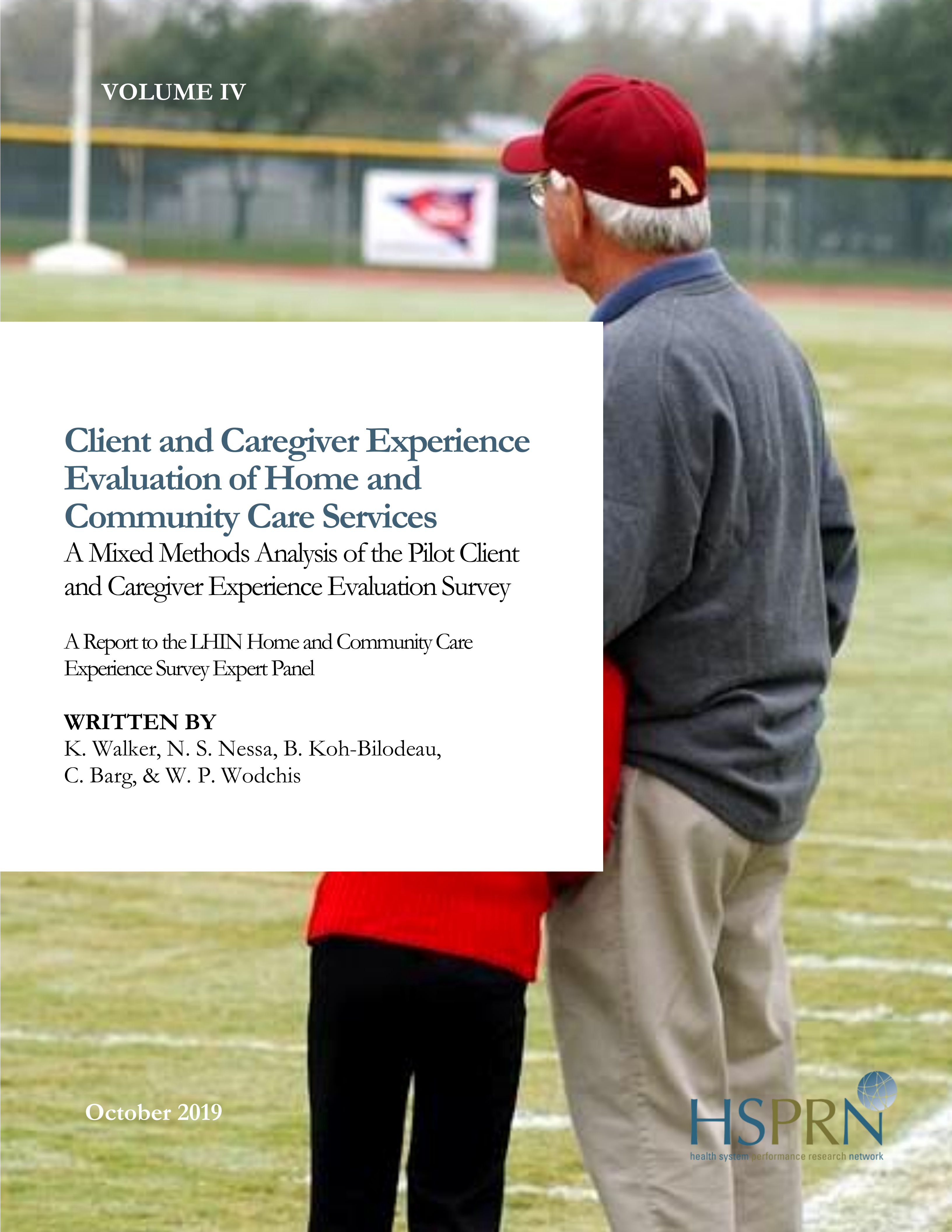

VOLUME IV

Client and Caregiver Experience Evaluation of Home and Community Care Services

A Mixed Methods Analysis of the Pilot Client and Caregiver Experience Evaluation Survey

A Report to the LHIN Home and Community Care Experience Survey Expert Panel

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Client and Caregiver Experience Evaluation of Home and Community Care Services: A Mixed Methods Analysis of the Pilot Client and Caregiver Experience Evaluation Survey

The Health System Performance Research Network (HSPRN) is a multi-university and multi-institutional network of researchers who work closely with policy and provider decision-makers to find ways to better manage the health system. HSPRN is affiliated with the Institute of Health Policy, Management and Evaluation (IHPME) at the University of Toronto and consists of scientists, visiting scholars, post-doctoral fellows, graduate students, and research associates. HSPRN is recognized for its commitment to performance measurement and quality improvement efforts to improve the health and experiences of patients in Ontario. The network has expertise in many areas of health system performance measurement, including clinical quality, financial management, and patient safety and satisfaction. Academic disciplines represented include health economics, epidemiology, finance, health informatics, health services research, nursing, organizational management, and statistics.

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Conflict of Interest

The authors have no professional or commercial interests to declare.

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CONTENTS

KEY MESSAGES

Importance of the issue

The *Aging with Confidence: Ontario's Action Plan for Seniors* report by the Ministry of Health and Long-Term Care (MOHLTC) sets out a vision for the government of Ontario to make the province "a place where seniors feel supported in living independent, healthy and active, safe and socially connected lives". In Ontario, over 90% of older adults aged 65 years and older reside in a private household and a commonly held value of older adults is to be able to live independently. The services provided by Home and Community Care (H&CC) providers play a major role in ensuring that this vision and value are achieved.

Methods

A multi-organizational partnership was established between Health Quality Ontario (HQO), Health Shared Services Ontario (HSSO), and the Health System Performance Research Network (HSPRN) to develop a new H&CC experience survey for clients and a caregiver experience survey. Surveys were developed with extensive consultation with clients and caregviers. A field test of a representative survey was conducted via three surveying modes: telephone, online, and mail-back paper surveys. Potential respondents from a sample pool of 1,800 home care clients were randomly assigned to one of the three modes.

Findings

The overall response rates to the surveys was relatively low but provided sufficient sample for aggregate testing of both the client and the caregiver surveys with more than 200 client and more than 100 caregiver respondents. The characteristics of respondents were very akin to those of the field test sample and the full provincial population of all home care clients.

Overall, the completion rates of all items in both Client and Caregiver Surveys were high and there was a substantive distribution of responses across all response categories for most items. In the new survey, the 'top box' response was generally indicated by about 25-40% of the respondent population, meaning that experiences could be improved for 60-75% of home care clients assuming our survey results are representative of client experience. These two observations suggest that the questions and response options for nearly all survey items were meaningful to respondents. The time to complete the surveys was approximately 30 minutes by telephone. Mail-out paper-based and online surveys appear to have the greatest validity and practicality for both Client and Caregiver Surveys.

Conclusion

The survey questions were well received and a range of responses indicates variability in the experience of clients and caregivers. We recommend the adoption of the survey items included as appendices to this report be used to measure the experience of clients and caregivers regarding their home care services. We recommend that these items be incorporated into broad and coordinated surveys of clients of services across the spectrum of health care services. We recommend that changes to the surveys should only be undertaken in consultation with clients and with caregivers. Conclusions presented in the quantitative and qualitative results included in this report should be considered in any changes to the survey.

ACRONYMS & ABBREVIATIONS

BIC	Bayesian information criterion
CCAC	Community Care Access Centre
CCEE	Client and Caregiver Experience Evaluation
CCM	Client Care Model
Col %	Column
DK	Don't know
DNR	Do not remember
EFA	Exploratory factor analysis
H&CC	Home and Community Care
HNHB	Hamilton Niagra Haldimand Brant
HQO	Health Quality Ontario
HSPRN	Health System Performance Network
HSSO	Health Shared Services Ontario
IQR	Interquartile range
KMO	Kaiser-Meyer-Olkin Test
LHIN	Local Health Integration Network
MRIA	Market Research and Intelligence Association
N/A	Not applicable
PNA	Prefer not to answer
PSW	Personal Support worker
SD	Standard deviation
SRC	Service Recipient Code

INTRODUCTION

As the adult population at advanced ages in Canada is rapidly increasing, the home and community care (H&CC) sector has been tasked with providing more services in people's homes as the government of Ontario wishes to make the province "a place where seniors feel supported in living independent, healthy and active, safe and socially connected lives" [1]. As over 90% of Ontario's older adults aged 65 years and over live in private households, health care delivery is trending toward home-based settings and away from institutional care to ensure independent-living for seniors [1, 2]. Informal caregivers are an integral part of ensuring said independent-living for home care clients (i.e., patients). As such, understanding the experience of clients, as well as that of their informal caregivers, is crucial for greater amelioration of the H&CC sector.

Information on the experiences of H&CC clients is currently being captured by the Client and Caregiver Experience Evaluation (CCEE) survey in Ontario [2]. The current CCEE survey is intended to inform Ontario's Local Health Integration Networks (LHIN) when managing contracts with home care service providers. Assessments of quality of care can help to identify areas of strength as well as areas of improvement as perceived by recipients of care. However, the CCEE survey's design does not strongly account for the aspects of quality of care that clients value most. Furthermore, the voices of primary informal caregivers, who dedicate their time to supporting home care clients, is not accounted for as there is only one survey intended to capture client experience. These challenges cascade down to the quality of services that are provided to clients and families, which further impacts their experience of care. Therefore, assessments of service delivery can help to identify areas of strength as well as of improvement as perceived by recipients of care and their loved ones provided that such assessments are able to capture the experience of care that is truly important for clients and caregivers.

A multi-organizational partnership was established between Health Quality Ontario (HQO), Health Shared Services Ontario (HSSO), and the Health System Performance Research Network (HSPRN) to redevelop H&CC experience surveys for clients and create a new survey entirely dedicated to capturing caregivers' experience. HSPRN has specifically been tasked with performing the following:

1. Environmental scan and rapid literature review of existing client and caregiver experience measures in the H&CC sector;
2. Quantitative and qualitative analyses of the existing CCEE survey;
3. Development of revised home care Client and Caregiver Surveys through engagement sessions with clients and caregivers; and
4. Field test of newly created surveys and the subsequent quantitative and qualitative analyses of them.

This report presents the findings from the quantitative and qualitative (also known as mixed methods) evaluation of the field tested home care Client and Caregiver Surveys.

The first section briefly describes the development process of the Client and Caregiver Survey tools and their features and questions. The second describes the field testing methodology including sampling, and survey administration. The third section highlights the completion rate of the survey and the distribution of responses to questions as well as characteristics of survey respondents. Next, the performance of the surveys is measured and the identification of domains that are currently being measured by the survey are presented through exploratory factor analysis (EFA). After the quantitative analyses, qualitative analyses of the open-ended comments were conducted provided by clients and caregivers from which insights were drawn on those aspects of the care experience that are not already captured by questions on the surveys. Finally, recommendations are made based on these field test results.

DESCRIPTION OF THE HOME CARE CLIENT AND CAREGIVER SURVEYS

Development of the Home Care Client and Caregiver Surveys

The findings from Shearkhani *et al.*'s environmental scan and rapid literature review of existing client and caregiver experience measures in the H&CC sector yielded five domains: Quality of Care, Communication/ Information, Client Involvement, Support, and Preparedness/Willingness to provide care, with the latter two being domains specific to caregivers [1]. This, in conjunction with the client and caregiver engagement sessions lead by Kuluski *et al.* provided the foundation for the development of the home care surveys [3].

Through a series of engagement sessions across Ontario in both French and English with 28 clients and caregivers, a body of qualitative data regarding what components of home care matters most to clients and caregivers was gathered. The engagement sessions further informed the measurement considerations for the home care experience surveys. Things to keep in mind when constructing surveys are [3]:

1. ***WHO** are people assessing?* i.e., when asking to share experiences with home care providers, it will be important to clarify to whom we are referring to (e.g., nursing, occupational therapy, etc.), or whether a general experience is sufficient;

2. ***WHOSE** perspective are we capturing?* i.e., caregivers and clients pointed out that some are in dual roles—both clients and caregivers, or changing between. Therefore, we need to be clear what perspective we are capturing;

3. ***WHAT** will we do with the information we collect? **WHY** are we asking people to do this?* i.e., the purpose of the surveys needs to be clear and stated at the very beginning. Home care clients and caregivers stressed the importance of asking questions that could be acted on. Questions may require further probing to get the needed context to make them actionable;

4. ***WHAT** do we ask?* i.e., some participants encouraged the use of open-ended questions to capture a fuller experience, as well as a series of straightforward questions, e.g., "Did you get what you expected?";

5. ***WHEN** is the appropriate time point to get information?* i.e., home care clients and caregivers were unclear as to what time point they would refer to when responding to a survey. Is the home care survey meant to be formative or summative or both?;

6. ***HOW** will we collect our information?* i.e., participants noted that multiple modalities may work better, particularly since some people with complex care needs, might not be able to reach the phone; and

7. ***HOW** people respond will depend on the level of comfort and expectations of the system instead of sharing what they really want/need?* i.e., how people respond to any survey will be dependent on both their level of expectations of the system and comfort in sharing information. If expectations are low, they may not even bother asking for more optimal care.

Based on the domains and components derived from the enagegment sessions, items from existing home care experience surveys along with suggestions from the participants themselves were gathered to create a first draft of the home care client and caregiver surveys. Items were translated from English to French (unless an official French translation of the survey item already existed) and were subsequently cognitively tested in both languages. The latter testing involved ensuring that the questions captured the intended information by asking participant clients and caregivers to explain in their own words what the question is asking as well as ensuring that multiple choice options cover all possible scenarios and that the terms and reading level employed was understandable for all respondents. Following cognitive testing, questions and answer options were refined and presented to the CCEE Expert Panel who provided their input and suggestions on further refinement on survey items to produce the final versions to be field tested. The French versions underwent backtranslation to ensure accuracy of meaning and information.

Features of Healthcare Delivery Addressed by the Home Care Client and Caregiver Surveys

Clients

The questions from the Client Survey address a broad range of topics inclusive of services provided by LHINs including the experience of planning one's home care, accessing care, communicating with providers and various staff, the skills of home care providers and staff, experience with hospital discharge, discharge from home care services, and overall experience, as well as demographics and socioeconomic status. For more information on the features of healthcare delivery addressed by the Client Survey, see Table 1 below. Most questions have multiple choice answers in the form of Yes/No or Likert scales or categorical choices. However, for more specificity and to make these items actionable, a few questions are multiple response items to allow H&CC to know what aspects of care to focus on for future improvement.

The survey also includes three open comment questions to gauge what worked well, did not work well and if respondents had any other comments or suggestions. This was to enable actionable comments as positive, negative or neutral. For more information on the length and type of questions, and response format on the Client Survey, please refer to Appendix A, Table 24.

Not all sections of the home care experience surveys are administered to all respondents. Hospital discharge experience questions are only asked to clients who have been discharged from hospital at the start of their recent home care or in the past six months, and their caregivers. Home care discharge experience questions are asked only to clients who have been discharged from H&CC in the past six months. This did change based on modality (see FIELD TESTING METHODOLOGY below) with phone and online responders being initially asked the following questions prior to the discharge experience sections:

- Were you hospitalized before the start of your home care services, or anytime in the past six (6) months?
- Have your Home and Community Care services ended?

Answering "No" to these questions would skip to the next section. On the paper version, however, the above questions were not included. Instead, the section introduction instructs respondents:

- "If you have not been discharged from hospital at the start of your recent home care or in the past six (6) months, please skip to question #43. If questions #43-45 do not apply, please skip to question #46."
- "If you have not been discharged, please skip to question #46."

Discharge experience questions also include "Not applicable / I was not hospitalized at the start of my recent home care, or in the past six (6) months.", and "Not applicable / I have not been discharged from home care." to ensure that respondents who may not have fully read the instructions in the section introduction do not get confused.

Caregivers

The questions from the Caregiver Survey addresses a broad range of topics inclusive of services provided by LHINs including the what their caregiver role entails, what kind of support they require as caregivers, experience accessing care, caregivers' needs, communicating with providers and various members of the staff, the skills of home care providers and staff members, experience with client's hospital discharge and/or discharge from home care services, and overall experience, as well as demographics and socioeconomic status. For more information on the features of healthcare delivery addressed by the Caregiver Survey, see Table 2 below. Just like the Client Survey, most questions have multiple choice answers in the form of Yes/No or Likert scales or categorical choices and for specificity and actionability, a few questions are multiple response items to allow H&CC to know what aspects caregiving to focus on for future improvement.

The Caregiver Survey also includes three open comment questions to gauge what worked well, did not work well and if respondents had any other comments or suggestions for the same reasons as the ones mentioned above for the Client Survey. For more information on the length and type of questions, and response format on the Caregiver Survey, please refer to Appendix A, Table 25.

As mentioned above, not all sections of the home care experience surveys are administered to all respondents. Phone and online responders of the Caregiver Survey being initially asked the following questions prior to the discharge experience sections:

- Was <client name> hospitalized before the start of their home care services, or anytime in the past six (6) months?
- Have <client name>'s Home and Community Care services ended?

Answering "No" to these questions would skip to the next section. On the paper version, however, the above questions were not included. Instead, the section introduction instructs respondents:

- "The following questions are only asked for caregivers of hospitalized clients about coming home after being in hospital. If <client name> was not discharged from hospital at the start of their recent home care or in the past 6 months then please skip to question #32. If questions #32-34 do not apply, please skip to #35."
- "If <client name> has not been discharged, please skip to question #35 below."

For the same reasons as the Client Survey, discharge experience questions also include the answer options "Not applicable / <Client name> was not hospitalized at the start of their recent home care, or in the past six (6) months.", and "Not applicable / <Client name> has not been discharged from home care."

Types of Questions and Response Format

The Client Survey contains a combination of 65 closed and open-ended questions. The Caregiver Survey containts a combination of 52 of closed and open-ended questions. The answer options include binary reponses (e.g., Yes/No), Likert-scale (e.g., "Strongly disagree – Strongly agree", "Not at all – Totally", etc.), as well as categorical options. (For more details, please see Appendix A.)

