



## BRITISH COLUMBIA 2021 EMERGENCY DEPARTMENT PATIENT SURVEY

The Emergency Department Patient Experiences with Care (EDPEC) survey is a Patient Reported Experience Measure (PREM) designed to understand patient experiences of emergency department care. The EDPEC survey was selected as the core instrument for seeking feedback from patients who made use of BC's Emergency Health Services System, including transport by ambulance and/or a visit to one of the 109 EDs in British Columbia (BC). BC's Emergency Health Services System includes full service Emergency Departments, Urgent Care Centres, Diagnostic and Treatment Centres, and Outpost Hospitals.

The EDPEC has two versions: The EDPEC Admitted Stand Alone Instrument (ED\_ADMIT) has questions specific to patients who were admitted to the hospital following their emergency department visit (EDPEC\_IP1 and EDPEC\_IP2); the EDPEC Discharged to Community Instrument (ED\_DTC) has questions for those who were discharged directly to the community. The questions are numbered EDPEC1 to EDPEC35.

Both groups of patients also answer made-in-BC questions and modules that focus on topics of interest to clinicians and patients in BC, such as care during transport to the ED in an ambulance, discharge planning, intravenous therapy, respect for culture and traditions, and patient safety.

All patients are offered the opportunity to provide additional narrative feedback or comments at the end of the survey with an open-ended question, BCED22.

Both groups are also asked to respond to questions from Patient Reported Outcome Measures (PROMs). The **Veterans RAND 12 Item Health Survey (VR-12)** is a PROM developed from the Veterans RAND 36 Item Health Survey which was developed and modified from the original RAND version of the 36-item Health Survey version 1.0 (also known as the "MOS SF-36"). Questions VR12\_1 to VR12\_14 are the VR-12 survey. Script formatting and prompts were provided by Dr. Lewis Kazis, developer of the VR-12, for phone administration of the VR-12 and were taken from the Canadian Community Health Survey.

**"Made-in-BC" PREMS modules** added to this survey have been developed or adapted by the BC Patient-Centred Measurement Working Group (BCPCM WG). Script formatting and prompts for telephone administration were developed by the BC PCPCM WG.

- Questions **CONT1** to **CONT14** are **BC's Continuity across Transitions in Care module**. Developed and tested between 2014-16; fielded for the first time with the CPES-IC in 2016/17.
- Questions **HYGIENE1** to **HYGIENE6** are **Hand Hygiene** questions from **BC's Patient Safety module**; these questions were first developed and tested in 2008 and have been fielded in BC in 2008, and 2011/12; these questions were revalidated in 2015 with input from BC's HH Working Group.
- Questions **BCMEDREC1** to **BCMEDREC3** are **Medication Reconciliation** questions from **BC's Patient Safety module**; these questions were first developed and tested in 2008, then updated and revalidated in 2015 with input from BC's Medication Reconciliation Clinical Expert Group.
- Questions **OSA1** to **OSA5** were developed with the Office of the Seniors Advocate to explore seniors' experiences with discharge from hospital and emergency departments.

- Questions **IV1** to **IV8** were developed to explore patient experiences with intravenous vascular access with input from clinicians specializing in peripheral access with support from BD, Becton Dickinson.
- Questions **BCEHS1** to **BCEHS6** address the experience of patients who were transported to the emergency department by ambulance and were developed and tested with input from PHSA's BC Emergency Health Services.
- Questions **BCED1** to **BCED22** include global rating questions and questions that address issues of patient-centred care, such as emotional support, respect for culture and traditions, etc.
- Questions **EMN1** to **EMN16** were developed with the BC Emergency Medicine Network to ask patients for feedback about specific conditions of interest to the EMN, such as chest pain, concussion, a substance use issue, etc.
- Questions **QABED1** and **QABED2** were developed by the Health Quality Council of Alberta and are used with permission; these questions align with the international campaign, "Hello my name is" <https://hellomynameis.org.uk/>

## 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 our Emergency Departments.

[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 our Emergency Departments.

Would you like to continue?

Yes, I consent to continue .....1 →SKIP TO PRIVACY

No .....2→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 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.

[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 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.

## SECTION 1: SURVEY START

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### 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.

[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.]

INTRO: The first set of survey questions are about going to 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

**EMNQ1** Did you delay calling an ambulance or coming to the Emergency Department because you worried you might be exposed to or get COVID-19?

- 1...Yes
- 2...No
- 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      [PROGRAMMING: SKIP TO QUESTION BCED2 IF EDPEC2=1]; mark BCED1 as 5
- 2... No
- 98 ... [DO NOT READ] Don't Know
- 99 ... [DO NOT READ] Prefer not to answer

**BCED1** Why did you choose to go to the emergency department, instead of somewhere else, such as a doctor's office? Would you say... (Check all that apply)

**[IF UPLD\_PED=1] Why did you choose to take your child to the emergency department, instead of somewhere else, such as a doctor's office? Would you say... (Check all that apply)**

1 ... I (we) thought the emergency department was the best place for my medical problem.

[IF UPLD\_PED=1] 1... I (we) thought the emergency department was the best place for my child's medical problem.

2 ... I was told to go to the emergency department rather than somewhere else.

[IF UPLD\_PED=1] 2 ... I was told to take my child to the emergency department rather than somewhere else.

3 ... The emergency department was the only choice available at the time.

4... The emergency department was the most convenient place to go.

5... I was taken to the ED by ambulance.

[IF UPLD\_PED=1] 5... My child was taken to the ED by ambulance.

6 ... Other: \_\_\_\_\_

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... (Check all that apply)**

**[IF UPLD\_PED=1] What was the reason for your child's recent emergency department visit? Would you say... (Check all that apply)**

1 ... It was clearly an emergency

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

3... I was told to go to the emergency department by the nurse or doctor on the HealthLinkBC (8-1-1) line

13... I had the option for a virtual visit, but wanted to be seen in-person

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 didn't know if my health condition was an emergency or not, but I wanted it checked out

[IF UPLD\_PED=1] 5... I didn't know if my child's health condition was an emergency or not, but I wanted it checked out

6 ... I didn't 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... (Check 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... (Check all that apply)**

- 1 ... I did not contact any other health services
- 2... My doctor
- 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 visits connect patients with care providers who are not in the same place. Virtual Health visits are scheduled like in-person appointments with a specific date, time, and place.**

