recommend <AUPLD_FAC_NAME>, to your friends and family? Would you say...**
- 1 ... Definitely not
 - 2 ... Probably not
 - 3 ... Probably yes
 - 4 ... Definitely yes
 - 98 ... [DO NOT READ] Don't know
 - 99 ... [DO NOT READ] Prefer not to answer

BCED9 Overall, on a scale of 0 to 10, do you feel you were helped by your overall care experience at <AUPLD_FAC_NAME>? Please answer on a scale where 0 is “not helped at all” and 10 is “helped completely.” [DO NOT READ SCALE]

[IF UPLD_PED=1] Overall, on a scale of 0 to 10, do you feel your child was helped by his/her overall care experience at <AUPLD_FAC_NAME>? Please answer on a scale where 0 is “not helped at all” and 10 is “helped completely.” [DO NOT READ SCALE]

0 ... Not helped at all

1

2

3

4

5

6

7

8

9

10 ... Helped completely

98 ... [DO NOT READ] Don't know

99 ... [DO NOT READ] Prefer not to answer

COVID13_INTRO The next few questions will help us to better understand the experiences of patients during the COVID-19 pandemic.

COVID15 Before coming to the hospital, how confident were you that your local hospital could handle your care needs during the COVID-19 pandemic?

1 ... Not At All

2 ... Partly

3 ... Quite a Bit

4 ... Completely

98 ... [DO NOT READ] Don't know

99 ... [DO NOT READ] Prefer not to answer

COVID16 Has your opinion about people working in the health care sector (such as doctors, nurses, other health care staff, and medical researchers) changed as a result of the COVID-19 pandemic? Would you say, your opinion of health care workers is,

1 ... Much higher

2 ... Slightly higher

3 ... About the same

4 ... Slightly worse

5 ... Much worse

98 ... [DO NOT READ] Don't know

99 ... [DO NOT READ] Prefer not to answer

COVID17 We can all play a part in slowing the spread of COVID-19 by keeping a physical distance of 6 feet or 2 meters between each other. At this time when we cannot visit with people not in our own homes, have you been able to stay socially connected with your family and friends as much as you did before the COVID-19 pandemic?

- 1 ... Not as much as before
- 2 ... Almost as much as before
- 3 ... The same as before
- 4 ... More than before
- 98 ... [DO NOT READ] Don't know
- 99 ... [DO NOT READ] Prefer not to answer

[DO NOT ASK IF COVID17=98 OR 99]

COVID18 How are you staying socially connected with family and friends outside of your home during the COVID-19 pandemic? (check all that apply)?

- 1 ... By phone calls
- 2 ... By text messaging
- 3 ... By video calls (Facetime, Skype, Zoom)
- 4 ... By email
- 5 ... By online chat
- 6 ... Using social media
- 7 ... Other, please specify: _____
- 98 ... [DO NOT READ] Don't know
- 99 ... [DO NOT READ] Prefer not to answer

COVID13_INTRO2 News and information about the spread of COVID-19 has been coming quickly. It can be hard to remain calm given all that is going on.

COVID13 What have been your sources of information about COVID-19? Please select all that apply.

- 1 ... TV/radio
- 2 ... News websites/apps
- 3 ... Newspapers
- 4 ... Social media (such as Facebook, YouTube, Reddit, Twitter, Instagram, LinkedIn, etc)
- 5 ... Local hospital or health authority websites
- 6 ... Government websites, such as the BC Ministry of Health, the BC Centre for Disease Control, the BC COVID-19 Symptom Self-Assessment Tool
- 7 ... Primary Care provider (such as my GP, a Family doctor, Nurse Practitioner)
- 8 ... HealthLink BC (8-1-1)
- 13... The BC COVID-19 hotline (1-888-COVID19)
- 9 ... I was given information at the hospital
- 10 ... Family and/or friends
- 11 ... Other, please specify: _____
- 98 ... [DO NOT READ] Don't know
- 99 ... [DO NOT READ] Prefer not to answer

COVID14 In the past week, how often did you check for news about the COVID-19 pandemic?