Table 1. Features of healthcare delivery that are reflected by questions within each domain of the Client Survey

Domain	Number of questions in section	Examples of features of healthcare delivery
Planning Home Care	6	▪ Knowing what care and services client will get ▪ Service language of choice ▪ Client involvement ▪ Family/caregiver involvement ▪ Cultural considerations ▪ Timeliness
Accessing Home Care	9	▪ Understanding one's care ▪ Access to all equipment and supplies ▪ Appropriateness of care plan ▪ Sufficiency of care ▪ Client-centredness ▪ Gaps in care ▪ Out-of-pocket costs
Communication	10	▪ Provision of health information ▪ Feeling heard ▪ Language barriers ▪ Clarity of health information ▪ Having a point-person ▪ Gaps in communication
Home Care Providers	10	▪ Punctuality ▪ Impact of changes in care schedule ▪ Efficiency (time) ▪ Going the extra mile ▪ Skills and competencies ▪ Safety concerns ▪ Complaint process
Hospital Discharge	7	▪ Family/caregiver involvement ▪ Comprehension of health information ▪ Medication ▪ Having a point-person ▪ Coordination of services within community ▪ Contradictory information ▪ Meeting needs
Client Discharge from Home Care Services	3	▪ Coordination of services within community ▪ Client preparedness (for discharge) ▪ Having a point-person
Overall Experience	3	▪ Enabling home stay ▪ Quality of care
Demographics & Socioeconomic Status	14	▪ Ethnicity ▪ Sexual orientation and identity ▪ Loneliness ▪ Housing security ▪ Financial security ▪ Food security
Open Comment	3	▪ What worked well ▪ What did not work well ▪ Suggestions for improvement
Total	65	

Table 2. Features of healthcare delivery that are reflected by questions within each domain of the Caregiver Survey

Domain	Number of questions in section	Examples of features of healthcare delivery
Caregiver Role	5	Amount of time dedicated to caregiving Caregiving duties
Caregiver Support	3	Caregiver preparedness Feeling supported Coordination of services within community
Accessing Home Care	9	Caregiver involvement in planning home care Understanding client's care Caregiver centeredness Service adjustments Impact of changes in care schedule Access to all equipment and supplies Gaps in care Out-of-pocket costs
Caregiver Needs	1	Support and services for caregiver
Communication	6	Having a point-person Clarity of health information Feeling heard Gaps in communication Language barriers Having a point-person
Home Care Providers	3	Punctuality Courtesy, respect and friendliness Informative Efficiency (time) Skills and competencies Communication skills Going the extra mile Safety concerns Complaint process
Hospital Discharge	4	Caregiver preparedness Having a point-person Timeliness Coordination of services within community
Client Discharge from Homecare Services	3	Coordination of services within community Caregiver preparedness (for discharge) Having a point-person
Overall Experience	2	Caregiver support Enabling home stay Quality of care
Demographics & Socioeconomic Status	13	Ethnicity Sexual orientation and identity Loneliness Housing security Financial security Food security
Open Comment	3	What worked well What didn't work well Suggestions for improvement
Total	52	

FIELD TESTING METHODOLOGY

Objectives and Desired Outcomes

HSPRN hired the services of R.A. Malatest & Associates Ltd. to complete a field test of the home care experience surveys. The Client Survey was conducted with direct clients of H&CC services, although caregivers could respond on the client's behalf if the latter was not capable of doing so themselves. The Caregiver Survey was conducted with informal caregivers of those clients. Caregivers were identified by clients. All survey invitations were sent to clients and clients were asked to share the Caregiver Survey with their caregiver. For the purposes of this survey, an informal caregiver was defined as "any relative, partner, friend or neighbor who has a significant personal relationship with, and provides a broad range of assistance to you, without pay. This individual may help you with your personal care (e.g., bathing), housework, medical care (e.g., wound care, administering medications, etc.), coordinating your care and/or appointments, and accompanying or driving you to your medical appointments."

The field test was conducted via three surveying modes: telephone, online, and mail-back paper surveys. Each respondent was randomly assigned to one of the three modes and invited via a letter mailed to them to complete the survey in that mode (referred to throughout this report as "initial contact mode" or "initial mode"). Although respondents could choose to complete the survey in a different mode from that which they were assigned, respondents were not explicitly invited to choose their preferred mode of completion. The invitation letters sent to respondents stated that, "If you require the survey in an alternate format or language, please contact Malatest at enquiries@malatest.com or toll free 1-877-688-1135."

The intent of the field test was to assess the performance of the survey on a number of metrics to make informed decisions about survey changes, plan fielding strategies and anticipate results when the survey is fully implemented. Results of the field test help ensure that the administration of the full survey is conducted in the most efficient and cost-effective manner moving forward. Metrics reviewed include:

- Switching between initial contact mode and completion mode;
- Length of time taken to complete the questionnaires by telephone;
- Telephone production rates;
- Participation and response rates for the telephone mode;
- Answer quality by examining some differences in answers across modes, the proportion of incomplete answers, or answers where respondents refused to answer, or indicated they did not know the answer; and
- A comparison of the demographics of those who completed the surveys to the general population of clients provided to Malatest for the home care experience surveys.

Note: As previously stated, throughout the report, "initial contact mode" refers to the mode via which respondents were invited to complete the survey. "Completion mode" refers to the mode by which respondents actually completed the survey. Throughout the report, the terms "interviewer" and "surveyor" are used interchangeably, as are the terms "questionnaire" and "survey."

Sampling and Contacting Clients and Caregivers

Use of Clients as the Sampling Frame for Both Clients and Caregivers

Malatest used clients of HSSO services as the sampling frame, i.e., clients were randomly chosen from each LHIN in order to select both clients and caregivers to participate in their respective surveys. Specifically, in order to participate in the Caregiver Survey, caregivers were directly contacted through clients. Caregivers, themselves, were not independently chosen to participate in the field test. As such, all caregivers who participated in the Caregiver Survey were attached to a client in the Client Survey. For all three initial modes, mailed packages and letters about the survey were sent only to clients.

Geography and Sample Source

The sample was drawn from the four LHINs that participated in the field test: Hamilton Niagara Haldimand Brant (HNHB); Central; Toronto Central; and North East. Malatest was provided the names of these LHINs by HSPRN. Malatest accessed the January to April 2019 client sample that was eligible for, but unused by, the CCEE Survey Study for HSSO. The field test sample was, therefore, drawn based on extra sample (after the requirements were met for the HSSO sample). This ensured that clients would not be asked to participate in both the ongoing CCEE survey and the field test. Malatest randomly split the available sample into the three initial contact modes with a proportional stratification across the the four LHINs and by English and French language.

Involvement of the Caregiver in the Client Survey

During the design of the field test, it was acknowledged that clients may have required full or partial assistance from their caregivers to complete the Client Survey. To this end, clients were informed (in the invitation letter) that they could receive full or partial assistance from their caregiver to complete the client questionnaire. If a caregiver completed the questionnaire on the client's behalf, the questionnaire was counted as a questionnaire completed by the client. In all client and caregiver communications, it was made clear that caregivers had their own questionnaire to complete. Clients were asked to inform their caregiver of the Caregiver Survey, and if a caregiver completed a client questionnaire, they were informed they could also complete a caregiver questionnaire.

Regardless of initial mode, all respondents were provided a toll-free number to call with questions and/or complete the surveys over the phone. Clients who completed the survey via phone were asked, at the end of the survey, to provide their caregiver's contact information so that interviewers could reach out to the caregiver and ask them to participate in the Caregiver Survey. During the initial outreach, if an interviewer reached a caregiver rather than a client, the interviewer asked to speak to the client; however, if the caregiver indicated that the client was unable to complete the Client Survey on their own, the interviewer asked the caregiver if they would be willing to assist the client in completing the Client Survey, or complete the Client Survey on the client's behalf.

Sample Population

Detailed in the Table 3 below are the sample population for clients from each LHIN, categorized by the initial contact mode to which each was assigned:

Table 3. Sample Population

English/French Initial Contact Mode*	LHIN				Total Invitation Letters	Net Total Mail-Outs Returns	Net Invitation
	HNHB	Central	Toronto Central	North East			
Online	182/15	193/5	123	49/44	**611**	8	**603**
Telephone	198/16	183/5	116	36/46	**600**	10	**590**
Mail-Back	181/10	171/4	131	57/59	**613**	21	**592**
TOTAL	**561/41**	**547/14**	**370**	**142/149**	**1,824**	**39**	**1,785**

*Respondents could be contacted about participating in the survey in their initial mode and switch modes to complete the questionnaire.

Representativeness of the Sample and Survey Respondents

Indicated in Table 4 below are the HSSO original population inclusive of all home care recipients eligible for CCEE surveys, the sample used as part of this field test, survey completion numbers and demographic characteristics. These include:

- The four LHINs selected to participate in the field test as a proportion of the total sample available for the home care experience surveys based on HSSO sample groups;
- The sample used as part of this field test study and their breakdown by survey mode; and
- The frequency distribution of the participating respondents.

As indicated in Table 3, the field test sample in this study includes 1824 clients (randomly selected from a sample of 46 236 HSSO clients). In the sample, 1620 clients were flagged as having English as their preferred language, and 204 were flagged as having French as their preferred language.

The sample drawn for the field test was fairly similar to the HSSO origin sample with respect to LHIN, service language, preferred language, age, gender, status ("new" client), discharge status, services received, Service Recipient Code (SRC), and client care group. The field test sample distribution by surveying mode (online, telephone, and paper/mail-back) was also fairly similar to the HSSO origin sample. With respect to the participating respondents, of the 1824 clients invited to participate in the study, a total of 239 clients actually participated (inclusive of all surveying modes). The percentages in Table 4 below generally indicate that those who participated were representative of the original field test sample and the HSSO origin sample.

While most characteristics were similar, there were some minor differences in the sample. Specifically:

1. HNHB is slightly over-represented across all three modes;
2. English speakers are slightly under-represented in the phone mode and online mode;
3. Females are over-represented in all three modes compared to the origin sample; and
4. Those receiving home care are slightly over-represented in all three modes while Occupational Therapy and to a lesser extent Physiotherapy are under-represented across all three modes. Along these lines, the surveys did not capture any clients using Nutrition, Social Work or Speech & Language.

Methodology

Initial Contact Mode

Respondents were randomly assigned to one of three initial contact modes: paper/mail-back; online; telephone. In all three cases, potential respondents were initially contacted by mail about the survey. That is:

- The paper/mail-back sample clients received two notification letters, with one addressed to them (the client) and the other to their caregiver. They also received a paper copy of both surveys (Client and Caregiver) and mail-back envelopes;
- The online client sample received two notification letters, each of which included instructions for completing the survey online; one letter was addressed to the client and the other to their caregiver. Survey links and access codes were included (and were different for clients and caregivers); and
- The telephone client sample received two notification letters, one for themselves, and the other for their caregivers, informing them that they might receive a call to complete a survey.

The descriptions below provide more detail on the administration of surveying in each initial mode.

Paper/Mail-Back Mode

The letters were personally addressed to the client, and indicated the approximate length of the survey (i.e., 20 minutes), provided the definition of a "caregiver," identified the services to be evaluated and how personal information would be protected. The letter was signed by Dr. Walter Wodchis and contained his contact information, along with the contact information of a Malatest representative. Each survey included the respondent's unique identifier so that the questionnaire could be properly categorized, as well as to facilitate changes to the survey completion mode if requested by the respondent. No reminders were sent, neither was a final end date specified.

Online Survey Mode

As in the mail-back mode, the sampling unit for the online survey was also the client and initial contact was made by a mailed notification letter. Specifically, two notification letters (one for clients and one for caregivers, in either French or English) were mailed to the client's address. The letters indicated that the caregiver information letter should be given to the caregiver so that they could participate in the Caregiver Survey online. The letter also mentioned that the caregiver could provide assistance to the client in completing the online Client Survey if necessary. The letter included the information required to complete the survey online, including a secure website link and a secure login code (a.k.a. telkey) for each client and caregiver. The telkey was different for clients and caregivers. Much like the mail-back letter, letters were personally addressed to the client, indicated the approximate amount of time it would take to complete the survey, provided details regarding who would be classified as a caregiver, explained the purpose of the surveys, and described how privacy would be protected. The letter was signed by Dr. Walter Wodchis and contained his contact information along with Malatest's. No reminders were sent out and no end date for the surveys was specified.

Telephone Survey Mode

Initial letters were sent by mail to clients' addresses. Each package contained a letter for the client and a letter for their caregiver (in French or English) notifying them that they might be called to participate in a survey. When calls were made, the identity of the person on the phone and their relationship to the client was determined first. Depending on who answered the phone, the interviewer script varied:

- If a client answered the call, they were asked to participate in the survey. If they were able and willing to participate, they would do so, but if they were unable to participate, their caregiver (if available) was asked to complete the Client Survey on the client's behalf. At the end of the client questionnaire – if the client had completed it – they were asked to provide their caregiver's contact information so that a surveyor could call the caregiver and ask them to participate in the Caregiver Survey;
- If the caregiver answered the call and completed the Client Survey on the client's behalf, upon completion, the caregiver would be immediately asked to complete the Caregiver Survey; and
- If the caregiver's contact information was available in the sample, and the caregiver received the initial call about the study, they were invited to complete the caregiver questionnaire and, upon completion, they were asked if they wished to answer the client questionnaire on behalf of the client to whom they provide care (if the client was incapable of completing on their own).

A total of four call-back attempts were made to clients and caregivers to encourage them to participate in the study. It should be noted that the time of day call-backs were varied to increase the likelihood of reaching respondents. In addition, voicemail messages were left encouraging clients and caregivers to call the call centre to participate in the study.

Switching from Initial Contact Mode to Preferred Completion Mode

While each respondent was assigned to one of three initial survey modes, throughout the survey process, they could request to participate in a different mode (referred to as the "completion mode" throughout this report). Typically, requests for a mode change would be made by respondents who called the toll-free number.

- If a respondent asked to complete the questionnaire online, the interviewer who received the request would ask for the respondent's email address and then send the respondent an email containing the link to the survey and their unique telkey;
- If a respondent asked to complete the questionnaire by phone, the interviewer who received the request would ask for their telkey and if the respondent was unable to provide it, the interviewer would use their name or phone number to look-up their telkey for them;
- If a respondent called to ask to complete the study on paper, a paper copy of the survey was mailed to them with the telkey printed at the bottom of the survey.

Table 4. Field Test Sample

Column Percent (%)	Original		Field Test Sample					Participating Respondents				
	HSSO EN	HSSO FR	Total EN	Total FR	Online	Phone	Mail	HSSO EN	HSSO FR	Online	Phone	Mail
	n=45519	n=717	n=1620	n=204	n=611	n=600	n=613	n=192	n=47	n=27	n=136	n=76
LHIN												
HNHB	29	11	35	20	32	36	31	42	16	48	37	33
Toronto Central	27	-	23	-	20	19	21	22	0	19	15	21
Central	35	3	34	7	32	31	29	27	9	22	22	25
North East	9	86	9	73	15	14	19	10	75	11	26	21
IS_CHILD												
No	97	99	98	99	98	99	98	98	100	100	99	99
Yes	3	1	2	1	2	1	2	2	0	-	1	1
IS_INCAPABLE												
No	92	88	93	89	91	95	91	70	83	96	94	95
Yes	8	12	7	11	9	5	9	30	17	4	6	5
SERVICE LANGUAGE	**n=28099**	**n=714**	**n=978**	**n=203**	**n=399**	**n=381**	**n=401**	**n=113**	**n=46**	**n=18**	**n=94**	**n=47**
English	80	25	77	20	67	69	67	81	15	78	57	66
French	*	59	*	64	9	12	12	2	63	11	23	15
Other	20	16	22	16	24	19	21	17	22	11	19	19
PREFERRED LANGUAGE	**n=23781**	**n=717**	**n=882**	**n=202**	**n=359**	**n=358**	**n=367**	**n=106**	**n=47**	**n=18**	**n=91**	**n=44**
English	73	-	73	-	59	60	59	78	0	78	48	57
French	-	100	-	98	17	18	20	0	100	11	40	20
Other	27	-	27	2	24	22	22	22	0	11	12	23
AGE GROUP	**n=42690**	**n=673**	**n=1514**	**n=198**	**n=566**	**n=565**	**n=581**	**n=192**	**n=47**	**n=27**	**n=136**	**n=76**
0-18	3	1	2	1	2	1	2	2	0	*	*	*
19-64	22	16	22	14	21	23	21	21	13	*	20	17
65-74	15	16	15	19	13	15	17	15	23	*	17	20
75-84	24	30	25	32	29	24	24	30	30	*	32	26
85+	37	36	36	34	35	36	36	32	34	37	30	36
AGE	**n=45519**	**n=717**	**n=1620**	**n=204**	**n=611**	**n=600**	**n=613**	**n=192**	**n=47**	**n=27**	**n=136**	**n=76**
Mean age in years	73.75	76.66	74.10	76.27	74.66	74.04	74.33	74.41	77.32	77.46	74.92	75.82
Standard Deviation	19.89	15.17	19.30	15.78	18.57	18.91	19.38	17.81	11.66	16.14	16.53	17.67
GENDER												
Female	62	68	65	70	64	65	66	71	77	78	73	70
Male	38	32	35	30	36	35	34	29	23	22	27	30
Unclassified	*	-	-	-	-	-	-	-	-			
NEW CLIENT												
No	87	90	87	93	88	86	89	100	100	89	94	83
Yes	13	10	13	7	12	14	11	0	0	11	6	17
DISCHARGED												
No	77	75	77	82	77	76	78	87	87	93	82	82
Yes	23	25	23	18	23	24	22	13	13	7	18	18

Table 4. Field Test Sample

	Column Percent (%)	Original		Field Test Sample					Participating Respondents				
		HSSO EN	HSSO FR	Total EN	Total FR	Online	Phone	Mail	HSSO EN	HSSO FR	Online	Phone	Mail
		n=45519	n=717	n=1620	n=204	n=611	n=600	n=613	n=192	n=47	n=27	n=136	n=76
	SERVICE RECEIVED												
	Personal Support Worker	66	64	72	77	74	71	71	75	85	81	78	72
	Nursing	25	18	24	16	24	24	23	27	15	26	23	26
	Physio Therapy	6	12	4	5	5	4	5	5	0	4	3	5
	Occupational Therapy	10	15	9	11	9	9	9	6	2	-	7	5
	Nutrition	1	2	*	-	-	*	*	0	0	-	-	-
	Social Work	1	1	-	-	-	-	-	0	0	-	-	-
	Speech & Language	1	1	-	-	-	-	-	0	0	-	-	-
	Service Recipient Categories												
	Referred In (No Recovery)	*	-	-	-	-	-	-	-	-	-	-	-
	Residential-Long Stay	2	5	-	-	-	-	-	-	-	-	-	-
	Acute	8	7	10	7	9	10	9	8	6	7	6	11
	Rehabilitation	10	15	9	10	8	10	10	10	0	7	8	8
	Maintenance	63	31	64	43	64	62	60	60	64	63	63	57
	Long-Term Supportive	17	42	17	40	19	18	21	22	30	22	24	25
	CLIENT CARE GROUP	**n=33020**	**n=709**	**n=1241**	**n=202**	**n=484**	**n=481**	**n=478**	**n=148**	**n=47**	**n=21**	**n=114**	**n=60**
ADULT	Complex	15	9	12	10	11	12	13	12	9	-	-	-
	Chronic	50	49	52	51	53	51	53	57	38	-	-	-
	Community Independence	12	20	11	21	14	13	10	10	47	-	-	-
	Short Stay	19	22	22	16	19	23	22	21	6	-	-	-
	Well	*	-	-	-	-	-	-	-	-	-	-	-
CHILD	Complex	1	-	*	-	1	1	-	-	-	-	-	-
	Chronic	2	*	2	*	2	1	1	1.4	-	-	-	-
	Community Independence	*	*	*	-	*	-	*	-	-	-	-	-
	Short Stay	*	-	*	-	*	*	*	-	-	-	-	-
	Well	-	-	-	-	-	-	-	-	-	-	-	-

Note: * Sample too low to include %; - No data available.