**VH1 Before going to the Emergency Department, did you have a Virtual Health visit for the same health concern that brought you to the ED? (Please select the best response)**  
**[IF UPLD\_PED=1] Before going to the Emergency Department with your child, did you have a Virtual Health visit for the same health concern that brought your child to the ED? (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 visit (e.g. computer, tablet, phone, poor cell phone service or internet coverage, high cost of data or phone plan) >[SKIP TO QBCEHSINTRO if EDPEC2=1; otherwise skip to EDPEC3]
- 5 ... No, I did not know how to use Virtual Health >[SKIP TO QBCEHSINTRO if EDPEC2=1; otherwise skip to EDPEC3]
- 6 ... No, I was not offered a Virtual Health visit >[SKIP TO VH8]
- 7 ... No, I was not aware of Virtual Health >[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
- 9...Your regular Nurse Practitioner (NP)
- 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 doctor
- 10...Another Nurse Practitioner who is not your regular NP
- 8 ... A doctor on the HealthLinkBC (811) line
- 4 ... A registered nurse
- 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 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 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 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 visit helpful to you?  
 [IF UPLD\_PED=1] Was the care advice you received for your child during your Virtual Health  
 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  
 visit that brought you/your child 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 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 visits. Do you think Virtual Health visits could be a good alternative to in-person visits for you/your child 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 visits would or would not be a good alternative to in-person visits for you/your child?**

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

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

**QBCEHS1INTRO:** The next questions ask about your experiences when you were transported to the Emergency Department by ambulance.

**[IF UPLD\_PED=1]** The next questions ask about your experiences when your child was transported to the Emergency Department by ambulance.

[SURVEYOR NOTE: If respondent asks “What is a paramedic?”: A: Paramedics provide emergency health care at the scene of an emergency and transport patients to hospital Emergency Departments by ambulance. Paramedics are the healthcare professionals who work in ambulances.]

PROGRAMMING NOTE: Add hover text over word ‘paramedic’ that reads: Paramedics provide emergency health care at the scene of an emergency and transport patients to hospital Emergency Departments by ambulance. Paramedics are the healthcare professionals who work in ambulances.]

**BCEHS1 Did the paramedics treat you with courtesy and respect? Would you say...**

1 ... Never

2... Rarely

3... Most of the time

4... Always

77... [DO NOT READ] I was unconscious during transport. **[PROGRAMMING: IF**

**BCEHS1=77, AUTOPOPULATE CATEGORY 77 FOR QUESTIONS BCEHS1 THROUGH BCEHS6 AND SKIP RESPONDENT TO EDPEC3]**

**[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

**BCEHS2 Did the -paramedics listen carefully to you? Would you say...**

1 ... Never

2... Rarely

3... Most of the time

4... Always

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

**BCEHS3 Did the paramedics explain things in a way you could understand? Would you say...**

1 ... Never

2... Rarely

3... Most of the time

4... Always

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

**BCEHS4 Were you comfortable talking with paramedics about your worries or concerns? Would you say...**

1 ... Never

2... Rarely

3... Most of the time

4... Always

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

**BCEHS5 Did you have confidence and trust in the paramedics treating you? Would you say...**

**[IF UPLD\_PED=1] Did you have confidence and trust in the paramedics treating your child?**

**Would you say...**

1 ... Never

2... Rarely

3... Most of the time

4... Always

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

**EMNQ3 Did the PPE (personal protective equipment) the paramedics were wearing make it hard to communicate with them?**

1 ...Yes

2 ...No

3...I don't remember

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

**AMB1 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. [DO NOT READ] I was unconscious during transport.

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

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

**AMB2 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.
- 98 ... [DO NOT READ] Don't know
- 99 ... [DO NOT READ] Prefer not to answer

**AMB3** 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.
- 98 ... [DO NOT READ] Don't know
- 99 ... [DO NOT READ] Prefer not to answer

**BCEHS6** Using any number from 0 to 10, where 0 is the worst care possible and 10 is the best care possible, what number would you use to rate your care from paramedics when you were taken to the emergency department by ambulance? [DO NOT READ SCALE]  
[IF UPLD\_PED=1] Using any number from 0 to 10, where 0 is the worst care possible and 10 is the best care possible, what number would you use to rate your child's care from paramedics when your child was taken to the emergency department by ambulance? [DO NOT READ SCALE]

- 0 ... Worst care possible
- 1
- 2
- 3
- 4
- 5
- 6
- 7
- 8
- 9
- 10 ... Best care possible
- 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

**EMNQ4: Did the PPE (personal protective equipment) the Emergency Department staff were wearing make it hard to communicate with them?**

- 1 .. Yes
- 2 ..No
- 3 ... I don't remember
- 98... [DO NOT READ] Don't Know
- 99... [DO NOT READ] Prefer not to answer

**EDPEC4 Using any number from 0 to 10, where 0 is not at all important and 10 is extremely important, when you first arrived at the emergency department, how important was it for you to get care right away? [DO NOT READ SCALE]**

**[IF UPLD\_PED=1] Using any number from 0 to 10, where 0 is not at all important and 10 is extremely important, when your child first arrived at the emergency department, how important was it for your child to get care right away? [DO NOT READ SCALE]**

- 0 ... Not at all important
- 1
- 2
- 3
- 4
- 5
- 6
- 7
- 8
- 9
- 10 ... Extremely important
- 98... [DO NOT READ] Don't Know
- 99 ... [DO NOT READ] Prefer not to answer

**EDPEC5 During this emergency department visit, did you get care within 30 minutes of getting to the emergency department?**

**[IF UPLD\_PED=1] During this emergency department visit, did your child get care within 30 minutes of getting to the emergency department?**

- 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...**

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

**EDPEC7 During this emergency department visit, were you given any medicine that you had not taken before?**

**[IF UPLD\_PED=1] During this emergency department visit, was your child given any medicine that he/she had not taken before?**

- 1 ... Yes
- 2 ... No →SKIP TO EDPEC10
- 98... [DO NOT READ] Don't Know →SKIP TO EDPEC10
- 99 ... [DO NOT READ] Prefer not to answer →SKIP TO EDPEC10

**EDPEC8 Before giving you any new medicine, did the doctors or nurses tell you what the medicine was for? Would you say...**

**[IF UPLD\_PED=1] Before giving your child any new medicine, did the doctors or nurses tell you what the medicine was for? 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

**EDPEC9 Before giving you any new medicine, did the doctors or nurses describe possible side effects to you in a way you could understand? Would you say...**

**[IF UPLD\_PED=1] Before giving your child any new medicine, did the doctors or nurses describe possible side effects to you in a way you could understand? 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

**EDPEC10 During this emergency department visit, did you have any pain?**

**[IF UPLD\_PED=1] During this emergency department visit, did your child have any pain?**

- 1 ... Yes
- 2... No →SKIP TO BCMEDREC1
- 98... [DO NOT READ] Don't Know →SKIP TO BCMEDREC1
- 99 ... [DO NOT READ] Prefer not to answer →SKIP TO BCMEDREC1

**EDPEC11** During this emergency department visit, did the doctors and nurses try to help reduce your pain? Would you say...