- 1 ... Not at all
- 2 ... Less than once a day
- 3 ... Once a day
- 4 ... Several times a day
- 5 ... Almost constantly
- 98 ... [DO NOT READ] Don't know
- 99 ... [DO NOT READ] Prefer not to answer

[SKIP TO BCED18INTRO IF UPLD_PED=1]**COVIDMH1 Since the COVID-19 pandemic, have you felt stress, anxiety or depression which you found difficult to cope with by yourself?**

- 1 Yes, definitely
- 2 Yes, somewhat
- 3 No
- 98...(DO NOT READ) Don't know
- 99...(DO NOT READ) Prefer not to answer

[SKIP TO VR12_1 INTRO IF COVIDMH1= 3 |98|99]**COVIDMH2 When you felt stress, anxiety or depression related to the COVID-19 pandemic, were you able to find help from online resources, such as BounceBack BC or other websites supported by the BC Government? (Please select all that apply)**

- 1....Yes, I found help on the BounceBack BC website
- 2....Yes, I found help on BC Government websites
- 3....Yes, I found help from other online resources
- 4....No, I was not able to find the help I needed online
- 5....No, I did not look for online resources
- 6....No, I did not want help from online resources
- 98...(DO NOT READ) Don't know
- 99...(DO NOT READ) Prefer not to answer

[ONLY ASK COVIDMH3 IF COVIDMH2=1 |2|3]**COVIDMH3 Was the help you received from these online resources helpful to you?**

- 1 ... Very unhelpful
- 2 ... Unhelpful
- 3 ... Somewhat helpful
- 4 ... Helpful
- 5 ... Very helpful
- 98 ... [DO NOT READ] Don't know
- 99 ... [DO NOT READ] Prefer not to answer

VR12_1 INTRO: This next set of questions asks for your views about your health. How people view their health and how it relates to their health care experiences helps us improve the quality of care for all patients. If you are unsure how to answer a question, please give the best answer you can.

COVID19 Overall, how satisfied with your life are you nowadays? Please answer on a scale where 0 is “not at all” and 10 is “completely”. [DO NOT READ SCALE]

0 ... Not at all

1

2

3

4

5

6

7

8

9

10 ... Completely

98 ... [DO NOT READ] Don't know

99 ... [DO NOT READ] Prefer not to answer

VR12_1 In general, would you say your health is....?

1 ... Excellent

2 ... Very good

3 ... Good

4 ... Fair

5 ... Poor

98 ... [DO NOT READ] Don't know

99 ... [DO NOT READ] Prefer not to answer

VR12_2 INTRO: The following questions are about activities you might do during a typical day. [PHONE ONLY] As I read each item, please tell me if your health now limits you a lot, limits you a little, or not limit you at all.

[ONLINE ONLY] Does your health now limit you in these activities? If so, how much?

VR12_2 Moderate activities, such as moving a table, pushing a vacuum cleaner, bowling, or playing golf?

1 ... Yes, limited a lot

2 ... Yes, limited a little

3 ... No, not limited at all

98 ... [DO NOT READ] Don't know

99 ... [DO NOT READ] Prefer not to answer

VR12_3 Climbing several flights of stairs?

- 1 ... Yes, limited a lot
- 2 ... Yes, limited a little
- 3 ... No, not limited at all
- 98 ... [DO NOT READ] Don't know
- 99 ... [DO NOT READ] Prefer not to answer

VR12_4 INTRO: During the past week, have you had any of the following problems with your work or other regular activities as a result of your physical health?**VR12_4 Accomplished less than you would like?**

- 1 ... No, none of the time
- 2 ... Yes, a little of the time
- 3 ... Yes, some of the time
- 4 ... Yes, most of the time
- 5 ... Yes, all of the time
- 98 ... [DO NOT READ] Don't know
- 99 ... [DO NOT READ] Prefer not to answer

VR12_5 Were limited in the kind of work or other activities?