Survey Programming Test and Soft-Launch

The telephone and online surveys were programmed using CallWeb, an integrated telephone/web-based interview system. The accuracy and quality of the telephone and online versions of the survey, and the form through which data entering of paper survey was completed were thoroughly tested. More specifically:

- Computer programmers tested the programmed telephone and online forms;
- A programming manager tested the telephone, online forms and internal forms;
- Analysts and research managers tested the telephone and online forms; and
- Researchers at HSPRN also tested the online forms.

Testing of the forms included proof-reading the programming code, entering various alternate responses to the form, checking skip pattern implementation and viewing the output involved when random answers were entered into the form to test different scenarios. In addition, the overall ease and appearance of the forms was checked. The CallWeb surveys were also checked for programming and formatting issues. Any changes were documented in the original questionnaire form using highlighting and track changes, and different versions of the questionnaire were created by the analysts and managers to track those changes. The programmer assigned to the study was the only individual with the necessary permissions to make changes to the online and telephone forms.

Upon completion of the internal testing, a three day "soft-launch" was conducted via telephone. Interviewers were briefed on the project by supervisors, who received information on the study itself and instruction on surveying by the research analysts and managers for the project. Interviewers were instructed to note any areas that seemed problematic during the interview process (e.g., questions that confused respondents), and supervisors monitored random calls throughout the soft-launch to determine if there were any areas that could be targeted for improvement. No substantive changes resulted from this process. However, the duration of both the Client and Caregiver Surveys was flagged as problematic as the average call length was longer than anticipated, at approximately 30 minutes (the target was 20 minutes). Programmers checked the "marginals" (i.e., the data collected) to determine if the number of answers to each question matched the survey skip patterns, and no issues were flagged, i.e., results indicated that survey skips were functioning as intended.

Overview of Field Test Administration

Field Test Approach

Table 5. Field test approach

Activity	Start (2019)	Finish (2019)
Determine and randomly extract excess sample from targeted four LHINs	July 15	July 18
Prepare and validate the sample	July 11	July 18
Draft and finalize survey instruments including letters and telephone scripts. First instruments received June 26 and most instruments were finalized July 17, although a final round of edits was completed on August 7	June 26	July 17 to August 7
Program data collection instruments	July 12	July 19
Test data collection instruments	August 15	August 18
Conduct soft-launch	August 19	August 21
Print all letters and surveys, and conduct mail-out. Printing/mail-out of the English versions of the letters and surveys began on August 8, and printing of the French versions were mailed-out on August 14	August 8	August 14
Survey were completed/received between August 19 and September 23	August 19	September 23

Executing Telephone Interviewing

Interviewers were trained by supervisors to ensure they understood the purpose of the study and how to administer the survey. Training included ensuring that interviewers understood the special needs some clients could have (e.g., some individuals could be quite ill and/or elderly, and require extra time and repetition of questions), or the client could be a child, in which case the caregiver would be asked to complete the survey on their behalf. In addition, privacy issues were discussed, and instructions were provided regarding how to identify the HSPRN if a respondent should ask.

A telephone script programmed into the CallWeb system was used to guide the surveyors throughout the survey. This script ensured consistency in the survey administration process. All outcomes that would not lead to an interview or call-back were recorded, and requests for removal from the dialing queue were processed. Interviewers were also provided with a list of "Frequently Asked Questions" so that they would know how to respond if respondents asked about the validity of the call, how their feedback would be used, etc. As appropriate, questions were escalated to supervisors.

Handling Feedback from Surveyors and Respondents

Feedback concerning questionnaire administration from surveyors or respondents was internally reported to survey house supervisors who made note of the feedback received. If the feedback was deemed critical (e.g., a skip-pattern was not functioning as intended), a call would be placed immediately to the assigned research analyst. However, this did not occur; the only notable feedback received related to the length of time required to complete the questionnaire.

FIELD TEST RESULTS

Completion Rate and Mode of the Home Care Client and Caregiver Experience Surveys

Completion Yield and Final Mode Completion Rates

Three versions of the invitation letter were developed with each version inviting respondents to participate via one of three modes (i.e., online, telephone, or mail-back). Approximately 600 invitation letters were mailed-out for each of the three survey modes. Detailed in Table 6 below is the number of invitation letters sent for each mode, the number of surveys completed by respondents receiving an invitation to complete the survey via each of the three modes, and the number of surveys actually completed via each of the three modes. As indicated, respondents who received an invitation inviting them to complete the survey via paper/mail-back mode were more likely to complete the survey (19.1% of clients and 12.1% of caregivers) than those who were invited to complete the survey online or via phone. However, this does not mean that those who were invited to complete the survey via paper actually completed via paper; some of these respondents asked to complete the survey online or via telephone and actually completed via one of these modes. As indicated in the "Percentage of Total Completes" column in Table 6, the largest proportion of surveys were completed via telephone (56.9% for clients and 53.0% for caregivers).

The results outlined below (Table 6) indicate that mode switching occurred.

Table 6. Modalities

Based on completed/returned surveys	Initial Contact Mode (A)	Number of Mailed Invitations* (B)	Completion Yield from Initial Contact Mode (A/B)	Survey Completion Mode (C)	Percentage of Total Completes
CLIENT Initial Mode					(C/239)
Online	52	603	8.6%	27	11.3%
Telephone	74	590	12.5%	136	56.9%
Mail-Back	113	592	19.1%	76	31.8%
Client Totals	***239***	***1785***	***13.4%***	***239***	***100%***
CAREGIVER Initial Mode*		*Initial contact mode via client*			(C/115)
Online	29	(603)	4.8%	29	25.2%
Telephone	14	(590)	2.4%	25	21.7%
Mail-Back	72	(592)	12.1%	61	53.0%
Caregiver Totals	***115***	***(1785)***	***6.4%***	***115***	***100%***

Note: * It is important to note that the sampling unit was the client. In all cases the client was asked to inform and provide survey materials to the caregiver. As such, the number of mailed invitations to both clients and caregivers are equal. However, it is very likely that all clients received the letter, opened it and became aware of the survey. It is unknown, and in fact unlikely, that all caregivers became aware of the study in the same way. Also, it may be worth noting that some of the letters mailed out may not have reached the recipient as they may have moved since providing their address, or the address was incorrect. This number is unknown.

Switching between Initial Mode versus Completion Mode

As mentioned earlier in this report, respondents could switch from their initial contact mode to another. As indicated in Table 7 below, respondents – largely clients – switched to telephone from the online and mail-back/paper modes. Interviewers indicated that when they called respondents to remind them of the study, they were willing to complete the study by phone, regardless of the initial contact mode.[1] However, clients were reluctant to give the phone directly to the caregiver after the interview, or provide a caregiver name, because of the length of the survey.

Table 7. Initial and completed survey modes.

Based on completed/returned surveys	Initial Mode	Complete Mode	Difference
	Number of Respondents		
Client			
Online	52	27	-25
Telephone	74	136	+62
Mail-Back	113	76	-37
Caregiver			
Online	29	29	0
Telephone	14	25	+11
Mail-Back	72	61	-11

Client Survey

A total of 239 Client Surveys were completed across the three modes; 136 (56.9%) telephone surveys, 76 (31.8%) paper surveys and 27 (11.3%) online surveys (Table 8). Of the 74 clients whose sampled mode was telephone and who completed a survey, nearly all did so by telephone (98.6%). By contrast, only 40.4% of the 52 clients who were provided with a URL and who completed a survey did so online. Nearly 60% of these clients ended up completing the survey by telephone, while 29.2% of the 113 clients who were sent the paper version and completed a survey also switched to the telephone mode. Very few clients requested to change to either the paper or online mode.

Table 8. Client Survey Completion Mode by Sampled Mode

Sampled Mode	Client Completion Mode				Population contacted for sampled mode
	Online	Telephone	Paper	Total	
Online (n)	21	30	1	52	603
Telephone (n)	1	73	0	74	590
Paper (n)	5	33	75	113	592
Total (n)	27	136	76	239	1,785

- Telephone had the least switching, with nearly all those whose initial mode was telephone completing the questionnaire on the phone;
- Approximately two thirds (66%) of those invited to complete via paper (mail-back) actually completed the survey via paper. Among those who switched to a different mode, 30% switched to phone and only 4% switched to online. This suggests that the telephone mode – with an interviewer actively attempting to engage the respondent – secures higher cooperation

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[1] Telephone calling was intended only for those respondents initially assigned to the telephone sample mode. However, calls were ultimately made to respondents assigned to the initial mail-back and online modes as well.

than email which relies on the respondent opening an email and clicking on a link to the survey (passive); and

- The online mode had the highest proportion of switching. A smaller proportion of those whose initial mode was online completed the study online (40%); over half (58%) of respondents whose initial mode was online switched to phone, and 2% switched to paper.

Caregiver Survey

A total of 115 Caregiver Surveys were completed across the three modes; 25 (21.7%) telephone surveys, 61 (53.0%) paper surveys and 29 (25.2%) online surveys (Table 9). Of the 14 caregivers whose sampled mode was telephone and who completed a survey, all did so by telephone (100%). Nearly 80% of the 29 caregivers who were sent the online URL and completed a survey ended up doing so online. While 83.3% of the 72 caregivers who were sent the paper version and completed a survey, did so using the paper version. In nearly all cases, clients and caregivers completed the survey using the same mode.

Table 9. Caregiver Survey Completion Mode by Sampled Mode

Sampled Mode	Caregiver Completion Mode				Population contacted for sampled mode
	Online	Telephone	Paper	Total	
Online (n)	23	5	603	29	603
Telephone (n)	0	14	590	14	590
Paper (n)	6	6	592	72	592
Total (n)	29	25	1,785	115	1,785

- As among clients, telephone had the least switching, with all (100%) of those whose initial mode was telephone completing the survey by phone;
- The mail-back initial mode also had a low incidence of switching with 84% of caregivers completing via paper. Few switched to online (8%) or telephone (8%); and
- Approximately eight in ten caregivers (79%) whose initial mode was online completed the survey online. Few switched to telephone (17%) or mail-back (3%).

Surveying Clients

Among clients, the initial mode of contact of a mail-back survey produced the highest participate rate, or completion yield. However, recipients invited via one mode often actually completed the survey using a different mode. While a total of 19.1% (113) of clients in the mail-back sample ultimately completed the survey, 67% (76 of the 113) completed the survey on paper while 33% (37 of the 113) opted to complete the survey either on the phone or online. Based on actual completion mode numbers, over half of the surveys were completed over the phone, while nearly a third were completed via paper and a bit over a tenth were completed online. This suggests that online uptake and participation was not as high among clients.

The number of telephone completes was influenced by the outgoing calls from the surveying. Calls were made to clients who received an invitation to participate in the survey via telephone as well as to clients who did not respond to the invitation to participate via paper or online. Conducting follow-up phone calls with non-responders (i.e., those who did not complete via paper or online) proved to be an effective strategy as evidenced by the high telephone completion rate (57% of 239 surveys were completed via phone). Also, some of the calls received from clients were to validate the study and gain a better understanding of the survey objectives. During these calls, many clients opted to complete the survey over the phone. This may have played a role in the higher number of telephone completions. On the other hand, this demonstrates an increased willingness by respondents to participate in the survey when speaking with an interviewer on phone.

Surveying Caregivers

Participation among caregivers was more evenly spread across all three modes. While nearly half responded by paper/mail-back, about a quarter responded by online and a fifth by telephone. Since caregivers were accessed through clients, clients may not have provided their caregivers with the paper survey. When speaking with clients via phone, surveyors attempted to collect a caregiver name. Thus it was possible to contact caregivers by phone. However, interviewers also noticed that clients, once surveyed, were reluctant to give the phone to caregivers to complete the survey. This explains the increased participation among caregivers relative to clients.

However, paper/mail-back and online mdoes were also used quite well among caregivers. Specifically 84% of caregivers who received a paper/mail-back copy (from the client) responded by paper. Similarly, 79% of caregivers responded online (when the client was asked to respond online). As such, there is less mode switching among the caregivers.

Survey Length – Telephone

All telephone surveys were timed, whether the respondent was assigned phone initially or switched to phone. The average time of the telephone interviews was 29.04 minutes for the Client Survey and 27.06 minutes for the Caregiver Survey. The overall production rate for both surveys, and the number of completes per hour of dialing time, was 1.20. It is worth noting, again, that the timing of the surveys was originally estimated at 20 minutes, which would be in line with the average duration of the current HSSO CCEE survey.

If telephone administration is being considered as the main mode of completion, it may be worthwhile to consider reducing the length of the survey in order to increase involvement from caregivers. As mentioned, clients who responded to the survey before their caregiver had completed their survey were reluctant to pass the phone to the caregiver because of the length of time involved. Re-contacting the caregiver and/or scheduling an appointment with the caregiver was also challenging because of the survey length.

Telephone Production Rates and Use of Call-Centre Support

Overall there were 1030 cases called for clients of the original 1800. The number of "cases" called refer to the different phone numbers. Therefore, a total of 1305 calls were made. The number of clients contacted are as follows:

- 427 of 600 cases in the telephone sample were called, (547 calls made)
- 308 of 600 cases in the online sample were called, (402 calls made)
- 297 of 600 in the paper sample were called, (356 calls made)

Caregivers:

- 32 cases called part of telephone sample (40 calls made)
- 16 cases called part of online sample (24 calls made)
- 15 cases called part of paper sample (17 calls made)

Based on client numbers, the mean number of calls per case is about 1.27 (1305/1030). Below are the results by mode:

- Mean number of calls to clients – telephone: 1.28
- Mean number of calls to clients – online: 1.31
- Mean number of calls to clients – paper: 1.20

In terms of caregivers, the mean could be calculated using the number for caregiver calls above. Note that only cases accessed were the ones where the client provided the caregiver information or a time to call the caregiver. For more information on the field test methodology, the full methodology report by R.A. Malatest & Associates Ltd. can be made available upon request.

Outlined in the Table 10.a below are the metrics for the telephone support provided during this field test where the definition of the metrics are further explained in Table 10.b. The response rate for clients was lower than caregivers, likely because caregivers were always informed of the survey by the clients themselves (hence the 100% incidence rate for caregivers). In total the response rate was 19.6% for clients and 39.7% for caregivers.

Table 10.a. Outcomes for telephone mode

Column Percent (%)		Initial Contact Mode			
		TOTAL	Phone	Online	Mail-back
Clients	Inaccessible	5.2	4.2	6.4	5.1
	Unresolved	66.7	66.8	70.2	63.0
	Not-Participating	9.5	6.7	9.8	13.4
	MRIA Response Rate	19.6	23.2	14.5	19.5
	Incidence	72.9	76.6	70.0	68.5
Caregivers	Inaccessible	-	-	-	-
	Unresolved	46.0	43.7	31.2	46.7
	Not-Participating	14.3	12.5	18.8	13.3
	MRIA Response Rate	39.7	43.75	31.25	40.0
	Incidence	100	100	100	100

Table 10.b. Definition of metrics

Definition	Symbol	Call Disposition Descriptions	Total
Inaccessible	I	Fax, Not-in-Service, Wrong/Business Number	5.2%
Unresolved	U	Busy, No Answer, Answering Machine – Message Left, Answering Machine – No Message Left, Soft Appointment, Hard Appointment, Call Again, Request To Do Survey Online, Supervisor Review	66.7%
Not Participating	NP	Language Barrier, Deceased, Respondent Refusal, Incomplete Survey Will Continue, Incomplete Survey Won't Continue	9.5%
Response	R	Completed Survey, Not Qualified	See Below
Market Research and Intelligence Association Response Rate	MRIA	Includes those who are not qualified to do the study, as they agreed to participate in the research, but were screened-out. When this total is added to I + U + NP, it accounts for 100% of the total dialing made.	

In terms of the distribution of dialing hours, 48% of all interviewing hours were spent completing surveys with clients and 11% of dialling hours were spent completing surveys with caregivers. The remaining 41% of dialing hours were spent on other phone activities such as leaving voicemail messages, setting up appointments, and answering respondent inquiry calls. Finally, it should be noted that, in consultation with HSPRN, the last 20 hours (approximately 15% of all dialing time) was used to target French speaking respondents and caregivers. These respondents were flagged in the sample as having French as their preferred language, so French speaking surveyors could easily identify these individuals.

Telephone calling was intended for those initially assigned to the telephone sample mode. However, after it seemed unlikely that the respondent would complete the survey via the initial mode, calls were also made to respondents assigned to the mail-back and online sample modes. This increased the amount of surveys completed via telephone as the completion mode. Having expanded the telephone calling to all sample modes actually demonstrated that it was quite an effective way of obtaining participation in the survey.

Reaching Caregivers by Phone

This aspect of the survey – reaching caregivers without having their names and using the client as the sampling unit to reach the caregiver – proved to be challenging and reduced the production rate overall. While interviewers agreed that the definition of a caregiver worked well in identifying the individual targeted for the survey, it was difficult for the interviewer to reach the caregiver directly and when booking appointments, many caregivers were not available at the scheduled time.

Timing of Contact after Care was Received

Surveyors noted that advance letters helped to increase response rates, and that the arrival of the advance letters and timing of the actual survey administration should occur as soon after care was received as possible. Calling statistics from the HSSO CCEE study indicate that production rates are significantly improved when surveying is conducted within approximately six weeks of receipt of care, rather than three months or longer.

Survey Language

Of the 239 client responses, 87% (n=208) were completed in English, while 13% (n=31) were completed in French. An even higher percentage of Caregiver Surveys were completed in English (93.9%, n=108), while only 6.1% (n=7) were completed in French.