[IF UPLD\_PED=1] During this emergency department visit, did the doctors and nurses try to help reduce your child's pain? 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

**EDPEC12** During this emergency department visit, did you get medicine for pain?

[IF UPLD\_PED=1] During this emergency department visit, did your child get medicine for pain?

1 ... Yes

2... No

→SKIP TO BCMEDREC1

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

→SKIP TO BCMEDREC1

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

→SKIP TO BCMEDREC1

**EDPEC13** Before giving you pain medicine, did the doctors and nurses describe possible side effects in a way you could understand? Would you say...

[IF UPLD\_PED=1] Before giving your child pain medicine, did the doctors and nurses describe possible side effects in a way you could understand? 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

**BCMEDREC1** During this emergency department visit, did staff check your identification band before giving you medications, treatments, or tests? Would you say...

[IF UPLD\_PED=1] During this emergency department visit, did staff check your child's identification band before giving medications, treatments, or tests? 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

**EDPEC14** During this emergency department visit, did you have a blood test, x-ray, or any other test?

[IF UPLD\_PED=1] During this emergency department visit, did your child have a blood test, x-ray, or any other test?

1 ... Yes

2 ... No

→ SKIP TO ICS10

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

→ SKIP TO ICS10

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

→ SKIP TO ICS10

**EDPEC15** During this emergency department visit, did doctors and nurses give you as much information as you wanted about the results of these tests? Would you say...  
 [IF UPLD\_PED=1] During this emergency department visit, did doctors and nurses give you as much information as you wanted about the results of these tests? 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

**ICS10** During this emergency department visit, were you involved as much as you wanted in decisions about your care and treatment?  
 [IF UPLD\_PED=1] During this emergency department visit, were you involved as much as you wanted in decisions about your child's care and treatment?

- 1 ...Completely
- 2 ....Mostly
- 3 .... Somewhat
- 4 ... A little
- 5 ... Not at all
- 6... I was not well enough to be involved [DO NOT ASK IF UPLD\_PED=1]
- 7 ...I did not want/need to be involved.
- 98... [DO NOT READ] Don't Know
- 99 ... [DO NOT READ] Prefer not to answer

**ICS11A** During this emergency department visit, did you feel you could refuse treatment, medicine, tests or referrals?  
 [IF UPLD\_PED=1] During this emergency department visit, were you could refuse treatment, medicine, tests or referrals for your child.?

- 1 ...Definitely
- 2 ....Mostly
- 3 .... Somewhat
- 4 ... A little
- 5 ... Not at all
- 6... I was not offered treatment, medicine, tests or referrals
- [IF UPLD\_PED=1] My child was not offered treatment, medicine, or tests or referrals
- 98... [DO NOT READ] Don't Know
- 99 ... [DO NOT READ] Prefer not to answer

**QABED1 INTRO:** The next questions are about the people who took care of you during your emergency department visit.

[IF UPLD\_PED=1] The next questions are about the people who took care of your child during your emergency department visit.

**QABED1** During this emergency department visit, how often did nurses introduce themselves to you? Would you say...



**[IF UPLD\_PED=1] During this emergency department visit, how often did your child's nurses introduce themselves 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

**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...**

- 1 ... Never
- 2 ... Sometimes
- 3... Usually
- 4 ... Always
- 98 ... [DO NOT READ] Don't Know
- 99 ... [DO NOT READ] Prefer not to answer

**EDPEC17 During this emergency department visit, how often did nurses listen carefully to you? Would you say...**

**[IF UPLD\_PED=1] During this emergency department visit, how often did your child's 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 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 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

**BCED4 During this emergency department visit, 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] During this emergency department visit, 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 ...[DO NOT READ] Did not have any anxieties or fears.
- 98 ... [DO NOT READ] Don't Know
- 99 ... [DO NOT READ] Prefer not to answer

**BCED5** During this emergency department visit, when you had important questions to ask a nurse, did you get answers you could understand? Would you say...

**[IF UPLD\_PED=1]** During this emergency department visit, when you had important questions to ask your child's nurse, did you get answers you could understand? Would you say...

- 1 ... Never
- 2 ... Sometimes
- 3... Usually
- 4 ... Always
- 77 ...[DO NOT READ] Did not have any questions
- 98 ... [DO NOT READ] Don't Know
- 99 ... [DO NOT READ] Prefer not to answer

**ICS6B** During this emergency department visit, did you have trust in the nurse(s) and other care providers treating you?

**[IF UPLD\_PED=1]** During this emergency department visit, did you have trust in the nurse(s) and other care providers treating your child?

- 1... Completely
- 2 ... Mostly
- 3 ... Somewhat
- 4 ... A little
- 5 ... Not at all
- 98 ... [DO NOT READ] Don't Know
- 99 ... [DO NOT READ] Prefer not to answer

**QABED2 INTRO:** The next questions are about care received from doctors working in the Emergency Department.

**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?

- 1 ... Yes
- 2 ... No →SKIP TO COVID11\_INTRO [IF UPLD\_PED=1, SKIP TO COVID4]
- 98 ... [DO NOT READ] Don't Know →SKIP TO COVID11\_INTRO [IF UPLD\_PED=1, SKIP TO COVID4]
- 99 ... [DO NOT READ] Prefer not to answer →SKIP TO COVID11\_INTRO [IF UPLD\_PED=1, SKIP TO COVID4]

- QABED2** During this emergency department visit, how often did doctors introduce themselves to you? Would you say...  
**[IF UPLD\_PED=1]** During this emergency department visit, how often did your child's doctors introduce themselves to you? Would you say...
- 1 ... Never
  - 2 ... Sometimes
  - 3... Usually
  - 4 ... Always
  - 77 ... [DO NOT READ] Never saw a doctor during ED visit **[PROGRAMMING: IF ABED2=77, AUTOPOPULATE CATEGORY 77 EDPEC19 THROUGH ICS6A AND SKIP RESPONDENT TO EMNQ4]**
  - 98 ... [DO NOT READ] Don't Know
  - 99 ... [DO NOT READ] Prefer not to answer
- EDPEC19** During this emergency department visit, how often did doctors treat you with courtesy and respect? Would you say...  
**[IF UPLD\_PED=1]** During this emergency department visit, how often did your child's doctors treat you with courtesy and respect? Would you say...
- 1 ... Never
  - 2 ... Sometimes
  - 3... Usually
  - 4 ... Always
  - 77 ... [DO NOT READ] Never saw a doctor during ED visit
  - 98 ... [DO NOT READ] Don't Know
  - 99 ... [DO NOT READ] Prefer not to answer
- EDPEC20** During this emergency department visit, how often did doctors listen carefully to you? Would you say...  
**[IF UPLD\_PED=1]** During this emergency department visit, how often did your child's doctors listen carefully to you? Would you say...
- 1 ... Never
  - 2 ... Sometimes
  - 3... Usually
  - 4 ... Always
  - 77 ... [DO NOT READ] Never saw a doctor during ED visit
  - 98 ... [DO NOT READ] Don't Know
  - 99 ... [DO NOT READ] Prefer not to answer
- EDPEC21** During this emergency department visit, how often did doctors explain things in a way you could understand? Would you say...  
**[IF UPLD\_PED=1]** During this emergency department visit, how often did your child's doctors explain things in a way you could understand? Would you say...
- 1 ... Never
  - 2 ... Sometimes
  - 3... Usually
  - 4 ... Always
  - 77 ... [DO NOT READ] Never saw a doctor during ED visit