- 1 ... No, none of the time
- 2 ... Yes, a little of the time
- 3 ... Yes, some of the time
- 4 ... Yes, most of the time
- 5 ... Yes, all of the time
- 98 ... [DO NOT READ] Don't know
- 99 ... [DO NOT READ] Prefer not to answer

VR12_6 INTRO: During the past week, have you had any of the following problems with your work or other regular daily activities as a result of any emotional problems (such as feeling depressed or anxious)?**VR12_6 Accomplished less than you would like?**

- 1 ... No, none of the time
- 2 ... Yes, a little of the time
- 3 ... Yes, some of the time
- 4 ... Yes, most of the time
- 5 ... Yes, all of the time
- 98 ... [DO NOT READ] Don't know
- 99 ... [DO NOT READ] Prefer not to answer

VR12_7 Didn't do work or other activities as carefully as usual?

- 1 ... No, none of the time
- 2 ... Yes, a little of the time
- 3 ... Yes, some of the time
- 4 ... Yes, most of the time
- 5 ... Yes, all of the time
- 98 ... [DO NOT READ] Don't know
- 99 ... [DO NOT READ] Prefer not to answer

VR12_8 During the past week, how much did pain interfere with your normal work (including both work outside the home and house work)?

- 1 ... Not at all
- 2 ... A little bit
- 3 ... Moderately
- 4 ... Quite a bit
- 5 ... Extremely
- 98 ... [DO NOT READ] Don't know
- 99 ... [DO NOT READ] Prefer not to answer

VR12_9 INTRO: These questions are about how you feel and how things have been with you during the past week. For each question, please give the one answer that comes closest to the way you have been feeling.

How much of the time during the past week:

VR12_9 Have you felt calm and peaceful?

- 1 ... All of the time
- 2 ... Most of the time
- 3 ... A good bit of the time
- 4 ... Some of the time
- 5 ... A little of the time
- 6 ... None of the time
- 98 ... [DO NOT READ] Don't know
- 99 ... [DO NOT READ] Prefer not to answer

VR12_10 Did you have a lot of energy?

- 1 ... All of the time
- 2 ... Most of the time
- 3 ... A good bit of the time
- 4 ... Some of the time
- 5 ... A little of the time
- 6 ... None of the time
- 98 ... [DO NOT READ] Don't know
- 99 ... [DO NOT READ] Prefer not to answer

VR12_11 Have you felt downhearted and blue?

- 1 ... All of the time
- 2 ... Most of the time
- 3 ... A good bit of the time
- 4 ... Some of the time
- 5 ... A little of the time
- 6 ... None of the time
- 98 ... [DO NOT READ] Don't know
- 99 ... [DO NOT READ] Prefer not to answer

VR12_12 During the past week, how much of the time has your physical health or emotional problems interfered with your social activities (like visiting with friends, relatives, etc.)?

- 1 ... All of the time
- 2 ... Most of the time
- 3 ... Some of the time
- 4 ... A little of the time
- 5 ... None of the time
- 98 ... [DO NOT READ] Don't know
- 99 ... [DO NOT READ] Prefer not to answer

VR12_13 INTRO: Now we'd like to ask you some questions about how your health may have changed.**VR12_13 Compared to one year ago, how would you rate your physical health in general now?**

- 1 ... Much better
- 2 ... Slightly better
- 3 ... About the same
- 4 ... Slightly worse
- 5 ... Much worse
- 98 ... [DO NOT READ] Don't know
- 99 ... [DO NOT READ] Prefer not to answer

VR12_14 Compared to one year ago, how would you rate your emotional problems (such as feeling anxious, depressed or irritable) now?

- 1 ... Much better
- 2 ... Slightly better
- 3 ... About the same
- 4 ... Slightly worse
- 5 ... Much worse
- 98 ... [DO NOT READ] Don't know
- 99 ... [DO NOT READ] Prefer not to answer

BCED18INTRO: These last few questions are about you. This information will only be used to organize our results into groups.

[IF UPLD_PED=1] These last few questions are about your child. This information will only be used to organize our results into groups.

BCED18 What is the highest grade or level of school that you have completed?

[IF UPLD_PED=1] What is the highest grade or level of school that your child has completed?