Characteristics Survey Respondents

Client Respondents

Approximately 80% of the client respondents were 65 years or older, with a plurality over 85 years (Table 11). More than 70% of the respondents were female. There was, generally, good agreement between population of home care clients that were collected on the survey for age and gender (Appendix B). Almost 80% of client respondents were receiving personal support, while one-quarter had nursing services. A small number of client respondents received publicly funded physiotherapy and occupational therapy, but no respondents had services from a nutritionist, speech language pathologist or social worker. Ninety percent of respondents were only receiving one type of home care service. Most respondents were from an urban setting (~90%). Over 60% of respondents had a service recipient code classified as maintenance and over 50% had one or more health/chronic conditions with complicating factors (chronic client care group). Three Client Surveys were completed by a proxy for children receiving home care. Eighty percent of respondents were white, but there were nearly 8% of respondents who didn't find their race/ethnicity among those listed on the survey. Approximately 23% identified as Francophone, which is higher than the proportion who completed the survey in French. Francophone clients were less likely than non-Francophone clients to complete the survey online and more likely do so via telephone (χ^2=8.20, p=0.017); this may be the result of the targeted approach to recruiting French participants via telephone near the end of the field test in order to increase their participation. There were no other statistically significant differences in client characteristics by mode.

Caregiver Respondents

The majority of respondents to the Caregiver Survey were between 55 and 74 years (56.7%), white (82.4%), non-francophone (88.3%), non-indigenous (97.2%), female at birth (68.5%) and identified as a woman (69.4%) and heterosexual (97.2%) (Table 12). Approximately, 8% of respondents couldn't find their race/ethnicity among the options listed. One-third of respondents were caring for their spouse or partner; a similar proportion were caring for their child. There was a higher proportion of online surveys among those who were caring for their parent (35.7%), while over 50% of respondents caring for a child responded via telephone. Almost half of all respondents were providing more than 20-hours of care per week and a majority had at least one additional unpaid person helping care for the client (56.7%). Caregivers supported clients in a variety of tasks, the most common was emotional support, while the least common were personal support, nursing and medical treatments and using the phone or email/internet to communicate with others. Approximately 20% of caregivers were also receiving home care services. Most characteristics did not vary by mode, except sex assigned at birth (χ^2=6.30, p=0.043), indigenous (χ^2=10.93, p=0.027), help with phone/email/internet (χ^2=8.25, p=0.016) and isolated from others (χ^2=13.19, p=0.040).

Table 11. Characteristics of Respondents to the Client Survey

Client Characteristics from Survey		Completion Mode Online (%, n=27)	Telephone (%, n=136)	Paper (%, n=76)	Total (%, n=239)
Age	Under 18 year old	0	0.8	1.4	0.9
	18-64 years old	26.9	18.0	18.1	19.0
	65-74 years old	3.8	18.0	15.3	15.6
	75-84 years old	30.8	30.8	27.8	29.9
	85+ years old	38.5	32.3	37.5	34.6
Sex at Birth	Male	19.2	26.5	32.4	27.5
	Female	80.8	73.5	67.6	72.5
Gender	Man	19.2	24.4	31.9	26.2
	Woman	80.8	75.6	66.7	73.4
	Not Listed	0	0	1.4	0.4
Race/Ethnicity	White	76.0	79.7	82.9	80.3
	Black	0	4.7	2.9	3.6
	East or Southeast Asian	12.0	5.5	1.4	4.9
	South Asian	0	3.9	2.9	3.1
	Latino	0	1.6	0	0.9
	Not listed	12.0	5.5	10.0	7.6
Francophone		7.7	29.6	16.9	23.3
Indigenous	No	96.2	96.2	98.6	96.9
	Yes, First Nation (Status/Non-Status Indian)	0	2.3	0	1.3
	Yes, Métis	0	0.8	0	0.4
	Yes, Inuk (Inuit)	0	0	0	0
	Yes, I use an alternative term	3.8	0.8	1.4	1.3
Isolated from Others	Never	36.0	53.2	47.9	49.5
	Sometimes	52.0	34.7	46.5	40.5
	Usually	8.0	6.5	4.2	5.9
	Always	4.0	5.6	1.4	4.1
Feel left Out	Never	24.0	60.6	48.6	52.7
	Sometimes	64.0	30.7	47.2	39.7
	Usually	8.0	3.9	1.4	3.6
	Always	4.0	4.7	2.8	4.0
Lack Companionship	Never	29.2	54.5	43.5	48.1
	Sometimes	58.3	32.2	50.7	41.1
	Usually	8.3	5.8	1.4	4.7
	Always	4.2	7.4	4.3	6.1
Worry about Losing Home	Never	52.0	74.8	73.2	71.7
	Sometimes	36.0	18.7	22.5	21.9
	Usually	8.0	3.3	2.8	3.7
	Always	4.0	3.3	1.4	2.7
Difficulty Paying Bills	Never	72.7	72.2	76.4	73.6
	Sometimes	27.3	21.4	16.7	20.5
	Usually	0	2.4	2.8	2.3
	Always	0	4.0	4.2	3.6
Money Left Over for Food	Never	0	10.8	13.9	10.7
	Sometimes	13.6	14.2	5.6	11.2
	Usually	22.7	8.3	20.8	14.0
	Always	63.6	66.7	59.7	64.0

Table 12. Characteristics of RespoFndents to the Caregiver Survey

Caregiver Demographics & Characteristics from Survey		**Completion Mode**			
		Online (%, n=29)	Telephone (%, n=25)	Paper (%, n=61)	Total (%, n=115)
Caregiver Demographics					
Age	Under 18 year old	0	0	0	0
	18-64 years old	48.3	41.7	43.1	44.1
	65-74 years old	27.6	29.2	27.6	27.9
	75-84 years old	17.2	25.0	15.5	18.0
	85+ years old	6.9	4.2	13.8	9.9
Sex at Birth	Male	24.1	52.0	26.3	31.5
	Female	75.9	48.0	73.7	68.5
Gender	Man	24.1	45.8	27.6	30.6
	Woman	75.9	54.2	72.4	69.4
Race/Ethnicity	White	77.8	79.2	86.0	82.4
	Black	3.7	4.2	3.5	3.7
	East or Southeast Asian	3.7	4.2	3.5	3.7
	South Asian	3.7	0	1.8	1.9
	Latino	0	0	0	0
	Not listed	11.1	12.5	5.3	8.3
Francophone		7.1	12.5	13.6	11.7
Indigenous	No	100	87.5	100	97.2
	Yes, First Nation (Status/Non-Status Indian)	0	4.2	0	0.9
	Yes, Metis	0	8.3	0	1.8
	Yes, Inuk (Inuit)	0	0	0	0
	Yes, I use an alternative term	0	0	0	0
Sexuality	Heterosexual/Straight	100	95.8	96.6	97.2
	Homosexual/Gay/Lesbian	0	0	1.7	0.9
	Two-Spirit	0	0	0	0
	Bisexual	0	0	0	0
	Not Listed	0	4.2	1.7	1.8
Caregiver Receiving Home Care	Yes, publicly funded home care services	31.0	12.0	13.3	17.5
	Yes, but only services that I pay for myself	3.4	4.0	1.7	2.6
	No	65.5	84.0	85.0	79.8
Caregiving Characteristics					
Relationship	Spouse / Partner	28.6	28.0	36.1	32.5
	Parent / Step-parent / Parent-in-law	35.7	8.0	24.6	23.7
	Child / Step-child / Foster child / Child-in-law	32.1	52.0	26.2	33.3
	Sibling / Half-sibling / Step-sibling	0	4.0	3.3	2.6
	Friend / Neighbour	0	4.0	8.2	5.3
	You do not have an option that applies to me	3.6	4.0	1.6	2.6
Caregiving Hours	Less than one (1) hour per week	3.4	12.0	0	3.5
	1-5 hours per week	10.3	20.0	18.3	16.7
	6-10 hours per week	10.3	4.0	20.0	14.0
	11-20 hours per week	20.7	16.0	15	16.7
	More than 20 hours per week	55.2	48.0	46.7	49.1
Other Caregivers	None, I am the only caregiver.	32.1	41.7	49.2	43.4
	1-2 others	53.6	45.8	49.2	49.6
	3 or more	14.3	12.5	1.6	7.1
Type of Care Provided to Client	Personal Support	58.6	64.0	62.3	61.7
	Nursing	72.4	56.0	60.7	62.6
	Care Coordination	89.7	80.0	83.6	84.3

	Emotional Support	96.6	76.0	88.5	87.8
	Transportation	89.7	76.0	85.2	84.3
	Bills, Finance, or business	86.2	60.0	77.0	75.7
	Houskeeping, shopping, cooking	79.3	80.0	85.2	82.6
	Phone, email, internet	82.8	48.0	55.7	60.9
	Other care	41.4	20.0	37.7	34.8
Caregiver Social Isolation and Financial Difficulty					
Isolated from Others	Never	44.8	66.7	53.4	54.1
	Sometimes	41.4	33.3	46.6	42.3
	Usually	10.3	0	0	2.7
	Always	3.4	0	0	0.9
Feel left Out	Never	48.3	72.0	65.5	62.5
	Sometimes	37.9	28.0	31.0	32.1
	Usually	10.3	0	3.4	4.5
	Always	3.4	0	0	0.9
Lack Companionship	Never	65.5	68.0	59.3	62.8
	Sometimes	20.7	28.0	35.6	30.1
	Usually	13.8	0	5.1	6.2
	Always	0	4.0	0	0.9
Worry about Losing Home	Never	75.0	79.2	73.8	75.2
	Sometimes	21.4	12.5	24.6	21.2
	Usually	0	0	1.6	0.9
	Always	3.6	8.3	0	2.7
Difficulty Paying Bills	Never	70.4	88.0	72.1	75.2
	Sometimes	22.2	4.0	23.0	18.6
	Usually	3.7	4.0	4.9	4.4
	Always	3.7	4.0	0	1.8
Money Left Over for Food	Never	6.9	4.0	13.1	9.6
	Sometimes	6.9	8.0	4.9	6.1
	Usually	17.2	0	26.2	18.3
	Always	69.0	88.0	55.7	66.1
Client Characteristics					
LHIN	HNHB	27.6	52.0	29.5	33.9
	TC	24.1	16.0	19.7	20.0
	Central	31.0	20.0	26.2	26.1
	NE	17.2	12.0	24.6	20.0
Client Gender	Male	24.1	40.0	36.1	33.9
	Female	75.9	60.0	63.9	66.1
Client Age	0-18 years	0	0	1.6	0.9
	19-64 years	6.9	20.0	18.0	15.7
	65-74 years	10.3	12.0	13.1	12.2
	75-84 years	34.5	24.0	26.2	27.8
	85+ years	48.3	44.0	41.0	43.5
Client Rurality	Rural	6.9	12.0	8.2	8.7
	Urban	93.1	88.0	91.8	91.3
Client SRC	Acute	0	8.0	6.6	5.2
	Rehabilitation	6.9	8.0	6.6	7.0
	Maintenance	58.6	48.0	54.1	53.9
	LT Support	34.5	36.0	32.8	33.9
Client CCM*	Complex	19.0	19.0	14.3	16.5
	Chronic	57.1	57.1	61.2	59.3
	Community Independence	14.3	4.8	14.3	12.1

Short Stay	9.5	19.0	10.2	12.1
Child	0	0	0	0

Abbreviation: CCM=Client Care Model

Combinations of Questions Administered

Client Survey

The Client Survey included two optional modules: hospital discharge and home care discharge. Of the 239 completed Client Surveys, 138 (57.7%) respondents did not complete either of the optional modules, 64 (26.8%) completed the hospital discharge module only, 19 (7.9%) completed the home care discharge module only, and 18 (7.5%) completed both optional modules.

Caregiver Survey

The Caregiver Survey included two optional modules, hospital discharge and home care discharge. Of the 115 completed Caregiver Surveys, 64 (55.7%) respondents did not complete either of the optional modules, 32 (27.8%) completed the hospital discharge module only, 8 (7.0%) completed the home care discharge module only, and 11 (9.6%) completed both optional modules.

Overall Completion Rate

Client Survey

The mean completion rate[2] was very good; on average clients and their proxies responded to 93.6% of the survey questions asked (Table 13). This suggests that the difficulty of understanding the questions with the chosen wording and/or the burden of response to the survey may be minimal [4,5].

The mean completion rates was above 90% all three modes and there was no significant difference (p=0.14) in the mean completion rate by mode, though the standard deviation did appear noticeably smaller for telephone than the other two modes. In addition, the minimum completion rate for telephone was 71.1% compared to less than 20% for both online and paper modes. Mean completion rate for the English version of the survey was 93.9% (n=208), whereas it was 91.5% (n=31) for the French version. Respondent type (client, family/friend proxy, client & family/friend proxy, or client & health professional) did not appear to influence completion rate. The overall mean completion rate was above 90% for all demographic groups (where n>5).

Caregiver Survey

The mean completion rate for the Caregiver Survey was excellent; on average caregivers responded to 96.4% of the questions asked (Table 13). This suggests that the difficulty of understanding the questions with the chosen wording and/or the burden of response to the survey may be minimal [5,6].

There no significant difference (p=0.21) in the mean completion rate by mode. The standard deviations of the completion rate across modes were more similar than for the Client Survey, but telephone still had the smallest. The minimum completion rate was 59.1% and this was a paper survey. The completion rate was similarly high for both English and French versions of the survey. The overall mean completion rate was above 95% for all demographic groups (where n>5) except for those who selected 85-94 years as their age (completion rate 92.9%, n=10).

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[2] Substantive (e.g., Not at all, Somewhat, Yes, No, etc.) or "Not applicable" responses were considered valid and included in the numerator of the completion rate calculation.

Table 13. Overall Completion Rate for Client and Caregiver Surveys, by Mode

Mode	Client Survey				Caregiver Survey			
	n	Mean % Completion	SD % Completion	Minimum % Completion	n	Mean % Completion	SD % Completion	Minimum % Completion
Online	27	93.0	16.3	15.4	29	96.2	5.2	80.9
Telephone	136	94.8	5.7	71.2	25	98.5	3.3	84.1
Paper	76	91.7	15.6	17.3	61	95.6	8.2	59.1
Total	239	93.6	11.2	15.4	115	96.4	6.8	59.1

Item-Level Completion Rate

Client Survey

The item-level completion rates for the Client Survey, overall and by survey completion mode, are found in Appendix C. Item-level completion rates were generally very high.

There were three questions in the *Planning Your Home Care* section of the Client Survey with more than 10% non-response (i.e., "Prefer Not to Answer"[3], and "Don't Know/Do Not Remember"); an indication that it may be difficult for some respondents to remember the home care intake process.

There were large numbers of respondents selecting "Not Applicable" to questions in the *Accessing Home Care* section, including items related to equipment/supplies, making changes to services, unmet needs and out-of-pocket costs. Very few respondents, however, were unwilling or unable to respond because they didn't know or couldn't remember.

Most questions in the *Communication* section had high rates of substantive responses, though there were a few with large numbers of "Not Applicable" responses. Notably, 34.3% of respondents selected "Not Applicable" to Q23 "Do you have problems because there are different people providing care?", but 93.3% of respondents selected a substantive response for the previous question "Do you experience a lack of communication between your different providers?" As can be seen in Table 14, the vast majority (72.4%) of respondents who selected "Not Applicable" for item Q23 had selected "Never" for Q22. It is possible that the respondents correctly interpreted these questions with Q22 refering to care coordinators and service providers whilst Q23 refers only to services providers. However, there is a possibility that there could be confusion about whom is referred to in these two items.

For Q25, 13.4% of responses were "Prefer Not to Answer". This item did not have an opt-out option, but "Not Applicable" might be a valid response if the respondent did not have next steps in their home care. Completion of Q21 "Is there someone who is reliable in responding to any questions or issues?" varied by mode; 10% fewer telephone respondents selected a substantive response to this question as compared to both online and paper modes.

There were two questions in the *Home Care Provider* section with a large percentage of "Not Applicable". Many people had not had experience with the complaint process (63.6%) and 14.6% of respondents selected "Not Applicable" to Q27 "How often do changes in appointments/service times negatively affect your care?" Completion of Q35 "Has a home care provider ever shared information that you did not consent to?" varied by mode; 40.7% of online respondents, 6.6% of telephone respondents and 17.1% of paper respondents selected "Don't Know/Do Not Remember". The "Don't Know/Do Not Remember"response option was not read allowed to telephone respondents.

The percentage of substantive responses for questions in the *After a Hospital Stay* and *After Your Home Care Ended* sections were, generally, above 90% except for Q41 "Did your home care providers seem well-informed and up-to-date?" and Q42 "Were you told different things by hospital staff and your home care providers?" The number of "Don't Know/Do Not Remember" were higher for these two questions indicating they were potentially more difficult to respond to.

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[3] "Prefer Not to Answer" only available on the Online survey, otherwise left missing.

Of the questions in the *About You* section, the question asking about the respondent's sexuality had the greatest number of non-responses (14.2% "Prefer Not to Answer"). Two other questions about the respondent's living situation also had more than 10% "Prefer Not to Answer".

While the overall completion rates were similar across English and French surveys, there were a few questions where approximately 10% fewer French respondents selected a valid response. These include items Q03-Q05, Q19, Q27 and Q34.

Table 14. Cross Tabulation (n) of items Q22 and Q23

Q22 "Do you experience a lack of communication between your different providers?"	Q23 "Do you have problems because there are different people providing care?"					
	Never	Sometimes	Usually	Always	Not Applicable	**Total**
Never	65	18	2	3	55	143
Sometimes	3	25	6	6	13	53
Usually	1	5	2	1	1	10
Always	3	1	0	5	7	16
Total	72	49	10	15	76	222

Caregiver Survey

The item-level completion rates for the Caregiver Survey, overall and by survey completion mode, are found in Appendix C. Item-level completion rates were generally excellent.

Nearly all respondents selected a substantive response option for all questions in the *Being a Caregiver* section of the survey. In the *Caregiver Supports* section, almost 30% of respondents selected "Not Applicable" to Q08 "If you needed support, did a home care provider connect you to other services?" "Not Applicable" was also a common response to many questions in the *Accessing Home Care*, *Responding to Your Needs*, *Communication* and *Home Care Provider* sections, but the number of "Prefer Not to Answer" and "Don't Know/Do Not Remember" responses was generally low. For Q25 from the *Home Care Provider* section, it is not clear whether someone who did not respond and whose response to this question was coded as "Prefer Not to Answer" either did not want to answer this question or if none of descriptions about home care providers were true. This question requires a "None of the above" option to distinguish between these two possibilities. Q36 in the *Overall* section can also do with a "None of the above" option. Fifteen percent of respondents selected "Not Applicable" to Q37 "How helpful are/were [client]'s home care services in allowing them to stay home?"

Generally, item-level completion rates were similar across modes. The low number of responses to the optional hospital discharge and home care discharge sections, however, makes it difficult to assess the impact of mode on these questions.

PERFORMANCE OF THE CLIENT AND CAREGIVER SURVEYS

Response Distribution

The following section highlights the distribution of responses to questions on the client and Caregiver Surveys. We consider the variability of the responses to each question, with a particular focus on ceiling and floor effects (i.e., the percentage of respondents to the top- and bottom-boxes). The response distribution for each survey may be found in Appendix D.