98 ... [DO NOT READ] Don't Know  
 99 ... [DO NOT READ] Prefer not to answer

**BCED6** During this emergency department visit, if you had any anxieties or fears about your condition or treatment, did doctors discuss them with you? Would you say...  
 [IF UPLD\_PED=1] During this emergency department visit, 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 ... [DO NOT READ] Never saw a doctor during ED visit  
 78 ...[DO NOT READ] Did not have any anxieties or fears.  
 98 ... [DO NOT READ] Don't Know  
 99 ... [DO NOT READ] Prefer not to answer

**BCED7** During this emergency department visit, when you had important questions to ask a doctor, did you get answers you could understand? Would you say...  
 [IF UPLD\_PED=1] During this emergency department visit, when you had important questions to ask your child's doctor, did you get answers you could understand? Would you say...

1 ... Never  
 2 ... Sometimes  
 3... Usually  
 4 ... Always  
 77 ... [DO NOT READ] Never saw a doctor during ED visit  
 78 ...[DO NOT READ] Did not have any questions.  
 98 ... [DO NOT READ] Don't Know  
 99 ... [DO NOT READ] Prefer not to answer

**ICS6A** During this emergency department visit, did you have trust in the doctor(s) treating you?  
 [IF UPLD\_PED=1] During this emergency department visit, did you have trust in the doctor(s) treating your child?

1... Completely  
 2 ... Mostly  
 3 ... Somewhat  
 4 ... A little  
 5 ... Not at all  
 77 ... [DO NOT READ] Never saw a doctor during ED visit  
 98 ... [DO NOT READ] Don't Know  
 99 ... [DO NOT READ] Prefer not to answer

**COVID11\_INTRO** To prevent the spread of COVID-19 hospitals are limiting visits by family members and friends.

[DO NOT ASK IF UPLD\_PED=1]

**EMNQ5: Did not being able to have a family member or friend with you in the Emergency Department negatively impact your care?**

- 1 ... Yes
- 2 ... No
- 3 ... I did not want family or friends to be involved
- 4 ... I did not have family or friends to be involved
- 77 .. Not applicable. I was able to have a family member/friend with me.
- 98 ... [DO NOT READ] Don't Know
- 99 ... [DO NOT READ] Prefer not to answer

**[DO NOT ASK IF UPLD\_PED=1]**

**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

**COVID4 [if UPLD\_TYPE=2] 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\_TYPE=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\_TYPE=2] 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\_TYPE=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\_TYPE=2] 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\_TYPE=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\_TYPE=2] 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\_TYPE=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

**[PROGRAMMING: SKIP TO CONT1INTRO IF UPLD\_TYPE=1]**

**EDPEC22 INTRO: The next questions are about your experience leaving the emergency department.**

**EDPEC22 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\_PED=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?**

- 1 ... Yes
- 2 ... No →SKIP TO EDPEC24
- 98... [DO NOT READ] Don't Know →SKIP TO EDPEC24
- 99 ... [DO NOT READ] Prefer not to answer →SKIP TO EDPEC24

**EDPEC23 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] Before your child left the emergency department, did a doctor or nurse tell you what the new medicines were for? 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

**EDPEC24** Before you left the emergency department, did a doctor or nurse give you a prescription for medicine to treat pain?

[IF UPLD\_PED=1] Before your child left the emergency department, did a doctor or nurse give your child a prescription for medicine to treat pain?

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

**EDPEC25** Before giving you the prescription for pain medicine, did a doctor or nurse describe possible side effects in a way you could understand?

[IF UPLD\_PED=1] Before giving your child the prescription for pain medicine, did a doctor or nurse describe possible side effects in a way you could understand?

1 ... Yes

2 ... No

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

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

**BCMEDREC2** 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 ED visit? Would you say...

[IF UPLD\_PED=1] Before your child 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 ED visit? Would you say...

1 ... Not at all

2 ... Partly

3 ... Quite a bit

4 ... Completely

77 ... Not applicable

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

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

**BCMEDREC3** Before leaving 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\_PED=1] Before leaving 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...

1 ... Not At All

2 ... Partly

3 ... Quite a Bit

4 ... Completely

77 ... I didn't need any medicine.

[IF UPLD\_PED=1] 77 .. My child didn't need any medicine.

6 ... I didn't receive any written information

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

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

**EDPEC26 Before you left the emergency department, did someone discuss with you whether you needed follow-up care?**

**[IF UPLD\_PED=1] Before you left the emergency department, did someone discuss with you whether your child needed follow-up care?**

1 ... Yes

2 ... No

→SKIP TO EDPEC28

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

→SKIP TO EDPEC28

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

→SKIP TO EDPEC28

**EDPEC27 Before you left the emergency department, did someone ask if you would be able to get this follow-up care?**

**[IF UPLD\_PED=1] Before you left the emergency department, 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

**EDPEC28 Before you left the emergency department, did someone talk with you about how to treat pain after you got home?**

**[IF UPLD\_PED=1] Before you left the emergency department, 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 from the emergency department

[IF UPLD\_PED=1] 77.. I did not need to treat my child's pain after we got home from the emergency department