[SURVEYOR NOTE: ACADEMIC TRAINING BEYOND A HIGH SCHOOL DIPLOMA THAT DOES NOT LEAD TO A BACHELORS DEGREE SHOULD BE CODED AS “Undergraduate degree or some university”. IF THE RESPONDENT DESCRIBES NON-ACADEMIC TRAINING, SUCH AS TRADE SCHOOL, PROBE TO FIND OUT IF S/HE HAS A HIGH SCHOOL DIPLOMA AND CODE “ High school or high school equivalency certificate”OR“ Some high school, but did not graduate”, AS APPROPRIATE.]

1 ... 8th grade or less

2 ... Some high school, but did not graduate

3 ... High school or high school equivalency certificate

[PROGRAMMING: IF UPLD_PED=1, DO NOT ASK CATEGORIES 4|5|6]

4 ... College, CEGEP or other non-university certificate or diploma

5 ... Undergraduate degree or some university

6 ... Post-graduate degree or professional designation

98 ... [DO NOT READ] Don't know

99 ... [DO NOT READ] Prefer not to answer

CPES_IC48 People living in British Columbia come from many different cultural and racial backgrounds. The following question will help us better understand the experiences of the communities we serve. Do you consider yourself to be...? (Please select all that apply)
[IF UPLD_PED=1] People living in British Columbia come from many different cultural and racial backgrounds. The following question will help us better understand the experiences of the communities we serve. Do you consider your child to be...? (Please select all that apply)

[SURVEYOR NOTE:READ OPTIONS UNTIL OPTION IS SELECTED, BUT CONTINUE TO READ ALL RACE CATEGORIES, PAUSING AT EACH RACE CATEGORY TO ALLOW THE RESPONDENT TO REPLY TO EACH RACE CATEGORY (FOR MULTI-RACIAL INDIVIDUALS).]

1 ... First Nation

2 ... Inuit

3 ... Métis

4 ... Indigenous/Aboriginal (not included above)

5 ... Arab

6 ... Black (North American, Caribbean, African, etc.)

7 ... Chinese

8 ... Filipino

9 ... Japanese

10 ...Korean

11 ... Latin American

12 ... South Asian (Indian, Pakistani, Sri Lankan, etc.)

13 ... Southeast Asian (Vietnamese, Cambodian, Malaysian, Laotian, etc.)

14 ... West Asian (Iranian, Afghan, etc.)

15 ... White (North American, European, etc.)

16 ... Other

98 ... [DO NOT READ] Don't Know

99 ... [DO NOT READ] Prefer not to answer

IF THE RESPONDENT REPLIES, “WHY ARE YOU ASKING ABOUT MY RACE? THE COLOUR OF MY SKIN?”:
 We ask this question, so we can be sure that the people we survey accurately represent the diversity of people who live in and receive healthcare in British Columbia. This question comes from the Canadian Institute for Health Information and it used in health care surveys across Canada.

IF THE RESPONDENT REPLIES, “I ALREADY TOLD YOU”:

Many people come from more than one background. So we use the same responses that are used by the Canadian Institute for Health Information. If any of the response options do not apply to you please answer no. Thank you for your patience.

[PROGRAMMING NOTE: BCED20 is to be asked only if CPES_IC48=(1 | 2 | 3 | 4). If this condition is not met then respondents should skip to CATOPEN3 INTRO].

BCED20 [IF UPLD_ED2C=1] Were you visited by an Aboriginal Patient Liaison during your emergency visit? Would you say...

[IF UPLD_ACU=1] Were you visited by an Aboriginal Patient Liaison during your hospital stay? Would you say...

[IF UPLD_PED=1 & UPLD_ED2C=1] Was your child visited by an Aboriginal Patient Liaison during his/her emergency visit? Would you say...

[IF UPLD_PED=1 & UPLD_ACU=1] Was your child visited by an Aboriginal Patient Liaison during his/her hospital stay? Would you say...

1 ... Yes

2 ... No, did not visit

→Skip to RESERV INTRO

3 ... No, but would have liked a visit

→Skip to RESERV INTRO

98 ... [DO NOT READ] Don't Know

→Skip to RESERV INTRO

99 ... [DO NOT READ] Prefer not to answer

→Skip to RESERV INTRO

BCED21 Did the visit(s) by the Aboriginal Patient Liaison help meet your needs? Would you say...