Client Survey

The survey employed different response options for different questions. There were a number of questions that used a Yes/No scale and that had very little variability in the responses. For example, the first question, "When you first started getting home care, did someone tell you what care and services you would get?", and Q06 "Did your home care start when you needed it", were both over 90% in the affirmative. Ninety-eight percent of respondents selected "No" to item Q35 "Has a home care provider ever shared information that you did not consent to?" If the purpose of this survey is to help identify areas for quality improvement, this question might be removed. The two former questions, Q01 and Q06, could be converted to a four-point response scale to assess the degree to which the care and services were explained and how quickly their home care services started.

There was a good distribution of responses to the items employing a four-point scale in the *Planning Your Home Care* section. In other sections of the survey, however, noticeably fewer respondents selected the bottom-box (e.g., "Never" if item was positively worded, "Always" if item was negatively worded) and a majority of responses fell into the top-two boxes. For example, in the *Home Care Providers* section, items Q30 "Do your home care providers treat you with courtesy and respect?", and Q32 "Do you feel safe receiving home care from your home care providers?", less than 1% selected "Never" and 80% selected "Always".

Some questions did not use a Likert scale, rather respondents were asked to select among a list of, for example, additional services needed. Of the services listed in items Q14 "What additional help did you need?", and Q15 "What services have you or your family paid for?", "Other special therapies" was the least often selected. The listed services was fairly comprehensive; 6.1% and 6.9% selected "Other home support services, not listed here" for these two items, respectively. For item Q20 "If you were not able to understand what your home care providers said, was it for any of the following reasons?", the least popular response was "Not listening/paying attention". It isn't clear to whom this response option refers (client or home care provider).

There were differences in response distribution by mode. Unfortunately, there were too few online responses to truly gauge responses to this mode, but, generally, telephone respondents appeared more likely to select from one of the extreme categories (top or bottom-box) compared to individuals who responded by paper. For example, 30% more telephone respondents than paper respondents selected "Fully" when asked "Do you understand what home care services you should receive?" This may be because respondents have difficulty recalling all of the available response options on the telephone. The discrepancy by mode, however, might also be explained by differences in characteristics of the respondents for each mode. For example, a higher percentage of telephone surveys (68%) than paper surveys (41%) were completed by the client by themselves.

Caregiver Survey

The Caregiver Survey also employed different response options for different questions. Similar to the Client Survey, questions that used a Yes/No response option were predominantly answered in the affirmative. For example, more than 80% of respondents stated that the client's home care started when it needed to. It may be possible to use a different response scale in order to gather more meaningful information.

In general, for questions using a 4-point scale, the percentage top-box response was less than 50% and there was good distribution of responses across at least three of four response options. The percentage bottom-box, while higher than the Client Survey, was usually 10% or less.

It may be possible to reduce the number of response options listed in items Q15, Q16, and Q18. For example, for item Q18 "What help do you need to support yourself as a caregiver?", no one selected either "personal support for you" or "nursing and medical treatments for you". Other items may have superfluous response options, such as Q14 "Do you have all the equipment and supplies you need for [client] to continue to live at home?", where 76.8% selected "Yes, we have all the equipment and supplies needed", 15.2% selected "Not Applicable", but only 8.1% selected among the three other response options. These three response options could, instead, be combined to reduce the burden on respondents.

There were two other select all that apply questions worth noting. Q25 asked about the client's home care providers in general (e.g., are they punctual, courteous and respectful, etc.) and Q36 asked if the caregiver is satisfied with various aspects of home care (e.g., supports available to them, amount of care client received). For item Q25, between 61.4% (pay attention to detail) and 93% (courteous and respectful) of respondents selected each response option. For Q36, between 56.8% (supports available to me as a caregiver) and 75.7% (the type of care that [client] was eligible for) of respondents selected each response option. While this response format does not consider the degree to which each of the response options was experienced, it is reasonably clear where improvements may be required.

Congruent with the Client Survey, there were differences in response distribution by mode. While the sample sizes are small, the percentage of top-box response was higher for telephone than either of the other modes. Notably, telephone respondents were much more likely to select all of the response options for Q25 and Q36 and, thus, it would not be possible to use these questions to direct quality improvement activities based on the telephone survey.

Patterns of Client Survey Responses Across Demographic Groups

Survey Language

Generally, response distribution was similar for French and English surveys with the exception of communicating in preferred language, which was less positive for French completions, and a higher percentage of French respondents selecting *language barrier* as reason for being unable to understand.

Age

There were too few responses from proxies of children (age 0-18 years) to assess whether the differences in response distribution observed with the previous version of the CCEE were also seen with the revised survey. There were some differences between the other age groups, but none of which invalidate the survey.

Gender/Sex

Response distributions were, generally, similar between male and female respondents.

Ethnicity

Responses to the Client Survey were, generally, less positive among those who did not identify as White. There was not sufficient data to stratify by other races or ethnicities.

Residence Location

There were not enough responses from clients residing in rural locations to stratify by this variable.

Client Care Model Classification

There were not enough responses from each of the CCM classifications to examine differences in response distribution.

Comparison of Client and Proxy Responses

There were 77 Client Surveys completed solely by a friend or relative of the service user. Generally, proxies responded slightly less positively than did clients, but distributions were reasonably similar with the bulk of respondents selecting one of the top two boxes for most questions. Notable differences between client and proxy responses included client and caregiver involvement in planning where 45% of client respondents said they were fully involved, but only 27.5% of proxies noted that the client was fully involved. By contrast, when proxies completed the Client Survey, a higher percentage indicated that the family or caregiver was fully involved in planning. In the *Accessing Home Care* section, there were differences in the types of additional services required and services paid for out-of-pocket, likely reflecting differences in client needs and associated with their ability to respond to the survey. In the *Communication* section, a greater proportion of proxy respondents experienced problems because of different people providing care (5% of clients selected Always versus 12% of proxies) and fewer understood the next steps in the client's home care (56% of clients selected Always versus 31% of proxies).

There was an additional 19 surveys completed by both the service user and a friend or relative and three surveys completed with the help of a service provider; there were too few respondents of these types to assess their impact on the response distributions of each question.

Response Patterns by Survey Mode

Table 30 and 31 in the Appendix provide overall results by survey mode. In both the client and the caregiver modes, it is very clear that there are much more positive ratings given by telephone respondents when compared to either online or paper-based respondents. For example, in Table 30 we see that clients indicated that they "Fully" understood what services they should receive 37%, 58% and 28% in the online, telephone and mail-response surveys respectively; similarly telephone respondents indicated that they "Always" felt their homecare providers listened carefully to them 65%, while this was reported as "Always" only 31% and 40% of the time in the online and paper-based respondents.

In the Caregiver Survey, 48% responded that they were fully prepared for their caregiver role whilst this was only 14% of online respondents and 24% of paper-based respondents; 68% of telephone respondents indicated that they fully understood what services the client should receive whilst this was only 35% of online and 33% of paper-based respondents.

EXPLORATORY FACTOR ANALYSIS

Identification of Domains

Client Survey

Exploratory Factor Analysis (EFA) was performed to assess the psychometric properties of the survey, including determining the existence of any summative or overarching domains reflected by groups of questions. EFA was performed with the core client experience questions that employed ordered response scales (e.g., Yes/No, Not at all/Somewhat/Mostly/Fully). From the Client Survey the following questions were included in the EFA: Q01-Q07, Q09-Q12, Q16-Q19, Q21-Q32 and Q35. All opt-out options (e.g., "Don't Know/Do Not Remember", "Not Applicable", etc.) were replaced with missing values. Due the large number of missing values we used the expectation-maximization algorithm to estimate the covariance matrix. This covariance matrix was then used to obtain a factor solution. The Kaiser-Meyer-Olkin Test indicated that the data were suitable for factor analysis (KMO=0.85). The number of factors to be extracted was determined by examining the scree plot and model selection criteria (e.g., Bayesian information criterion (BIC)). The scree plot revealed breakpoints at 3 and 7 factors, while a 3 factor solution had the lowest BIC. Models with 6 or more factors were Heywood cases, an indication that the sample size is too small for the number of factors extracted by the model. As a result, we proceeded with a 3 factor solution. Correlation (>0.32) of the factors indicated that an oblique rotation method was indicated. Absolute values of the rotated factor loadings >0.4 was used to assign items to factors. Those items that did not have a factor loading >0.4 were not included in any factor. The promax rotation method resulted in the most items assigned to a factor and the simplest solution.

The factor loadings may be found in Table 15. Items Q01 and Q03 to Q5 loaded on the first factor or domain; we describe this factor as "*Service Planning*". Items Q07, Q09-Q10, Q18-Q19, Q21, Q25 and Q28-Q29 comprise the second factor or domain; we describe this domain as "*Personalization of service*" as many of th items relate to responsiveness, and individualization of services. Items Q17, Q22-Q24, Q26-Q27, Q30-Q32 and Q35 comprise the third factor or domain and we title this factor or domain "*Quality of Service Experience*" as these items relate to an array of items considering coordination of services, quality of services, and reliability of services. Items Q02, Q06, Q11-Q12 and Q16 did not load on any of these factors. Cronbach's Alpha (α), measuring internal consistency, was calculated for each factor; α=0.82, 0.84 and 0.64 for factors 1, 2 and 3, respectively. The values for factors 1 and 2 exceeded the recommended cut-off value of α=0.70 [6]. If Q35 was dropped from factor 2, Cronbach's Alpha increased slightly. A similar result was observed if Q01 was removed from factor 3, but its Cronbach's Alpha never reached the required threshold for reliability. Removing other items resulted in fairly small decreases in reliability for each factor, an indication that it may be possible to remove some items while not negatively impacting the ability of the survey to measure the underlying domains.

Table 15. Factor loadings from the exploratory factor analysis of the Client Survey

Item	Abridged Question Text	Factor 1	Factor 2	Factor 3	Cronbach's Alpha if item Removed‡
Q03	Were you involved in planning your home care as much as you wanted to be?	0.62	0.17	-0.05	0.537
Q04	Did your home care providers include your family/caregiver in planning?	0.58	-0.12	0.06	0.515
Q05	Were your values, identity(ies), language preferences, and culture considered?	0.67	0.00	0.07	0.492
Q01	Did someone tell you what care and services you would get?	-0.47	0.01	-0.04	0.669
Cronbach's Alpha† for domain *"Service Planning"*		**0.640**			
Q07	Do you understand what home care services you should receive?	0.31	0.53	-0.25	0.813
Q09	Are you receiving the right types of home care services for your needs?	0.00	0.65	0.08	0.782
Q10	Do you receive enough hours of home care?	-0.04	0.51	-0.09	0.810
Q18	How often can you communicate with your providers in your preferred language?	-0.02	0.40	0.15	0.808
Q19	Do home care providers explain things in a way that is easy to understand?	-0.01	0.46	0.29	0.792
Q21	Is there someone who is reliable in responding to any questions or issues?	0.21	0.42	0.13	0.806
Q25	How often do you understand the next steps in your home care?	-0.02	0.83	-0.29	0.793
Q28	Do your home care providers stay long enough to provide the care you need?	-0.20	0.59	0.23	0.789
Q29	Do your home care providers help you with the things you need?	-0.15	0.65	0.14	0.787
Cronbach's Alpha† for domain *"Personalization of Service"*			**0.816**		
Q17	Do you feel that your home care providers listen carefully to you?	0.07	0.37	0.46	0.815
Q22	Do you experience a lack of communication between your different providers?	0.01	0.09	-0.52	0.838
Q23	Do you have problems because there are different people providing care?	-0.03	0.12	-0.62	0.816
Q24	How often do your providers notify you of a change in service/service time?	0.09	0.20	0.46	0.823
Q26	How often do your home care providers arrive when they are scheduled to?	-0.03	0.26	0.43	0.827
Q27	How often do changes in appointments/service times negatively affect your care?	-0.01	0.25	-0.67	0.829
Q30	Do your home care providers treat you with courtesy and respect?	0.00	0.24	0.57	0.815
Q31	Do your home care providers have the necessary skills?	-0.04	0.27	0.57	0.812
Q32	Do you feel safe receiving home care from your home care providers?	-0.07	0.22	0.59	0.821
Q35	Has a home care provider ever shared information that you did not consent to?	0.13	-0.02	0.47	0.843
Cronbach's Alpha† for domain *"Suitability of Services"*				**0.839**	
Q02	Were you asked in which language you would like to receive your services?	-0.38	0.12	-0.05	
Q06	Did your home care start when you needed it?	-0.21	-0.01	-0.23	
Q11	How often are home care visits arranged at a time that works for you?	0.16	0.30	0.26	
Q12	Are you able to make changes to your home care services if needed?	0.32	0.30	0.02	
Q16	How often do home care providers introduce themselves and explain their role?	0.14	0.32	0.26	

Note: Items Q02, Q06, Q11, Q12, Q16 did not have sufficiently high factor loadings on any of three factors.

† Cronbach's Alpha was calculated for all items originally assigned to each factor based on absolute values of factor loadings >0.4.

‡ Cronbach's Alpha was recalculated excluding each item to determine if scale reliability was higher without the item.

Caregiver Survey

EFA was also performed to assess the psychometric properties of the Caregiver Survey using the same methodology employed for the Client Survey. Items Q06-Q07, Q9-Q13, Q17 Q19-Q20, Q22-Q25 and Q36 were included in the EFA. The KMO was 0.85 indicating that the data were suitable for factor analysis. Only 1 factor was retained. The factor loadings may be found in Table 16. Factor loadings for items Q06, Q09, Q11, Q17, Q36_2 and Q36_3 were below 0.4. These were not included in the reliability analysis. The overall Cronbach's Alpha was very high (α=0.925). If item Q10 was removed, there was a slight increase in reliability. Cronbach's Alpha did not otherwise change very much if items were removed, an indication that there may be unnecessary items when measuring the underlying domain.

Table 16. Factor loadings from the exploratory factor analysis of the Caregiver Survey

Item	Abridged Question Text	Factor 1	Cronbach's Alpha if item Removed‡
Q07	Do you feel well supported by home care providers as a caregiver?	0.64	0.922
Q10	Do you understand what home care services [client] should receive?	0.41	0.928
Q12	Are you able to make changes to [client]'s home care services if needed?	0.48	0.925
Q13	How often do changes in appointments/service times negatively affect you?	-0.53	0.924
Q19	Is there someone who is reliable in responding to any questions or issues?	0.50	0.923
Q20	Do home care providers explain things in a way that is easy to understand?	0.66	0.922
Q22	How often do you feel that the home care providers listen carefully to you?	0.71	0.919
Q23	Do you observe a lack of communication between different home care providers?	-0.61	0.921
Q24	Do you understand the next steps in [client]'s home care?	0.40	0.923
Q25_1	Generally, home care providers...are punctual	0.53	0.923
Q25_2	Generally, home care providers...are courteous and respectful	0.51	0.925
Q25_3	Generally, home care providers...keep us informed	0.80	0.920
Q25_4	Generally, home care providers...are efficient in the use of alloted time	0.73	0.921
Q25_5	Generally, home care providers...have the necessary skills	0.77	0.921
Q25_6	Generally, home care providers...are emotionally supportive	0.70	0.921
Q25_7	Generally, home care providers...pay attention to detail	0.83	0.919
Q25_8	Generally, home care providers...communicate clearly	0.84	0.920
Q25_9	Generally, home care providers...are friendly	0.61	0.923
Q25_10	Generally, home care providers...are safety oriented	0.81	0.920
Q25_11	Generally, home care providers...are responsive to needs	0.74	0.921
Q25_12	Generally, home care providers...are reliable	0.76	0.920
Q36_1	Overall, I am satisfied with...the supports available to me as a caregiver	0.59	0.923
Q36_4	Overall, I am satisfied with...the way care was provided by home care providers	0.64	0.922
Cronbach's Alpha† for domain *"Comprehensive Experience"*		**0.925**	
Q06	How well prepared did you feel for your caregiving role?	0.31	
Q09	Were you involved in planning [client]'s home care as much as you wanted to be?	0.30	
Q11	How often are home care visits arranged at a time that works for you?	0.38	
Q17	Do you have enough money to pay for everything needed to support [client]'s?	0.23	
Q36_2	Overall, I am satisfied with...the type of care that client was eligible for	0.39	
Q36_3	Overall, I am satisfied with...the amount of care that client was receiving	0.39	

Note: Items Q06, Q09, Q11, Q17, Q36_2 and Q36_3 did not have sufficiently high factor loadings and were not included in the Cronbach's Alpha.

† Cronbach's Alpha was calculated for all items originally assigned to the factor based on absolute values of factor loadings >0.4.

‡ Cronbach's Alpha was recalculated excluding each item to determine if scale reliability was higher without the item.

Confirmation of Domains by Mode

Client Survey

Using the factors identified in the full sample, factor analysis was run for each mode separately to see if the factors were supported within each survey mode. KMO for items comprising factor 3 was below 0.5 for the online mode. There were some items for each factor that did not have a factor loading >0.4 for all three modes. For factor 1, these include Q10 for paper and telephone modes, and Q07 for the online mode. For factor 2, Q22, Q26 and Q35 had factor loadings <0.4 for the paper mode, while Q22, Q23 and Q27 had factor loadings <0.4 for the online mode. For factor 3, Q01 and Q05 had factor loadings <0.4 for paper and online modes, respectively. The first two factors were sufficient across all modes. The third factor was only substantial on the paper-based survey.

Table 17. Factor loadings from the factor analysis of the Client Survey by mode.