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

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

**COVIDPD: 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?**

**[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?**

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

**[PROGRAMMING: QUESTIONS OSA1 THROUGH OSA5 ARE ONLY ACTIVATED IF UPLD\_TYPE=2]**

**[PROGRAMMING: QUESTIONS OSA1 THROUGH OSA5 ARE NOT ACTIVATED FOR UPLD\_PED=1]**

**OSA INTRO: The next questions are about Home Support services.**



- OSA1** Home Support services are provided by community health workers to help people living at home with tasks such as bathing, dressing, feeding, and taking medicines. Before this emergency department visit, were you receiving Home Support services in your home?
- 1 ... Yes
  - 2 ... No
  - 98 ... [DO NOT READ] Don't Know
  - 99 ... [DO NOT READ] Prefer not to answer
- OSA2** After you left the emergency department, did you receive Home Support services in your home?
- 1 ... Yes
  - 2 ... No
  - 98 ... [DO NOT READ] Don't Know
  - 99 ... [DO NOT READ] Prefer not to answer
- OSA3** Before you left the emergency department, did the doctors, nurses, or other staff ask you, your family, or caregiver(s) what care and services you would need when you returned home? Would you say...
- 1 ... Not At All
  - 2 ... Partly
  - 3 ... Quite a Bit
  - 4 ... Completely
  - 77 ... Not Applicable, I did not require Home Support Services.
  - 98 ... [DO NOT READ] Don't Know
  - 99 ... [DO NOT READ] Prefer not to answer
- OSA4** 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...
- 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
- OSA5** Since your return home, do you and your family have the services you need to manage 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

**[DO NOT READ]BC CONTINUITY OF CARE MODULE**

**CONT INTRO: The next set of questions is about your experiences when your care changed.**

**[IF UPLD\_PED=1] The next set of questions is about your experiences when your child's care changed.**

**[PROGRAMMING: DO NOT ASK CONT1 if DR\_SCREEN=2 |98|99]**

**CONT1 During your emergency department visit, did doctors tell you what would happen next during your care? Would you say...**

**[IF UPLD\_PED=1] During your emergency department visit, did doctors tell you what would happen next during your child's 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

**CONT2 During your emergency department visit, did nurses tell you what would happen next during your care? Would you say...**

**[IF UPLD\_PED=1] During your emergency department visit, did nurses tell you what would happen next during your child's 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

**CONT3 During your emergency department visit, did you get consistent information from your doctors, nurses and other staff? Would you say...**

**[IF UPLD\_PED=1] During your emergency department visit, did you get consistent information from your child's doctors, nurses and other staff? 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

**[PROGRAMMING: DO NOT ASK CONT4 AND CONT5 if DR\_SCREEN=2 |98|99]**

**CONT4 During your emergency department visit, when your doctors changed, did the next doctor seem up-to-date on your care? Would you say...**

**[IF UPLD\_PED=1] During your 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...**

1 ... Never

2 ... Sometimes

3 ... Usually

4 ... Always

77 ... There were no changes in the doctors treating me [PROGRAMMING: IF CONT4=77, AUTOPOPULATE CATEGORY 77 FOR CONT5 AND SKIP RESPONDENT TO CONT6]

[IF UPLD\_PED=1] 77.. There were no changes in the doctors treating my child [PROGRAMMING: IF CONT4=77, AUTOPOPULATE CATEGORY 77 FOR CONT5 AND SKIP RESPONDENT TO CONT6]

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

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

**CONT5 During your emergency department visit, when your doctors changed, did you have confidence in the care the next doctor provided? Would you say...**

**[IF UPLD\_PED=1] During your emergency department visit, when your child's doctors changed, did you have confidence in the care the next doctor provided? Would you say...**

1 ... Never

2 ... Sometimes

3 ... Usually

4 ... Always

77 ... There were no changes in the doctors treating me

[IF UPLD\_PED=1] 77.. There were no changes in the doctors treating my child

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

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

**CONT6 During your emergency department visit, when your nurses changed, did the next nurse seem up-to-date about your care? Would you say...**

**[IF UPLD\_PED=1] During your emergency department visit, when your child's nurses changed, did the next nurse seem up-to-date about your child's care? Would you say...**

1 ... Never

2 ... Sometimes

3 ... Usually

4 ... Always

77... Not Applicable

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

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

**CONT7 During your emergency department visit, when your nurses changed, did you have confidence in the care the next nurse provided? Would you say...**

**[IF UPLD\_PED=1] During your emergency department visit, when your child's nurses changed, did you have confidence in the care the next nurse provided? Would you say...**

1 ... Never

2 ... Sometimes

3 ... Usually

4 ... Always

77... Not Applicable

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

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

**[PROGRAMMING: SKIP TO CAT8 IF UPLD\_TYPE=1]**

**[PROGRAMMING: CONT8 IS NOT ASKED IF UPLD\_PED=1]**

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

- 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

**CONT9 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\_PED=1] Before you left the emergency department, did your child's doctors, nurses or other staff talk with you about whether you would have the help you needed when your child went home? 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

**CONT10 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 the emergency department? Would you say...**

**[IF UPLD\_PED=1] Before you left the emergency department, did you get enough information from your child's doctors, nurses, and other staff about appointments and tests your child needed after you left the emergency department? Would you say...**

- 1 ... Not At All
- 2 ... Partly
- 3 ... Quite a Bit
- 4 ... Completely
- 77 ... I did not need appointments or tests after I left the ED
- [IF UPLD\_PED=1] 77.. My child did not need appointments or tests after leaving the ED
- 98 ... [DO NOT READ] Don't Know
- 99 ... [DO NOT READ] Prefer not to answer

**CONT11** 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\_Y=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\_PED=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...

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

**CONT12** After you left the emergency department, did someone contact you to see how you were doing? Please select all that apply:

**[IF UPLD\_PED=1]** After you left the emergency department, 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** 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\_PED=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...

1 ... Not At All

2 ... Partly

3 ... Quite a Bit

4 ... Completely

5 ... I did not need care after I left the ED

**[IF UPLD\_PED=1]** 5 ... My child did not need care after leaving the ED

77 ... I do not have a place where I usually receive medical care

**[IF UPLD\_PED=1]** 77 ... My child does not have a place where he/she usually receives medical care

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

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

**CAT8** [IF UPLD\_TYPE=2] 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\_TYPE=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\_TYPE=2] 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\_TYPE=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

**CAT9** [IF UPLD\_TYPE=2] 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\_TYPE=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\_TYPE=2] 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\_TYPE=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

**EDPEC29INTRO:** The next questions are about your overall experience in the emergency department at <AUPLD\_FAC\_NAME>.

[IF UPLD\_PED=1] The next questions are about your child's overall experience in the emergency department at <AUPLD\_FAC\_NAME>.

**EDPEC29** Using any number from 0 to 10, where 0 is the worst care possible and 10 is the best care possible, what number would you use to rate your care during this emergency department visit? [DO NOT READ SCALE]

[IF UPLD\_PED=1] Using any number from 0 to 10, where 0 is the worst care possible and 10 is the best care possible, what number would you use to rate your child's care during this emergency department visit? [DO NOT READ SCALE]

0 ... Worst care possible

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

**EDPEC30** Would you recommend this emergency department to your friends and family? Would you say...

- 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

**BCED9** Overall, on a scale of 0 to 10, do you feel you were helped by your visit to the emergency department? 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 visit to the emergency department? 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

**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]

- 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

**BCED11** During this emergency department visit, did you find the ED was kept clean? 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: SKIP TO EDPEC31 IF UPLDTYPE=2 ]**

**EDPEC\_IP1:** This next question is about your experience leaving the emergency department.

**EDPEC\_IP1** Once you found out you would have to stay in the hospital, were you kept informed about how long it would be before you went to another part of the hospital? Would you say...