[IF UPLD_PED=1] Did the visit(s) by the Aboriginal Patient Liaison help meet your child's needs? Would you say...

1 ... Not at all

2 ... Partly

3 ... Quite a bit

4 ... Completely

98 ... [DO NOT READ] Don't Know

99 ... [DO NOT READ] Prefer not to answer

RESERV INTRO: Health services in First Nations communities are delivered by different health care providers than those outside of First Nations communities. Knowing whether people live on reserve is important for assessing how well health services are being coordinated on- and off-reserve.

RESERV When you went to the emergency department, were you living...?

[IF UPLD_PED=1] When you went to the emergency department, was your child living...?

1 ... On-reserve

2 ... Off-reserve

98 ... [DO NOT READ] Don't Know

99 ... [DO NOT READ] Prefer not to answer

CATOPEN3 INTRO:

[IF UPLD_ED2C=1] This next section allows you to provide any additional feedback you may have about any of your health care experiences during this emergency department visit.

[IF UPLD_ACU=1] This next section allows you to provide any additional feedback you may have about any of your health care experiences during this emergency department visit and admission to hospital.

[IF UPLD_PED=1 & UPLD_ED2C=1] This next section allows you to provide any additional feedback you may have on any of your child's health care experiences during this emergency department visit.

[IF UPLD_PED=1 & UPLD_ACU=1] This next section allows you to provide any additional feedback you may have on any of your child's health care experiences during this emergency department visit and admission to hospital.

CATOPEN3 [IF UPLD_ED2C=1] We are especially interested in your feedback about how well patients like you **were supported during the COVID-19 pandemic as you moved** in and out of our hospitals, including the ED. Do you have any additional feedback that you would like to provide, based on your recent experience of moving into and out of the emergency department? We welcome any comments and suggestions.

[IF UPLD_ACU=1] We are especially interested in your feedback about how well patients like you **were supported during the COVID-19 pandemic as you moved** in and out of our hospitals, including the ED. Do you have any additional feedback that you would like to provide, based on your recent experience of moving into and out of the hospital? We welcome any comments and suggestions.

[IF UPLD_PED=1 & UPLD_ED2C=1] We are especially interested in your feedback about how well patients like your child **were supported during the COVID-19 pandemic as he or she moved** in and out of our hospitals, including the ED. Do you have any additional feedback that you would like to provide, based on your recent experience of moving into and out of the emergency department? We welcome any comments and suggestions.

[IF UPLD_PED=1 & UPLD_ACU=1] We are especially interested in your feedback about how well patients like your child **were supported during the COVID-19 pandemic as he or she moved** in and out of our hospitals, including the ED. Do you have any additional feedback that you would like to provide, based on your recent experience of moving into and out of the hospital? We welcome any comments and suggestions.

1 ... [ENTER COMMENT]

2 ... No

98 ... [DO NOT READ] Don't Know

99 ... [DO NOT READ] Prefer not to answer

EPANEL1: From time to time British Columbia's health authorities conduct surveys, like this one, to ask people about their assessment of the quality and safety of the health services they have received. This information may be used for analysis, quality improvement, program evaluation, and/or research purposes. Some of the surveys are longer, some are shorter, some are conducted by phone, some by mail, some are online, and some involve interviews. Would you like to be informed about opportunities to participate in future surveys?

1 ... Yes, I am interested.

2 ... No, I am not interested.

[PROGRAMMING: IF EPANEL1=2 SKIP TO END]

EPANEL2: In order for us to contact you about future surveys, we require your contact information. Please be advised that at all times any personal information you provide to us will only be used as authorized under the BC Freedom of Information and Protection of Privacy Act. If you would like more information about the surveys conducted for the 6 health authorities in BC, please contact **Meghan Muller at (778) 628-1249 or mmuller@providencehealth.bc.ca**, or visit our website at www.bccpcm.ca

Name:

Email address:

Mailing address:

City:

Province: British Columbia

Postal Code:

Phone number:

Your age:

END

Thank you for taking the time to complete this survey. Your answers are greatly appreciated. The results will be posted on the Ministry of Health public website when the survey project is completed. [PHONE] Have a nice evening /day. Goodbye.