Item	Abridged Question Text	Online		Telephone		Paper	
		Factor Loading	Cronbach's Alpha if item Removed‡	Factor Loading	Cronbach's Alpha if item Removed‡	Factor Loading	Cronbach's Alpha if item Removed‡
Q01	Did someone tell you what care and services you would get?	-0.44	0.549	-0.58	0.570	-0.36	0.837
Q03	Were you involved in planning your home care as much as you wanted to be?	0.78	0.411	0.79	0.445	0.57	0.709
Q04	Did your home care providers include your family/caregiver in planning?	0.53	0.363	0.45	0.473	0.75	0.637
Q05	Were your values, identity(ies), language preferences, and culture considered?	0.34	0.519	0.5	0.452	0.99	0.543
Cronbach's Alpha†		**0.544**		**0.567**		**0.770**	
Q07	Do you understand what home care services you should receive?	0.33	0.895	0.41	0.741	0.46	0.847
Q09	Are you receiving the right types of home care services for your needs?	0.90	0.854	0.69	0.707	0.61	0.829
Q10	Do you receive enough hours of home care?	0.71	0.867	0.37	0.749	0.37	0.850
Q18	How often can you communicate with your providers in your preferred language?	0.54	0.886	0.46	0.737	0.65	0.839
Q19	Do home care providers explain things in a way that is easy to understand?	0.84	0.861	0.51	0.730	0.76	0.826
Q21	Is there someone who is reliable in responding to any questions or issues?	0.65	0.894	0.50	0.728	0.60	0.839
Q25	How often do you understand the next steps in your home care?	0.54	0.882	0.60	0.716	0.58	0.830
Q28	Do your home care providers stay long enough to provide the care you need?	0.92	0.856	0.54	0.731	0.77	0.825
Q29	Do your home care providers help you with the things you need?	0.90	0.862	0.65	0.714	0.80	0.825
Cronbach's Alpha†		**0.886**		**0.751**		**0.850**	
Q17	Do you feel that your home care providers listen carefully to you?	0.89	0.859	0.69	0.796	0.62	0.830
Q22	Do you experience a lack of communication between your different providers?	-0.26	0.887	-0.44	0.816	-0.37	0.856

Q23	Do you have problems because there are different people providing care?	-0.30	0.874	-0.54	0.797	-0.71	0.820
Q24	How often do your providers notify you of a change in service/service time?	0.82	0.847	0.59	0.810	0.56	0.838
Q26	How often do your home care providers arrive when they are scheduled to?	0.83	0.858	0.62	0.811	0.40	0.844
Q27	How often do changes in appointments/service times negatively affect your care?	-0.37	0.872	-0.41	0.816	-0.55	0.827
Q30	Do your home care providers treat you with courtesy and respect?	0.83	0.866	0.68	0.799	0.85	0.822
Q31	Do your home care providers have the necessary skills?	0.82	0.859	0.70	0.798	0.79	0.820
Q32	Do you feel safe receiving home care from your home care providers?	0.88	0.862	0.68	0.805	0.77	0.833
Q35	Has a home care provider ever shared information that you did not consent to?	*	*	0.51	0.826	0.35	0.854
Cronbach's Alpha†		**0.879**		**0.824**		**0.849**	

Note: * Q35 was omitted due to collinearity due to a lack of response variability (all respondents in online had same response).
† Cronbach's Alpha was calculated for all items originally assigned to the factor based on absolute values of factor loadings >0.4.
‡ Cronbach's Alpha was recalculated excluding each item to determine if scale reliability was higher without the item.

Confirmation of Domains by Survey Language

Client Survey

Using the factors identified in the full sample, factor analysis (Table 18) was run on surveys completed in French (n=31). For factor 1, two items, Q18 & Q19, did not have factor loadings >0.4. Cronbach's alpha of all items in factor 1 was 0.80. Reliability, however, was higher without Q18. KMO was below 0.5 for factor 2, indicating insufficient sample. Item Q32 was omitted due to collinearity. Items Q22, Q27 and Q35 had factor loadings <0.4. Cronbach's alpha for all items in factor 2, except Q32, was 0.72. The expectation-maximization algorithm did not converge for the items identified for factor 3. Item Q01 was removed because there was no variation. EFA of the remaining three items had a KMO=0.56, which is poor. Item Q03 had a factor loading below 0.4. The Cronbach's alpha for all items in factor 3 was 0.61.

Table 18. Factor loadings from the factor analysis of the French Client Survey

Item	Abridged Question Text	French	
		Factor Loading	Cronbach's Alpha if item Removed‡
Q01	Lorsque vous avez commencé à recevoir des soins à domicile, vous a-t-on expliqué quels seraient les soins et les services que vous allez recevoir ?	-	-
Q03	Étiez-vous impliqué(e) dans la planification de vos soins à domicile autant que vous le vouliez ?	0.33	0.688
Q04	Le personnel a-t-il impliqué votre famille ou votre aidant(e) naturel(le) dans la planification de vos soins à domicile ?	0.94	0.329
Q05	Vos valeurs, identité(s), préférence(s) linguistique(s) et votre culture ont-elles été prises en compte lors de la planification de vos soins à domicile ?	0.53	0.468
Cronbach's Alpha†		**0.612**	
Q07	Comprenez-vous quels services de soins à domiciles vous devriez recevoir ?	0.42	0.786
Q09	Les genres de services de soins à domicile que vous recevez, correspondent-ils à vos besoins ?	0.76	0.760

Q10	Recevez-vous suffisamment d'heures de soins à domicile ?	0.54	0.790
Q18	Communiquez-vous avec le personnel dans la langue dans laquelle vous vous sentez le plus à l'aise ?	0.28	0.802
Q19	Le personnel vous donne-t-il des explications qui sont faciles à comprendre ?	0.29	0.794
Q21	Y a-t-il quelqu'un de fiable pour répondre à vos questions ou à vos problèmes liés aux soins à domicile ?	0.74	0.772
Q25	Comprenez-vous les prochaines étapes à venir dans vos soins à domicile (p. ex. les services qui seront fournis et les étapes à suivre afin de pouvoir mieux gérer votre santé) ?	0.81	0.745
Q28	Le personnel reste-t-il assez longtemps pour fournir les soins nécessaires ?	0.64	0.765
Q29	Le personnel vous aide-t-il avec les choses dont vous avez besoin… qui vous sont importantes ?	0.53	0.782
Cronbach's Alpha†		**0.798**	
Q17	Le personnel vous écoute-t-il attentivement ?	0.59	0.683
Q22	Y a-t-il un manque de communication entre les différents membres du personnel qui occasionne un effet négatif sur vos soins à domicile (p. ex. un prestataire n'informe pas un autre du plan de soins) ?	-0.21	0.749
Q23	Avez-vous des problèmes parce qu'il y a différentes personnes qui vous fournissent des soins (p. ex. avec les services de soutien à la personne ou avec les soins infirmiers) ?	-0.83	0.674
Q24	Le personnel vous avertit-il à temps s'il y a un changement aux services ou à l'horaire de vos services ?	0.55	0.676
Q26	Le personnel est-il ponctuel ?	0.40	0.649
Q27	Y a-t-il des effets négatifs sur vos soins liés aux changements d'horaire des services par le personnel ?	-0.07	0.742
Q30	Le personnel vous traite-t-il avec courtoisie et respect ?	1.00	0.658
Q31	Le personnel possède-t-il les compétences nécessaires pour vous fournir de bons soins à domicile ?	0.46	0.682
Q32	Vous sentez-vous en sécurité en obtenant des soins à domiciles du personnel ?	-	-
Q35	Un membre du personnel a-t-il déjà communiqué vos renseignements personnels avec quelqu'un sans votre consentement ?	0.33	0.713
Cronbach's Alpha†		**0.718**	

Descriptive Characteristics of Each Domain

Client Survey

Negatively worded items were recoded such that higher values represented a more positive response. All retained items for each factor were on a scale of 1-4. We calculated a score for each domain by taking the mean of all questions within each factor (provided ≥50% of questions within a scale were completed). Descriptive statistics for each of the three identified domains may be found in Table 19. Factor 2 had the highest ratings, while factor 3 had the lowest. Factors 1 and 2 were negatively skewed, which means the average is less than the median and these factors are not normally distributed.

Table 19. Descriptive statistics of the domains identified through exploratory factor analysis.

Domain	Number of questions	n	Mean (SD)	Median (IQR)	Range	Skewness	Kurtosis
Factor 1	9	231	3.26 (0.55)	3.33 (3-3.75)	1.38-4	-0.87	3.31
Factor 2	9	230	3.46 (0.52)	3.63 (3.14-3.88)	1.56-4	-1.20	4.11
Factor 3	3	217	2.85 (0.92)	3 (2-3.67)	1-4	-0.37	2.10

Abbreviations: IQR = Interquartile range; SD = Standard deviation.
Note: Factor 3's Cronbach's Alpha was below the recommended cutoff.

Caregiver Survey

Negatively worded items were recoded such that higher values represented a more positive response. Items Q25_1-Q36_4 were recoded, using a lineary transformation, to a score between 1 and 4. We calculated a score for each domain by taking the mean of all questions within each factor (provided ≥50% of questions within a scale were complete). Descriptive statistics for each of the three identified domains may be found in Table 20. The domain was negatively skewed with a mean of 3.19 (SD 0.8).

Table 20. Descriptive statistics of the domain identified through exploratory factor analysis.

Domain	Number of questions	n	Mean (SD)	Median (IQR)	Range	Skewness	Kurtosis
Factor 1	22	114	3.19 (0.8)	3.55 (2.62-3.84)	1-4	-0.94	2.69

Abbreviations: IQR = Interquartile range; SD = Standard deviation.

SUMMARY OF QUANTITATIVE ASSESSMENT

Response Rates, Completion Rates and Completion Time

The overall response rates to the surveys was relatively low but provided sufficient sample for aggregate testing of both the client and the caregiver surveys with more than 100 respondents to each instrument. The return rate for caregiver surveys was approximately half that of clients. The characteristics of respondents were very akin to those of the field test sample and the full provincial sample of all home care clients. The primary differences were that the field test survey respondents were all existing clients and fewer had been discharged from home care as compared to the full provincial population and the field test sample population.

Overall, the completion rates of all items in both client and caregiver surveys were high and there was a substantive distribution of responses across all repose categories for most items. These two observations suggest that the questions and response options for nearly all survey items were meaningful to respondents. The time to complete the surveys was approximately 30 minutes by telephone.

A few items had responses that resulted in less than certain interpretation. In particular, Q22 on the client survey asked about a lack of communication between providers with the assumption that all clients at least have a care coordinator and one service provider. Although the survey indicated that care providers included care coordinators, it is not certain that respondents considered these two provider types were considered when responding to Q22. The responses provided to Q22 and Q23 as indicated in Table 14 are logical but it is worth validating that respondents are considering both coordinator and service providers.

Findings Regarding Mode

The field test of the Client and Caregiver Surveys was conducted to ensure that the full launch of the study would be implemented using a well tested survey instruments, and via the most effective and efficient methods. Overall, clients responded best to paper/mail-back and telephone. When there is no direct way to reach the caregivers, having a paper survey provided to them through the client may increase the chances of participation. Not only does it add validity because it comes from the client, but it also eases the process of participation where they already have a hard copy of the survey and can conveniently complete it and mail it back using a paid postage envelope. Note, among caregiver completes, there were 72 response completions from mail-back caregiver sample versus 29 from online caregiver sample, and paper represents the highest proportion of all completes among caregivers (53%). If the actual study uses the client as the sample frame, and caregivers are offered an online option, then online can be considered for clients as well, even though clients did not respond to it as well as caregivers did, there were still a number of clients that did complete the online version. The online option to complete the survey online marginally improves response rates, is the most cost-effective mode and does not seem to impact age and gender demographics overall.

A very clear and consistent finding in both the client and the caregiver responses was that the ratings on nearly all items was substantially higher on the telephone survey as compared with the mail or online versions of the survey. This finding is interpreted that both client and caregiver respondents experienced a *positive response bias* when speaking with an individual over the phone. The consistency of the paper and online versions and the random assignment of respondents to each mode provides support for this interpretation.

Validity of Survey Response Options

Tables 31 to 33 in the Appendix includes individual item frequencies to all items. Some response options were rarely selected by respondents and may be candidates for removal. In particular in the item regarding connection to other services after home care ended no client (Q43) selected the option "Yes I was connected but they were not the right ones [services]"; and less than five percent of clients and one caregiver respectively selected the option "Yes, I was connected, but I declined". While the response options to this item reflect patient and caregiver input, they are fairly complex response options and the value of the current response options is questionable such that some rationalization and further consistency could be considered.

Issues with equipment and supplies (client Q08; caregiver Q14) were also indicated for less than 10% of the client or caregiver respondent samples and the responses to this item were also fairly complex. Similary fewer than 10% of client (Q33) or caregiver (Q26) respondents indicated harms due to errors or mistakes and and only 2% of clients indicated that information was shared without consent (Q35). Within the item about additional services on the client survey (client Q14) "other special therapies" and "other supports" both received only 6% of client responses; however caregivers reported much higher rates of unmet need with 13.5% and 9.9% of caregivers reporting additional services needed in these two areas. In contrast, caregivers themselves indicated (cargiver Q18) "housekeeping etc" and "transportation" at only 2.7%, "emotional support" at 3.6% and "special therapies" and "informational support" were neeed with only 6.4% frequency. Finally at least 90% of clients indicated that someone told them what care and services they would get (Q01) and 92% indicated that home care started when they needed it (Q06). These may still be important introductory and evaluation questions that could be prioritized in consultation with clients and caregivers.

Survey Scales/Domains

Factor analyses are provide information about survey items that are closely related to other items within general dimensions of care (see Table 15). For example, removing Q07 would result in a reduction in the scale reliability of "Communication" of -0.003. Similarly Q18 "How often can you communicate with your providers in your preferred language?" had a borderline factor loading of 0.40 and excluding this item would reduce overall reliability by -0.008; Q21 "Is there someone who is reliable in responding to any questions or issues…?" had a factor loading of 0.42 and contributed 0.010 to the overall reliability; Q10 "Do you receive enough hours of home care?" had a higher factor loading of 0.51 but contributed only 0.006 to the overall reliability; Q22 "Do you experience a lack of communication between your different providers?" had a factor loading of (-) 0.52 and only contributed 0.001 to the overall reliability of the "Quality of service experience" dimension. Finally Q01 had a weak factor loading (-) 0.47 and adversely affected the reliability of the dimension.

We identified a some items that contributed relatively little incremental information regarding the overall client experience (e.g., Q01, Q07, Q35) because there was little variability in responses and/or they contributed little to overall domain reliability. Each of these survey items were deemed to be important dimensions of care to clients during our engagements in developing the survey but contribute relatively little incremental information to the overall experience ratings and hence might be priority considerations for reducing the survey length. Most of these items however did have substantive distribution across response categories indicating that these aspects of care represent opportunities for improving home care services. Because of the potential individual importance of these items, it would not be reflective of our principle in this survey development process to "capture what is important to clients and caregivers" if we were to recommend removing these items from the survey without futher client and caregiver consultation.

In the caregiver survey, with few items and a dominance of one question (Q25)that had 12 individual dichotomous (yes/no) ratings of services, only one overall factor/domain of service quality was observed. Further exploratory analyses (not reported) with and without Q25 suggested that there may be additional domains relating to being "*Attentive to caregiver/ involving and being responsive to caregiver"; "High Reliability"* and *"Service Orientation"* as well as *"caregiver knows how to manage and obtain services for client"*. These scales did not provide statistical advantage over the single fator/domain solution presented in this report. It is possible that with a larger sample size, these factors may become more apparent and statistically robust.

Item Consistency in Client and Caregiver Surveys

There are also some differences between response options provided to patients and caregivers that could be re-evaluated to determine if a common response set is appropriate. In particular, the complaint question (Client Q34; Caregiver Q27) addresses discomfort amongst clients versus difficulty amongst caregivers. This reflects feedback in client and caregiver engagement sessions. Additionally conection to servies after discharge had different response options for clients and caregivers (Client Q43; Caregiver Q32).

Summary

In summary, the quantitative analysis of the field-test survey suggested that the survey instruments provide a valid assessment of client and caregiver experience. The items appear to be relevant and there is generally a range of response options represented at substantive frequencies amongst survey responses. There are three meaningful scales in the client survey regarding "planning", "personalization" and "service quality experience". The dichotomous approach to measuring quality of care in the caregiver survey likely resulted in the single overall categorization of an overall assessment of experience. There are only a few obvious areas to suggest reducing the overall length of the survey based on empirical analyses alone -- too few to make a substantive difference in the overall length of the survey.

OPEN-TEXT COMMENTS

A Rationale for Qualitative Assessment

Both the Client and Caregiver Surveys had a "Final comments" section with three open-text questions. Respondents were given the opportunity to share anything about their experience with home care that: 1) worked well for them; 2) did not work well for them; and 3) if they had any suggestions for improvements to their home care services.

All open-text comments were reviewed and analyzed to determine if there were important concepts related to the quality of home and community care services that were not adequately captured in the existing survey questions or design. As part of the survey refinement exercise to ensure the surveys' response time is sustainable, the themes identified in the comments may also help inform the decision on which existing questions are suitable to keep or remove.

Method

The qualitative analysis consisted of two parts. In the first part of the open-text analysis, all 240 comments from clients and 129 comments from caregivers were reviewed and analyzed. A thematic analysis approach was taken to identifying common themes in the comments. As the purpose of the analysis was to determine if there were any concepts missing from the surveys, once themes were identified, they were then mapped to the draft survey domains with particular attention to themes that did not map to survey content. Each comment was also assessed for its sentiment and identified as positive, negative, neutral or mixed.

Comments not relevant to home and community care were not coded (e.g., experience related to in-hospital stay) unless they pertained to the construction or administration of the surveys (e.g., were about the mode or the respondent did not understand question).

In the second part of the analysis, we examined individual response patterns by reviewing respondents' open text responses alongside their corresponding closed-ended survey responses to look for areas of disagreement (e.g., very negative overall rating, but positive open text comments). A sample of client and caregiver respondents were selected based on their responses to the overall experience question. In the Client Survey, responses of Poor or Fair to the question "Overall, how would you rate Home and Community Care services?" were included (n=17). In the Caregiver Survey, respondents who indicated they were not satisfied with both "the supports available to me as a caregiver" and "the way care is provided by the home care providers" were included (n=25). Once the sample was identified, all open-text comments from these respondents were reviewed and the content of each comment was used to determine which survey question(s) to compare to (e.g., if the open text comment was related to scheduling, responses to the closed ended scheduling questions were reviewed.) If no question or response option captured the experience expressed in the comment, then this was flagged for consideration for question refinements.

Results

Demographic Variables of Open Text Sample

Characteristics of the client and caregivers included in the qualitative analysis of open text comments may be found in Table 21. Given over 60% of client and caregiver respondents provided an open text comment, the demographics of these individuals closely follows that of the full sample. There were, however, fewer non-white caregivers and a higher proportion of francophone clients who provided comments than in the full samples.