**[IF UPLD\_PED=1]** Once you found out your child would have to stay in the hospital, were you kept informed about how long it would be before your child went to another part of the hospital? 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

**EDPEC\_IP2** Before you left the emergency department, did you understand why you needed to stay in the hospital? Would you say...

**[IF UPLD\_PED=1]** Before you left the emergency department, did you understand why your child needed to stay in the hospital? 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



**EDPEC 31 INTRO:** The next questions are about your health care.

[IF UPLD\_PED=1] The next questions are about your child's health care.

**EDPEC31** In the last 6 months, how many times have you visited any emergency department to get care for yourself? Please include the emergency department visit you have been answering questions about in this survey. Would you say...

[IF UPLD\_PED=1] In the last 6 months, how many times have you visited any emergency department to get care for your child? Please include the emergency department visit you have been answering questions about in this survey. Would you say...

1 ... 1 time

2 ... 2 times

3... 3 times

4 ... 4 times

5 ... 5 to 9 times

6 ... 10 or more times

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

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

**EDPEC32** Not counting the emergency department, is there a doctor's office, clinic, or other place you usually go if you need a check-up, want advice about a health problem, or when you are sick or hurt?

[IF UPLD\_PED=1] Not counting the emergency department, is there a doctor's office, clinic, or other place you usually go if your child needs a check-up, you want advice about your child's health problem, or when your child is sick or hurt?

1 ... Yes

2 ... No

→SKIP TO IV1

98... [DO NOT READ] Don't Know ..... →SKIP TO IV1

99 ... [DO NOT READ] Prefer not to answer..... →SKIP TO IV1

**EDPEC33** How many times in the last 6 months did you visit the doctor's office, clinic, or other place to get care or advice about your health? Would you say...

[IF UPLD\_PED=1] How many times in the last 6 months did you visit the doctor's office, clinic, or other place to get care or advice about your child's health? Would you say...

1 ... None

2 ... 1 time

3... 2 times

4 ... 3 times

5 ... 4 times

6 ... 5 to 9 times

7 ... 10 or more times

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 or in the ambulance.**

**[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 or in the ambulance.**

**IV1 Did you have at least one IV put into a vein during this emergency department visit or while in the ambulance?**

**[IF UPLD\_PED=1] Did your child have at least one IV put into a vein during this emergency department visit or while in the ambulance?**

1 ... Yes

2 ... No

→SKIP TO HYGIENEINTRO

98 ... [DO NOT READ] Don't Know ..... →SKIP TO HYGIENEINTRO

99 ... [DO NOT READ] Prefer not to answer..... →SKIP TO HYGIENEINTRO

- IV2      Who put the IV(s) into your vein? Check all that apply:**  
**[IF UPLD\_PED=1]Who put the IV(s) into your child's vein? Check all that apply:**
- 1 ... One or more nurses
  - 2 ... One or more doctors
  - 3 ... One or more other staff
  - 4 ... An ambulance paramedic
  - 98 ... [DO NOT READ] Don't Know
  - 99 ... [DO NOT READ] Prefer not to answer
- 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
- IV4      When you think about the IVs you had during this emergency visit, how many times on average did the nurse, doctor or paramedic try to put an IV into your vein?**  
**[IF UPLD\_PED=1] When you think about the IVs your child had during this emergency visit, how many times on average did the nurse, doctor or paramedic try to put an IV into your child's vein?**
- 1 ... 1
  - 2 ... 2
  - 3 ... 3
  - 4 ... More than 3
  - 98 ... [DO NOT READ] Don't Know
  - 99 ... [DO NOT READ] Prefer not to answer
- IV5      After an IV was started in the Emergency Department, were you told to call a nurse if you had any problems such as pain, redness around the catheter, swelling, or blood?**  
**[IF UPLD\_PED=1]After an IV was started in the Emergency Department, were you told to call a nurse if your child had any problems such as pain, redness around the catheter, swelling, or blood?**
- 1 ... Yes
  - 2 ... No
  - 98 ... [DO NOT READ] Don't Know
  - 99 ... [DO NOT READ] Prefer not to answer



**[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\_TYPE=2] Did your child leave the emergency department with an IV device?**

**[IF UPLD\_PED=1 & UPLD\_TYPE=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\_TYPE=2] 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\_TYPE=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\_TYPE=2] 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\_TYPE=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\_TYPE=2] Before you left the emergency department, were you shown how to care for your IV device at home?**

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

**[IF UPLD\_PED=1 & UPLD\_TYPE=2] 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\_TYPE=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\_TYPE=2] Before you left the emergency department, were you given written instructions on how to care for your IV device at home?**

**[IF UPLD\_TYPE=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\_TYPE=2] 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\_TYPE=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

**HYGIENEINTRO(BC Hand Hygiene Module):** 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, including COVID-19. Hand cleaning includes washing with soap and water or using an alcohol-based hand rub or hand sanitizer.

**[IF UPLD\_PED=1]** Cleaning one's hands is the single most important thing your child, his/her care providers, his/her family members and his/her visitors can do to prevent infections, including COVID-19. Hand cleaning includes washing with soap and water or using an alcohol-based hand rub or hand sanitizer.

**HYGIENE3** During this emergency department visit, did emergency department staff tell you about the importance of washing or cleaning your own hands? Would you say...

**[IF UPLD\_PED=1]** During this emergency department visit, did your child's emergency department staff tell you about the importance of washing or cleaning your own hands?

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

**HYGIENE4** During this emergency department visit, did emergency department staff show you how to properly wash or clean your own hands? Would you say...

**[IF UPLD\_PED=1]** During this emergency department visit, did your child's emergency department staff show you how to properly wash or clean your own hands? 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

**HYGIENE6** During this emergency department visit, would you have been comfortable asking your care providers if they had washed or cleaned their hands before caring for you? Would you say...

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

**ICS17A During this emergency department visit, did you feel you were treated unfairly due to your race or cultural background? (Please select all that apply)**

**[IF UPLD\_PED=1] During this emergency department visit, did you feel you or your child were treated unfairly due to your child's race or cultural background? (Please select all that apply)**

- 1...Yes, care provider(s) talked down to me or used a rude tone  
[IF UPLD\_PED=1] Yes, care provider(s) talked down to us or used a rude tone
- 2...Yes, care provider(s) made assumptions about me, or seemed to hold stereotypes  
[IF UPLD\_PED=1] Yes, care provider(s) made assumptions about us, or seemed to hold stereotypes
- 3...Yes, care provider(s) were not respectful of my culture and traditions  
[IF UPLD\_PED=1] Yes, care provider(s) were not respectful of our culture and traditions
- 4...Yes, care provider(s) did not seem to believe me or take my concerns seriously  
[IF UPLD\_PED=1] Yes, care provider(s) did not seem to believe us or take our concerns seriously
- 5...Yes, my pain was ignored or not dealt with  
[IF UPLD\_PED=1] Yes, my child's pain was ignored or not dealt with
- 6...Yes, services were delayed or took longer for me  
[IF UPLD\_PED=1] Yes, services were delayed or took longer for us
- 7..Yes, I was denied services  
[IF UPLD\_PED=1] Yes, my child was denied services
- 8..Yes, I was treated unfairly in other ways  
[IF UPLD\_PED=1] Yes, we were treated unfairly in other ways
- 9...No, I was not treated unfairly  
[IF UPLD\_PED=1] No, we were not treated unfairly
- 98 ... [DO NOT READ] Don't Know
- 99 ... [DO NOT READ] Prefer not to answer

**ICS17B During this emergency department visit, did you feel you were treated unfairly for any of the following reasons other than your race or cultural background? (Please select all that apply)**

**[IF UPLD\_PED=1] During this emergency department visit, did you feel you or your child were treated unfairly for any of the following reasons other than your race or cultural background? (Please select all that apply)**

- 1...Your age
- 2...Your gender identity (such as non-binary)
- 3...Your sexual orientation (heterosexual, lesbian, gay, bisexual)
- 4...Your income level, or how much money you appear to have

- 5...Your physical appearance (such as clothing, weight)
- 6...Your habits (such as smoking, use of drugs or alcohol)
- 7...A mental health condition
- 8...A physical disability
- 9...Other reason, please specify:\_\_\_\_\_
- 10... I was not treated unfairly for any of these reasons
- [if UPLD\_PED=1] We were not treated unfairly for any of these reasons
- 98 ... [DO NOT READ] Don't Know
- 99 ... [DO NOT READ] Prefer not to answer

[DO NOT ASK ICS16C IF ICS17A=9 AND ICS17B=10]

**ICS16C If you felt you were treated unfairly during this emergency department visit, please tell us more about your experience and what you think could be done differently. Please remember your responses are confidential.**

**[IF UPLD\_PED=1] If you felt you or your child were treated unfairly during this emergency department visit, please tell us more about your experience and what you think could be done differently. Please remember your responses are confidential.**

- 1..Enter Comment
- 2. No comment
- 98 ... [DO NOT READ] Don't Know
- 99 ... [DO NOT READ] Prefer not to answer

**BCED12 During this emergency department visit, do you believe you or your family members suffered personal injury or harm, which resulted from a medical error or mistake? Would you say...**

**[IF UPLD\_PED=1] During this emergency department visit, do you believe your child, you or your family members suffered personal injury or harm, which resulted from a medical error or mistake? 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

**BCED13 During this emergency visit, do you feel that your care providers were respectful of your culture and traditions? Would you say...**

**[IF UPLD\_PED=1] During this emergency visit, do you feel that your child's care providers were respectful of your child's culture and traditions? 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

**BCED16 During this emergency visit, do you feel your care providers treated you with compassion?**

**Would you say...**

**[IF UPLD\_PED=1]During this emergency visit, do you feel your child's care providers treated your child with compassion? 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

**EMN1INTRO: Emergency department physicians and nurses across the province are making changes to how they provide care for patients who present with certain complaints. We would like to know if you went to the emergency department because you were experiencing any of the following (please check all that apply): [IF UPLD\_PED=1] Emergency department physicians across the province are making changes to how they provide care for patients who present with certain complaints. We would like to know if your child went to the emergency department because he/she was experiencing any of the following (please check all that apply):**

**EMN1**

- 1 ... Chest pain **[PROGRAMMING: DO NOT ASK IF UPLD\_PED=1] →ASK EMN2-EMN4**
- 2 ... A stroke that got better (also called a TIA or Transient Ischemic Attack) **[PROGRAMMING: DO NOT ASK IF UPLD\_PED=1] →ASK EMN5-EMN8**
- 3 ... An abscess? **→ASK EMN9**
- 4 ... A concussion? **→ASK EMN10**
- 5 ... Asthma **→ASK EMN11**
- 6 ... A mental health issue? **[PROGRAMMING: DO NOT ASK IF UPLD\_AGE <5] →ASK EMN12-EMN14**
- 7 ... A substance use issue? **[PROGRAMMING: DO NOT ASK IF UPLD\_PED=1] →ASK EMN15-**

**EMNQ10**

- 77... None **→SKIP TO COVID13\_INTRO**
- 98 ... [DO NOT READ] Don't Know **→SKIP TO COVID13\_INTRO**
- 99 ... [DO NOT READ] Prefer not to answer **→SKIP TO COVID13\_INTRO**

**EMN2 You indicated that you went to the emergency department for chest pain. Did the doctor you saw in the emergency department order a stress test during or after your visit to the ED?**

**Would you say...**

- 1 ...Yes, I had a stress test during my visit to the ED
- 2 ...Yes, I received a referral for a stress test that I was to have after I left the ED
- 3 ...No
- 98 ...[DO NOT READ] Don't Know
- 99 ... [DO NOT READ] Prefer not to answer

**EMN3 Before you left the emergency department, were you given a referral to see a cardiologist (heart specialist)?**

- |   |               |
|---|---------------|
| 1 ... Yes                                 | → ASK EMN4    |
| 2 ... No                                  | →NEXT SECTION |
| 98 ...[DO NOT READ] Don't Know            | →NEXT SECTION |
| 99 ... [DO NOT READ] Prefer not to answer | →NEXT SECTION |

**EMN4 Since you left the emergency department, have you seen a cardiologist (heart specialist)?**

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

**EMN5 You indicated that you went to the emergency department for a stroke that got better (also called a TIA or Transient Ischemic Attack). A carotid ultrasound checks for narrowed arteries that lead to the head and neck. Did you have the carotid ultrasound within 48 hours (2 days) of your emergency department visit?**

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

**EMN6 A computed tomography angiogram (CT Angiogram) uses an injection of iodine and CT scanning to help diagnose blood vessel diseases or conditions, such as blockages. Did you have a CT Angiogram within 48 hours (2 days) of your emergency department visit?**

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

**EMN7 Before you left the Emergency Department, were you given a prescription for Aspirin, Plavix or Brilinta to take at home? (Check all that apply)**