Table 21. Demographics of open text sample

Characteristics		Client (%, n=151)	Caregiver (%, n=71)
Characteristics from Survey			
Age	Under 18 year old	1.4	0
	18-64 years old	20.7	47.7
	65-74 years old	13.8	26.9
	75-84 years old	31.7	16.4
	85+ years old	32.4	9.0
Sex at Birth	Male	25.9	27.5
	Female	74.1	72.5
Gender	Man	74.8	26.5
	Woman	25.2	73.5
	Not Listed	0	0
Race/Ethnicity	White	80.7	89.2
	Black	3.6	1.5
	East or Southeast Asian	4.3	0
	South Asian	5.0	1.5
	Latino	0.7	0
	Not listed	6.4	7.7
Francophone		21.9	7.4
Indigenous	No	95.8	95.5
	Yes, First Nation (Status/Non-Status Indian)	1.4	1.5
	Yes, Métis	0.7	3
	Yes, Inuk (Inuit)	0	0
	Yes, I use an alternative term	2.1	0

Client Characteristics from HSSO			
LHIN	HNHB	39.1	38
	TC	15.2	15.5
	Central	23.8	25.4
	NE	21.9	21.1
Client Gender	Male	25.8	42.3
	Female	74.2	57.7
Client Age	0-18 years	2.0	1.4
	19-64 years	21.9	16.9
	65-74 years	14.6	8.5
	75-84 years	31.8	26.8
	85+ years	29.8	46.5
Client Rurality	Rural	8.6	8.5
	Urban	91.4	91.5
Client SRC	Acute	7.3	7.0
	Rehabilitation	7.3	2.8
	Maintenance	60.3	54.9
	Long Term Support	25.2	35.2
Client CCM	Complex	12.6	20.0
	Chronic	51.2	58.3
	Community Independence	18.1	11.7
	Short Stay	16.5	10.0
	Child	1.6	0

Sentiment Analysis

For the most part, the sentiment of the comments matched what would be expected based on the question (i.e., worked well = positive sentiment; what did not work well = negative sentiment). In the revised Client Survey 74.7% of responses to the "what worked well" question were positive and 53.8% of responses to the "what did not work well" question were negative. In the new Caregiver Survey, the sentiment matched in 67.4% to the to the "what worked well" and 70.6% to the "what did not work well" question. See Table 22.

Table 22. Number of open text comments per question and by sentiment

	Total # open text comments	Positive n (%)	Negative n (%)	Neutral n (%)	Mixed n (%)
Client Survey					
Q64: worked well	99	74 (74.7)	11 (11.1)	7 (7.1)	7 (7.1)
Q65: did not work well	65	16 (24.6)	35 (53.8)	12 (18.5)	2 (3.1)
Q66: could improve	76	12 (15.8)	17 (22.4)	45 (59.2)	2 (2.6)
Caregiver Survey					
Q51: worked well	43	29 (67.4)	9 (20.9)	4 (9.3)	1 (2.3)
Q52: did not work well	34	3 (8.8)	24 (70.6)	4 (11.8)	3 (8.8)
Q53: could improve	52	2 (3.8)	16 (30.8)	29 (55.8)	5 (9.6)

Domains and Themes

The mapping of the themes found from the comments to the question domains in the survey is presented in Table 23 below. Several of the domains consisted of two ore more themes. A more detailed description of each of the themes and sample quotes for each can be found in Appendix E. All the survey domains were represented in the open text comments, with the exception of "Preparedness to care for client". While comments pertaining to the "preparedness" domain did not appear, this may be because there is already a question in the Caregiver Survey on feeling prepared for the caregiver role so people may not have felt that they needed to raise it in the comments. The frequency of the themes across the two surveys may help inform survey refinements and the decision on which themes to keep or remove.

Several domains for which new or refined survey content may be considered are described below. All other domains, with the exception of "Preparedness to care for client", were represented in the comments which indicates their value to clients and caregivers and supports their inclusion in the surveys.

Table 23. Number of comments by question, domain and theme

Survey Domain	Theme	Client Survey Question			Caregiver Survey Question		
		Worked well	Did not work well	Could improve	Worked well	Did not work well	Could improve
Overall	1: Overall	37	9	11	18	3	4
	2: Helped stay home	5	0	0	3	0	1
Accessing Care	3: Sufficiency & Appropriateness	23	18	27	14	7	19
	4: Costs	2	3	1	2	1	2
	5: Waits	2	3	3	0	2	2
Communication & Information	6: Comms, general	1	0	0	1	1	1
	7a: Comms, providers	2	4	6	1	3	3
	7b: Comms, provider client	6	9	10	3	12	9
	7c: Comms, language	1	1	3	2	1	0
Responsiveness of care	8: Responsiveness of care	6	8	9	3	1	4
Transitions	9: Consistency	7	12	12	3	4	1
	10: Scheduling	6	14	6	6	7	10
	11: Care gaps	1	2	0	2	3	1
Service Delivery	12: Courtesy and respect	19	5	4	1	0	1
	13: Staff competency	21	13	13	7	5	5
	14: Stay long enough*	2	3	3	2	1	1
	15: Complaints*	2	4	1	1	1	3
	16: Expectations met	4	0	0	1	0	2
	17: Oversight*	0	1	3	0	1	3
Involvement	18:Involvement	0	1	1	0	0	0
Preparedness to care for client	19: Preparedness to care for client	-	-	-	0	0	0
Support	20: Support – Caregivers and clients*	-	-	-	10	5	4

Note: *Themes in blue have no similar concepts in the field tested surveys.

Accessing Care

There are three themes under the *Accessing Care* domain: 1) sufficiency & approriateness; 2) costs; and 3) waits. Both the costs and waits themes are currently addressed by the surveys so no changes are recommended based on these findings. Under "Appropriateness", comments suggested the importance of matching the right provider to the client.

> "*If home care and respite are supposed to help the client, why do you take away their comfort zone eg. dogs relax and make patients feel good therefore why do you not find people who are animal lovers with patients who need that, and that the other PSWs* [personal support workers] *who don't like animals with patients who have no pets. I feel you are punishing the client as well as the good of the benefits their loved animals are to them*." (Client)

Given the Client Survey already has questions addressing involvement in care (Q3), if values were considered during home care planning (Q5), ability to make changes to home care services (Q12), if home care providers listen carefully (Q17) and if home care providers help with the things that matter to the client (Q29), no additional changes are recommended even though this theme is unique and is not addressed by a specific question in the surveys.

Transitions

There were three themes identified in the open-text comments that fit within the transitions domain: 1) consistency; 2) scheduling; and 3) care gaps. Both the consistency and scheduling themes are currently well addressed by the surveys so no changes are recommended based on these findings. However, care gaps and specifically the concept of dropped care is not explicitly covered.

The following two examples highlight instances of care gaps where there were suspensions in home care service.

> "*After getting out of the hospital. I needed assistance showering i broke a shoulder. When i was being showered she lifted arm with broken shoulder. I ended up going back to the hospital later that night. My services got suspended until a supervisor can come and discuss what happened. I waited 2 weeks. Then supervisor showed up 2 weeks after incident which is ridiculous while supervisor was note taking cancelled everything. They never set up my physiotherapy services.*" (Client)

> "*Also in* [redacted]*, he fell while doing his walking exercise, and because he was off for 3 weeks, it turned out this service through CCAC* [Community Care Access Centre] *was cancelled and had to be restarted, and they were going to put us with a different CCAC unit which meant new attendants etc and no guarantee of service. Had to fight like crazy to keep service we had!!!*" (Caregiver)

Though care gaps are not featured as a specific closed ended question in the surveys, the complexity and diversity of care gap scenarios, and the relatively few times this concern was cited might make it a theme best captured via open ended questions.

Service Delivery

There were six themes identified in the service delivery domain: 1) courtesy, respect and empathy; 2) staff competency; 3) complaints; 4) expectations met; 5) stay long enough; and 6) oversight. The first two already have questions addressing the concepts so no changes are recommended. However, survey refinements might be needed for feeling safe to complain, emotional support, stay long enough and oversight.

Under the theme of feeling safe to complain, several clients and caregivers raised a concern or fear of losing services, or other retaliation from home care providers, if they made a formal complaint.

> "*Remove the fear of losing service if you complain.*" (Client)

> "*My caregiver is having hard times dealing with these agencies. There is no support. Coordinators are unprofessional. They simply do not care. Do not raise an issue as they tell you off. You escalate and nothing happens. More retaliation from these agencies.*" (Client)

The concept of feeling safe to make a complaint is not explicitly covered in the questions and could be considered either as an additional question, or an additional response option to the current complaints question. (Q34: What is your experience with the complaint process?)

On the theme of stay long enough, we heard from a handful of clients and caregivers that it was important to them that their home care providers stayed long enough to complete the required tasks, or as long as they are scheduled for: This is already addressed by a question in the Client Survey (Q28 "Do your home care providers stay long enough to provide the care you need?"), but not in the Caregiver Survey. Given the distinct focus of the Caregiver Survey and the aim to not unnecessarily duplicate questions between the two surveys, it may or may not be appropriate to add a question on this theme to the Caregiver Survey.

> "*There is a definite shortage of providers and they are not well trained. Some of them speed through the visit as they have many more people to visit.*" (Caregiver)

The theme of oversight of home care providers appeared in both client and caregiver comments. These comments implied a need for quality assurance of home care service delivery. Oversight is not a theme that is currently addressed in either the Client Survey or the Caregiver Survey and it is something the could be considered for addition.

> "*Allow the clients to rate individual PSW so that PSW knows that they are being watched for their performance. Coordination between service provider and on filed PSW should be managed by service provider.*" (Client)

> "*All services must improve. More monitoring of visiting with PSWs. Awful services.*" (Caregiver)

Support

The support domain is only in the Caregiver Survey and consists of two themes: support for caregiver directly and support for care of client. This was a fairly common theme among caregivers and in some cases, caregivers were very grateful for the care they or their loved one receives:

> "*Sometimes when the girls come, they become my ray of sunshine because they just go about what they need to do for him and I can take a breather.*" (Caregiver)

However, we also heard several instances of caregivers feeling in need of additional support, expressing some caregiver distress or burnout:

> "*We are unable to afford a 24 hour person on a weekly or bi weekly basis and I have not had a vacation for at least seven years. My sisters are not equipped to come and stay over or unwilling to. The caregivers that I trust work during the day so I would have to train someone to care for her at night and this is something I have to consider as I am really feeling fatigued.*" (Caregiver)

Data on caregiver distress is currently captured by captured by interRAI and the Canadian Institute for Health Information and is reported in Ontario[7]. Care coordinators ask clients and their caregivers if the primary caregiver expresses feelings of distress, anger or depression and if a caregiver is unable to continue in caring activities. Given this data is already available from other sources and there are questions related to support for the caregiver and support for the caregiver to care for client in the Caregiver Survey, no additional question on caregiver distress is recommended.

However, based on the comments, counselling/mental health support is recommended as an additional response option for Q14 "What additional help do you need?" in the Client Survey, Q15 "What additional help does <client_name> need?" in the Caregiver Survey. Emotional support is already an existing response option in the Q18 "What help do you need to support yourself as a caregiver?" of the Caregiver Survey.

> "*Counseling services for patient more available (mental health)*" (Caregiver response to question on how to improve services)

Overlapping themes

Three additional concepts were raised as being important to caregivers that are covered by questions in the Client Survey, but not the Caregiver Survey. Given the distinct focus of the Caregiver Survey and the aim to not unnecessarily duplicate questions between the two surveys, it may or may not be appropriate to add questions on these, but they are noted below:

- Experiencing problems with different people providing care;
- Having consistent providers (i.e., the same individuals); and
- Communication/services in preferred language.

Number of open text questions

From the sentiment analysis, most positive and negative responses matched the question (i.e., worked well = positive sentiment; what did not work well = negative sentiment, see Table 23). The "what worked well" question would sometimes capture comments of "What didn't work well?" and the "What could be improved?" questions. In several cases, content is repeated across all three questions.

Provided there is a cost savings from of splitting the open text response into three questions (e.g., to save costs on sentiment analysis by the vendor), it might be better to combine all three into a single question to reduce response time on the survey.

Administration of surveys

In addition to the domains and themes that were identified, some comments suggested refinements in the administration of the surveys. The first recommendation related to survey administration is to improve the timeliness and data quality of the recipient sample pulled for surveying. We found instances where someone received the survey after the client had passed away. There was also an instance where one person stated they did not receive home care.

The second recommendation is related to who administers the surveys. Given concerns around retaliation and loss of home care servives, a recommendation is to implement and clearly communicate that the surveys are administered by an independent body not funded through the service provider organization. This can elicit more honest and open feedback and possibly improve response or survey completion rates.

SUMMARY OF QUALITATIVE ANALYSIS

Overall, the qualitative analysis validated the concepts in the both the Client and Caregiver Surveys. The recommendations for changes to the two surveys are:

1. *Feeling safe to complain*: Consider a question or an additional response option for Q34 (Client Survey) and Q27 (Caregiver Survey) on "What is your experience with the complaint process?";

2. *Oversight*: Consider if any questions on oversight might be appropriate;

3. *Support*: Adding counselling/mental health support as an additional response option for Q14 "What additional help do you need?" in the Client Survey, Q15 "What additional help does <client_name> need?" in the Caregiver Survey;

4. *Overlapping themes*: Consider if overlapping questions between the Client and Caregiver Surveys are appropriate. (Given the questions appear in at least one survey, duplicative data may not be necessary)
    - Provider staying long enough;
    - Experiencing problems with different people providing care;
    - Having consistent providers (i.e., the same individuals); and
    - Communication/services in preferred language.

5. *Reducing the number of open text questions*: Unless there is a cost savings of splitting the open text response into three questions (e.g., to save costs on sentiment analysis by the vendor), it might be better to combine all three into a single question to reduce the response time; and

6. *Survey administration*:
    - Improve the timeliness and data quality of the recipient sample pulled for surveying; and
    - Implement and clearly communicate that the surveys are funded and administered by an independent body not funded by the service provider organization.

CONCLUSION AND RECOMMENDATIONS

The field test of new client and caregiver experience surveys amongst recipients of home and community care and their caregivers has brought to a light a number of important new findings. The survey questions were well received and a range of responses indicates variability in the experience of clients and caregivers. In the new survey, the 'top box' response was generally indicated by about 25-40% of the respondent population, meaning that experiences could be improved for 60-75% of home care clients assuming our survey results are representative of client experience. The field test survey respondents were similar to the overall home care population and to the sample population in nearly all baseline characteristics, which supports the extrapolation or transferability of the results presented here to the full home care population.

Almost all of the questions in the new survey are recommended as valid questions of client and caregiver experience. The survey is valid and comprehensive. At 30 minutes to complete the survey by telephone, the potential cost is a concern regarding the implementation of a telephone survey in practice. To have a meaningful difference in the cost of implementation, 50% of each of the client and caregiver surveys would need to be removed. With 51 questions in the client survey and 39 questions in the caregiver survey, there are many opportunities to remove items. In implementation, mail-out paper-based and online surveys appear to have the greatest validity and practicality for both client and caregiver surveys. The length of the survey will have little cost impact in a paper-based or online survey. It is uncertain whether the length has an impact on response rates.

We recommend the adoption of the survey items included as appendices to this report be used to measure the experience of clients and caregivers regarding their home care services. We recommend that these items be incorporated into broad and coordinated surveys of clients of services across the spectrum of health care services.

We recommend that changes to the surveys should only be undertaken in consultation with clients and with caregivers. Conclusions presented in the quantitative and qualitative results included in this report should be considered in any changes to the survey. We have extensively engaged with clients and caregivers in developing new home care client and caregiver surveys. We recommend that this engagement be continued in any revisions to the final field test survey. Practically speaking, we recommend presenting the survey questionnaire to clients and caregivers and asking them to prioritize questions. Complex rating schemes could be constructed but simply asking whether the item is important to ask in a regular survey of home care clients on a 10-point rating scale is likely the best approach. Priority questions can then be selected in rank order of client and caregiver ratings. At least 20 and preferably more clients and caregivers should be consulted in a purposeful engagement. It is recommended that in prioritizing questions, the questionnaire items be presented to participants in the groupings of the factors/domains for clients (caregivers largely have one overall domain).[4]

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[4] Statistically removing items with low factor loadings (and little difference in reliability/alpha scores if removed) means that little information about those factors/domains will be lost without the specific item, and removing items with secondary but very high loadings (with little difference in reliability/alpha scores) indicates potentially redundant items. There is relatively little statistical advice for removing items but low rates of meaningful responses is the most important starting point.

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APPENDICES

APPENDIX A – LENGTH OF QUESTIONS AND RESPONSE FORMAT ON THE HOME CARE CLIENT AND CAREGIVER SURVEYS

Table 24. Number of words per question and response format on the Client Survey

Item	Abridged Question Text	Number of words unabridged	Response format	Number of response options	Do not know/ Do not remember/ Other option	Not applicable option
Planning Your Home Care…						
	Introduction	28	N/A	N/A	N/A	N/A
Q01	Did someone tell you what care and services you would get?	18	Yes/No	3	Yes	No
Q02	Were you asked in which language you would like to receive your services?	13	Yes/No	3	Yes	No
Q03	Were you involved in planning your home care as much as you wanted to be?	15	Likert	6	Yes	Yes
Q04	Did your home care providers include your family/caregiver in planning?	10	Likert	7	Yes	Yes
Q05	Were your values, identity(ies), language preferences, and culture considered?	14	Likert	5	Yes	No
Q06	Did your home care start when you needed it?	9	Yes/No	3	Yes	No
Accessing Home Care…						
	Introduction	29	N/A	N/A	N/A	N/A
Q07	Do you understand what home care services you should receive?	10	Likert	4	No	No
Q08	Do you have all the equipment and supplies you need to continue to live at home?	21	Categorical	5	No	Yes
Q09	Are you receiving the right types of home care services for your needs?	13	Likert	4	No	No
Q10	Do you receive enough hours of home care?	8	Likert	4	No	No
Q11	How often are home care visits arranged at a time that works for you?	14	Likert	4	No	No
Q12	Are you able to make changes to your home care services if needed?	13	Likert	5	No	Yes
Q13	If you needed further support, did a home care provider connect you?	32	Categorical	7	Yes	Yes
Q14	What additional help did you need?	25	Multiple response	11	Yes	Yes
Q15	What services have you or your family paid for?	19	Multiple response	13	Yes	Yes
Communication…						
	Introduction	13	N/A	N/A	N/A	N/A
Q16	How often do home care providers introduce themselves and explain their role?	16	Likert	5	Yes	No
Q17	Do you feel that your home care providers listen carefully to you?	12	Likert	5	No	Yes
Q18	How often can you communicate with your providers in your preferred language?	21	Likert	4	No	No
Q19	Do home care providers explain things in a way that is easy to understand?	14	Likert	4	No	No
Q20	If you were not able to understand, for what reason?	26	Multiple response	6	Yes	Yes
Q21	Is there someone who is reliable in responding to any questions or issues?	21	Likert	5	No	Yes