- 1 ...Yes, Aspirin
- 2 ...Yes, Plavix
- 3 ...Yes, Brilinta
- 4 ...No
- 98 ...[DO NOT READ] Don't Know
- 99 ... [DO NOT READ] Prefer not to answer

**EMN8 Before you left the emergency department, were you told to return to the emergency department immediately if your symptoms returned?**

1 ... Yes

2 ... No

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

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

**EMN9 You indicated that you went to the emergency department for an abscess. Before you left the emergency department, were you given a prescription for an antibiotic to take at home? [IF UPLD\_PED=1] You indicated that your child went to the emergency department for an abscess. Before your child left the emergency department, was he/she given a prescription for an antibiotic to take at home?**

1 ... Yes

2 ... No

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

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

**EMN10 You indicated that you went to the emergency department for a concussion. Before you left the emergency department, were you given instructions for how to care for yourself at home? [IF UPLD\_PED=1] You indicated that your child went to the emergency department for a concussion. Before your child left the emergency department, were you given instructions for how to care for your child at home?**

1 ... Yes

2 ... No

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

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

**EMN11 You indicated that you went to the emergency department for asthma. Before you left the emergency department, were you given a prescription for steroids or medicine to take at home? [IF UPLD\_PED=1] You indicated that your child went to the emergency department for asthma. Before your child left the emergency department, was he/she given a prescription for steroids or medicine to take at home?**

1 ... Yes

2 ... No

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

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

**EMN12 You indicated that you went to the emergency department for a mental health issue. While you were in the emergency department, did you have a mental health assessment? [IF UPLD\_PED=1] You indicated that your child went to the emergency department for a mental health issue. While your child was in the emergency department, did your child have a mental health assessment?**

1 ... Yes

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

**EMN13 Before you left the emergency department, did the doctor you saw in the ED make a referral for mental health care after discharge in the community?**

**[IF UPLD\_PED=1] Before your child left the emergency department, did the doctor your child saw in the ED make a referral for mental health care for your child after discharge?**

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

**EMN14 Before you left the emergency department, did the doctors and nurses make a plan with you for follow up in the community? Would you say...**

**[IF UPLD\_PED=1] Before your child left the emergency department, did the doctors and nurses make a plan with you for follow up in the community? 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

**EMN15 You indicated that you went to the emergency department for a substance use issue. While you were in the emergency department, were you asked about your substance use issue?**

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

**EMN16 Before you left the emergency department, were you provided with a take-home naloxone kit?**

- 1 ... Yes
- 3...No, I indicated I already had one
- 2 ... No
- 98 ...[DO NOT READ] Don't Know
- 99 ... [DO NOT READ] Prefer not to answer

**EMNQ6 While you were in the Emergency Department, were you given a prescription or any medicine for opioid use disorder?**

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

**[PROGRAMMING ONLY ASK IF EMNQ6=1]**

**EMNQ7 What prescription or medicine were you given?**

- 1 ... Suboxone (buprenorphine/naloxone)
- 2 ... Methadone
- 3 ...Kadian (sustained release morphine)
- 4 ...Other, please specify: \_\_\_\_\_
- 98 ...[DO NOT READ] Don't Know
- 99 ... [DO NOT READ] Prefer not to answer

**[PROGRAMMING ONLY ASK IF EMNQ6=1]****EMNQ8 Was this medication:**

- 1 ... a new prescription
- 2 ... a refill
- 98 ...[DO NOT READ] Don't Know
- 99 ... [DO NOT READ] Prefer not to answer

**[PROGRAMMING ONLY ASK IF EMNQ6=1]****EMNQ9 During your Emergency Department visit, were you given \_\_\_\_? (Check all that apply)**

- 1...Doses in the emergency department
- 2...A take home package
- 3..A prescription
- 98 ...[DO NOT READ] Don't Know
- 99 ... [DO NOT READ] Prefer not to answer

**[PROGRAMMING ONLY ASK IF EMNQ6=1]****EMNQ10 After you left the Emergency Department, did you end up taking this medicine?**

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

**EMNQ11 Before you left the Emergency Department, were you seen by or referred to an addiction medicine specialist?**

- 1 ... Yes, I saw an addiction specialist before I left the ED
- 2 ... Yes, I received a referral to see an addiction specialist after leaving the ED
- 3 ... No, I was not seen by an addiction specialist in the ED and I did not receive a referral
- 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

**[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. 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.

**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

**EDPEC34 In general, how would you rate your overall health? Would you say...?**

**[IF UPLD\_PED=1] In general, how would you rate your child's overall health? Would you say...**

- 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

**EDPEC35 In general, how would you rate your overall mental or emotional health?**

**[IF UPLD\_PED=1] In general, how would you rate your child's overall mental or emotional health?**

- 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

**BCED17 In general, how would you rate your overall physical health?**

**[IF UPLD\_PED=1] In general, how would you rate your child's overall physical health?**

- 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

**INTRO: 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 ... 8<sup>th</sup> 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, please specify: \_\_\_\_\_
- 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 Statistics Canada and is used for the census.

**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 in the Canadian census. If any of the response options do not apply to you please answer no. Thanks for your patience.

**[PROGRAMMING NOTE: BCED20 is to be asked only if CPESIC\_48=(1|2|3|4). If this condition is not met then respondents should skip to BCED22].**

**BCED20** Were you visited by an Aboriginal Patient Liaison during your emergency visit?

**[IF UPLD\_PED=1] Was your child visited by an Aboriginal Patient Liaison during his/her emergency visit?**

- 1 ... Yes
- 2 ... No, did not visit →Skip to BCED22
- 3 ... No, but would have liked a visit →Skip to BCED22
- 98 ... [DO NOT READ] Don't Know →Skip to BCED22
- 99 ... [DO NOT READ] Prefer not to answer →Skip to BCED22

**BCED21** Did the visit(s) by the Aboriginal Patient Liaison help meet your needs?

**[IF UPLD\_PED=1] Did the visit(s) by the Aboriginal Patient Liaison help meet your child's needs?**

- 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

**BCED22 INTRO:** This next section allows you to provide any additional feedback you may have on your ambulance or emergency department experience.

[IF UPLD\_PED=1] This next section allows you to provide any additional feedback you may have on your child's ambulance or emergency department experience.

**BCED22**What is the most important change we could make to improve patient experiences in BC Emergency Departments and ambulance services? We welcome your additional comments.

1 ... [ENTER COMMENT]

2 ... No

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

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

**PANEL\_1** 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](mailto:mmuller@providencehealth.bc.ca), or visit our website at [www.bccpc.ca](http://www.bccpc.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 Office of the BC Patient-Centred Measurement website ([www.bcpcm.ca](http://www.bcpcm.ca)) when the survey project is completed.**

**[PHONE] Have a nice evening /day. Goodbye.**