Q22	Do you experience a lack of communication between your different providers?	31	Likert	4	No	No
Q23	Do you have problems because there are different people providing care?	20	Likert	5	No	Yes
Q24	How often do your providers notify you of a change in service/service time?	23	Likert	5	No	Yes
Q25	How often do you understand the next steps in your home care?	31	Likert	4	No	No
Home Care Providers…						
	Introduction	30	N/A	N/A	N/A	N/A
Q26	How often do your home care providers arrive when they are scheduled to?	13	Likert	4	No	No
Q27	How often do changes in appointments/service times negatively affect your care?	15	Likert	5	No	Yes
Q28	Do your home care providers stay long enough to provide the care you need?	14	Likert	4	No	No
Q29	Do your home care providers help you with the things you need?	15	Likert	4	No	No
Q30	Do your home care providers treat you with courtesy and respect?	11	Likert	4	No	No
Q31	Do your home care providers have the necessary skills?	16	Likert	5	Yes	No
Q32	Do you feel safe receiving home care from your home care providers?	12	Likert	4	No	No
Q33	Do you believe you were harmed because of an error, mistake, or omission?	21	Categorical	3	No	No
Q34	What is your experience with the complaint process?	8	Categorical	7	Yes	Yes
Q35	Has a home care provider ever shared information that you did not consent to?	16	Yes/No	3	Yes	No
After a Hospital Stay…						
	Introduction	80	N/A	N/A	N/A	N/A
Q36$_{Sc}$	Were you hospitalized before the start of your home care services, or anytime in the past six months?	19	Yes/No	2	No	No
Q36	The hospital took my preferences and those of my family into account.	27	Likert	6	Yes	Yes
Q37	I had a good understanding of the things I was responsible for.	22	Likert	6	Yes	Yes
Q38	I clearly understood the purpose of taking each of my medications.	16	Likert	6	Yes	Yes
Q39	Did you know whom to contact if you had a question?	21	Yes/No	4	Yes	Yes
Q40	Did your home care providers seem well-informed and up-to-date?	23	Likert	6	Yes	Yes
Q41	Were you told different things by hospital staff and your home care providers?	26	Likert	6	Yes	Yes
Q42	Were your care needs met after you were discharged from the hospital?	12	Likert	6	Yes	Yes
After Your Home Care Ended…						
	Introduction	36	N/A	N/A	N/A	N/A
Q43$_{Sc}$	Have your Home and Community Care services ended?	8	Yes/No	2	No	No
Q43	If you needed further support, did a home care provider connect you?	25	Categorical	8	Yes	Yes
Q44	How prepared did you feel for your home care services to end?	12	Likert	6	Yes	Yes
Q45	Do you know whom to contact if you need home care again?	12	Yes/No	3	No	Yes
Overall…						
	Introduction	6	N/A	N/A	N/A	N/A

Q46	How helpful were your services in allowing you to stay at home?	24	Likert	4	No	Yes
Q47	Overall, how would you rate Home and Community Care services?	10	Likert	5	No	No
Q48	The overall quality of care from your home care providers was:	17	Likert	5	No	No
About You…						
	Introduction	14	N/A	N/A	N/A	N/A
Q49	Who is the main person or who are the main people completing this questionnaire?	12	Categorical	4	No	No
Q50	What best describes your race/ethnicity?	10	Categorical	6	No	No
Q51	Do you self-identify as a Francophone?	6	Yes/No	2	No	No
Q52	Do you self-identify as an Indigenous person?	7	Categorical	5	No	No
Q53	What is your age?	4	Ordinal	10	No	No
Q54	What sex were you assigned at birth?	7	Categorical	2	No	No
Q55	Which of the following describes your present gender identity?	9	Categorical	6	No	No
Q56	Do you consider yourself to be...?	6	Categorical	5	No	No
Q57	How often do you feel isolated from others?	8	Likert	4	No	No
Q58	How often do you feel left out?	7	Likert	4	No	No
Q59	How often do you feel that you lack companionship?	9	Likert	4	No	No
Q60	Do you ever worry about losing your home or place to live?	12	Likert	4	No	No
Q61	Do you ever have difficulty making ends meet/paying your bills?	16	Likert	4	No	No
Q62	After paying your bills, do you typically have enough money left for food?	13	Likert	4	No	No
Final comments						
	Introduction	28	N/A	N/A	N/A	N/A
Q63	Do you want to share anything about your experience that worked well for you?	17	Open text	N/A	N/A	N/A
Q64	Do you want to share anything about your experience that did not work well for you?	19	Open text	N/A	N/A	N/A
Q65	Do you have any suggestions for how your home care services could be improved?	14	Open text	N/A	N/A	N/A

Abbreviations: N/A = Not applicable

Note: Counts of the number of words per question are reflective of the actual, rather than paraphrased questions from the client version of the survey. Clients and caregivers did not have to respond to a particular section if they answered *No* to the conditional branching questions (Q36$_{Sc}$, Q43$_{Sc}$) in the online mode.

Table 25. Number of words per question and response format on the Caregiver Survey

Item	Abridged Question Text	Number of words unabridged	Response format	Number of response options	Do not know/ Do not remember/ Other option	Not applicable option
Screening						
Q00	Are you familiar with the home care services that [client] received or is receiving through the LHIN?	17	Yes/No	2	No	No
Being a Caregiver…						
	Introduction	12	N/A	N/A	N/A	N/A
Q01	What is your relationship to [client]?	10	Categorical	8	No	No
Q02	In an average week, how many hours of help do you provide to [client]?	17	Ordinal	5	No	No
Q03	In addition to yourself, how many other unpaid caregivers are you aware of?	27	Ordinal	3	No	No
Q04	What kind of care do you provide?	19	Multiple response	9	Yes	No
Q05	Do you also receive home care services to support your own needs?	12	Categorical	3	No	No
Caregiver Supports…						
	Introduction	16	N/A	N/A	N/A	N/A
Q06	How well prepared did you feel for your caregiving role?	17	Likert	4	No	No
Q07	Do you feel well supported by home care providers as a caregiver?	12	Likert	4	No	No
Q08	If you needed support, did a home care provider connect you to other services?	36	Categorical	7	Yes	Yes
Accessing Home Care…						
	Introduction	18	N/A	N/A	N/A	N/A
Q09	Were you involved in planning [client]'s home care as much as you wanted to be?	15	Likert	6	No	Yes
Q10	Do you understand what home care services [client] should receive?	10	Likert	4	No	No
	Segue	10	N/A	N/A	N/A	N/A
Q11	How often are home care visits arranged at a time that works for you?	17	Likert	4	No	No
Q12	Are you able to make changes to [client]'s home care services if needed?	13	Likert	5	No	Yes
Q13	How often do changes in appointments/service times negatively affect you?	17	Likert	5	No	Yes
Q14	Do you have all the equipment and supplies you need for [client]?	24	Categorical	5	No	Yes
Q15	What additional help is needed?	25	Multiple response	9	Yes	Yes
Q16	What services have you or your family paid for?	19	Multiple response	12	Yes	Yes
Q17	Do you have enough money to pay for everything needed to support [client]'s care?	14	Likert	5	No	Yes
Responding to Your Needs…						
	Introduction	21	N/A	N/A	N/A	N/A
Q18	What help do you need to support yourself?	26	Multiple response	15	Yes	Yes
Communication…						
	Introduction	16	N/A	N/A	N/A	N/A
Q19	Is there someone who is reliable in responding to any questions or issues?	21	Likert	6	Yes	Yes
Q20	Do home care providers explain things in a way that is easy to understand?	14	Likert	5	No	Yes

Q21	If you were not able to understand, for what reason?	26	Multiple response	6	Yes	Yes
Q22	How often do you feel that the home care providers listen carefully to you?	14	Likert	5	No	Yes
Q23	Do you observe a lack of communication between different home care providers?	30	Likert	4	No	No
Q24	Do you understand the next steps in [client]'s home care?	28	Likert	5	No	Yes
Home Care Providers…						
	Introduction	30	N/A	N/A	N/A	N/A
Q25	Generally, home care providers...	31	Multiple response	12	No	No
Q26	Do you believe [client] was harmed because of an error, mistake or omission?	21	Categorical	3	No	No
Q27	What is your experience with the complaint process?	8	Categorical	7	Yes	Yes
After a Hospital Stay…						
	Introduction	74	N/A	N/A	N/A	N/A
Q28$_{Sc}$	Was [client] hospitalized before the start of their home care services, or anytime in the past six months?	20	Yes/No	2	No	No
Q28	How well prepared did you feel for your caregiving role?	14	Likert	5	No	Yes
Q29	Did you know whom to contact if you had a question about [client]'s condition?	21	Yes/No	4	Yes	Yes
Q30	Did [client]'s home care start when you needed it?	14	Yes/No	4	Yes	Yes
Q31	Did the home care providers seem well informed and up-to-date?	23	Likert	6	Yes	Yes
After Home Care Ended…						
	Introduction	41	N/A	N/A	N/A	N/A
Q32$_{Sc}$	Have [client]'s Home and Community Care services ended?	8	Yes/No	2	No	No
Q32	If you needed further support, did a home care provider connect you?	28	Categorical	8	Yes	Yes
Q33	How prepared did you feel for [client]'s home care services to end?	15	Likert	6	Yes	Yes
Q34	Do you know whom to contact if [client] needs home care again?	12	Yes/No	3	No	Yes
Overall…						
	Introduction	11	N/A	N/A	N/A	N/A
Q35	Overall, I am satisfied with...	15	Multiple response	4	No	No
Q36	How helpful were [client]'s home care services in allowing them to stay home?	29	Likert	5	No	Yes
About You…						
	Introduction	17	N/A	N/A	N/A	N/A
Q37	What best describes your race/ethnicity?	10	Categorical	6	No	No
Q38	Do you self-identify as a Francophone?	6	Yes/No	2	No	No
Q39	Do you self-identify as an Indigenous person?	7	Categorical	5	No	No
Q40	What is your age?	4	Ordinal	10	No	No
Q41	What sex were you assigned at birth?	7	Categorical	2	No	No
Q42	Which of the following describes your present gender identity?	9	Categorical	6	No	No
Q43	Do you consider yourself to be...?	6	Categorical	5	No	No
Q44	How often do you feel isolated from others?	8	Likert	4	No	No
Q45	How often do you feel left out?	7	Likert	4	No	No

Q46	How often do you feel that you lack companionship?	9	Likert	4	No	No
Q47	Do you ever worry about losing your home or place to live?	12	Likert	4	No	No
Q48	Do you ever have difficulty making ends meet/paying your bills at the end of the	16	Likert	4	No	No
Q49	After paying your monthly bills, do you typically have enough money left for foo	13	Likert	4	No	No
Final comments						
	Introduction	28	N/A	N/A	N/A	N/A
Q50	Do you want to share anything about your experience that worked well for you?	20	Open text	N/A	N/A	N/A
Q51	Do you want to share anything about your experience that did not work well for you?	22	Open text	N/A	N/A	N/A
Q52	Do you have any suggestions for how your home care services could be improved?	13	Open text	N/A	N/A	N/A

Abbreviations: N/A = Not applicable

Note: Counts of the number of words per question are reflective of the actual, rather than paraphrased questions from the client version of the survey. Clients and caregivers did not have to respond to a particular section if they answered *No* to the conditional branching questions ($Q28_{Sc}$, $Q32_{Sc}$).

APPENDIX B – COMPARISON OF CLIENT DEMOGRAPHICS FROM HSSO AND SURVEY

Table 26. Client Gender from Survey Item Q56 by Gender from HSSO.

		HSSO Gender		
		Male (%, n=63)	Female (%, n=170)	Total (%, n=115)
Gender from Survey	Man	90.5	2.4	26.2
	Woman	9.5	97.1	73.4
	Not listed	0	0.6	0.4

Table 27. Client Age from Survey Item Q54 by Age from HSSO.

		HSSO Age					
		0-18 (%, n=3)	19-64 (%, n=40)	65-74 (%, n=29)	75-84 (%, n=65)	85+ (%, n=75)	Total (%, n=212)
Age from Survey	Under 18 year old	66.7	0	0	0	0	0.9
	18-64 years old	33.3	88.6	2.7	1.4	2. 7	19.0
	65-74 years old	0	11.4	81.1	0	1.3	15.6
	75-84 years old	0	0	16.2	87.5	0	29.9
	85+ years old	0	0	0	11.1	96.0	34.9

APPENDIX C – COMPLETION RATES OF INDIVIDUAL QUESTIONS

Table 28. Client Survey question-level completion rates, by survey completion mode

		Online (n=27)				**Telephone** (n=136)				**Paper** (n=75)				**Overall** (n=239)			
Item	**Abridged Question Text**	**Valid**	**N/A**	**PNA**	**DK/ DNR**	**Valid**	**N/A**	**PNA**	**DK/ DNR**	**Valid**	**N/A**	**PNA**	**DK/ DNR**	**Valid**	**N/A**	**PNA**	**DK/ DNR**
Planning Your Home Care…																	
Q01	Did someone tell you what care and services you would get?	92.6	0.0	0.0	7.4	94.1	0.0	0.0	5.9	89.5	0.0	2.6	7.9	92.5	0.0	0.8	6.7
Q02	Were you asked in which language you would like to receive your services?	70.4	0.0	0.0	29.6	80.2	0.0	0.7	19.1	90.8	0.0	0.0	9.2	82.4	0.0	0.4	17.2
Q03	Were you involved in planning your home care as much as you wanted to be?	92.6	0.0	0.0	7.4	89.0	0.0	6.6	4.4	90.8	0.0	1.3	7.9	90.0	0.0	4.2	5.9
Q04	Did your home care providers include your family/caregiver in planning?	96.3	0.0	0.0	3.7	91.2	0.0	5.2	3.7	97.4	0.0	0.0	2.6	93.7	0.0	2.9	3.4
Q05	Were your values, identity(ies), language preferences, and culture considered?	92.6	0.0	0.0	7.4	81.6	0.0	5.9	12.5	89.5	0.0	1.3	9.2	85.4	0.0	3.8	10.9
Q06	Did your home care start when you needed it?	100.0	0.0	0.0	0.0	97.1	0.0	0.7	2.2	94.7	0.0	4.0	1.3	96.7	0.0	1.7	1.7
Accessing Home Care…																	
Q07	Do you understand what home care services you should receive?	100.0	0.0	0.0	0.0	98.5	0.0	1.5	0.0	97.4	0.0	2.6	0.0	98.3	0.0	1.7	0.0
Q08	Do you have all the equipment and supplies you need to continue to live at home?	81.5	18.5	0.0	0.0	86.0	12.5	1.5	0.0	81.6	14.5	4.0	0.0	84.1	13.8	2.1	0.0
Q09	Are you receiving the right types of home care services for your needs?	96.3	0.0	3.7	0.0	96.3	0.0	3.7	0.0	92.1	0.0	7.9	0.0	95.0	0.0	5.0	0.0
Q10	Do you receive enough hours of home care?	96.3	0.0	3.7	0.0	97.1	0.0	2.9	0.0	93.4	0.0	6.6	0.0	95.8	0.0	4.2	0.0
Q11	How often are home care visits arranged at a time that works for you?	96.3	0.0	3.7	0.0	97.1	0.0	2.9	0.0	92.1	0.0	7.9	0.0	95.4	0.0	4.6	0.0

Q12	Are you able to make changes to your home care services if needed?	81.5	14.8	3.7	0.0	66.2	26.5	7.4	0.0	69.7	22.4	7.9	0.0	69.0	23.9	7.1	0.0
Q13	If you needed further support, did a home care provider connect you?	55.6	33.3	7.4	3.7	51.5	46.3	1.5	0.7	51.3	38.2	5.3	5.3	51.9	42.3	3.4	2.5
Q14	What additional help did you need?	59.3	37.0	3.7	0.0	49.3	50.0	0.7	0.0	55.3	35.5	9.2	0.0	52.3	43.9	3.8	0.0
Q15	What services have you or your family paid for?	74.1	22.2	3.7	0.0	66.2	33.1	0.7	0.0	61.8	31.6	6.6	0.0	65.7	31.4	2.9	0.0
Communication…																	
Q16	How often do home care providers introduce themselves and explain their role?	92.6	0.0	7.4	0.0	90.4	0.0	2.2	7.4	93.4	0.0	6.6	0.0	91.6	0.0	4.2	4.2
Q17	Do you feel that your home care providers listen carefully to you?	92.6	3.7	3.7	0.0	94.9	4.4	0.7	0.0	93.4	1.3	5.3	0.0	94.1	3.4	2.5	0.0
Q18	How often can you communicate with your providers in your preferred language?	96.3	0.0	3.7	0.0	97.8	0.0	2.2	0.0	96.1	0.0	4.0	0.0	97.1	0.0	2.9	0.0
Q19	Do home care providers explain things in a way that is easy to understand?	96.3	0.0	3.7	0.0	91.9	0.0	8.1	0.0	96.1	0.0	4.0	0.0	93.7	0.0	6.3	0.0
Q20	If you were not able to understand, for what reason?	44.4	51.9	3.7	0.0	30.2	65.4	4.4	0.0	42.1	48.7	9.2	0.0	35.6	58.6	5.9	0.0
Q21	Is there someone who is reliable in responding to any questions or issues?	81.5	14.8	3.7	0.0	70.6	27.2	2.2	0.0	80.3	14.5	5.3	0.0	74.9	21.8	3.4	0.0
Q22	Do you experience a lack of communication between your different providers?	96.3	0.0	3.7	0.0	93.4	0.0	6.6	0.0	92.1	0.0	7.9	0.0	93.3	0.0	6.7	0.0
Q23	Do you have problems because there are different people providing care?	59.3	37.0	3.7	0.0	60.3	37.5	2.2	0.0	68.4	27.6	4.0	0.0	62.8	34.3	2.9	0.0
Q24	How often do your providers notify you of a change in service/service time?	92.6	3.7	3.7	0.0	86.0	14.0	0.0	0.0	86.8	7.9	5.3	0.0	87.0	10.9	2.1	0.0
Q25	How often do you understand the next steps in your home care?	92.6	0.0	7.4	0.0	85.3	0.0	14.7	0.0	86.8	0.0	13.2	0.0	86.6	0.0	13.4	0.0
Home Care Providers…																	

Q26	How often do your home care providers arrive when they are scheduled to?	96.3	0.0	3.7	0.0	98.5	0.0	1.5	0.0	89.5	0.0	10.5	0.0	95.4	0.0	4.6	0.0
Q27	How often do changes in appointments/service times negatively affect your care?	85.2	11.1	3.7	0.0	78.7	20.6	0.7	0.0	86.8	5.3	7.9	0.0	82.0	14.6	3.4	0.0
Q28	Do your home care providers stay long enough to provide the care you need?	96.3	0.0	3.7	0.0	95.6	0.0	4.4	0.0	92.1	0.0	7.9	0.0	94.6	0.0	5.4	0.0
Q29	Do your home care providers help you with the things you need?	96.3	0.0	3.7	0.0	92.7	0.0	7.4	0.0	89.5	0.0	10.5	0.0	92.1	0.0	8.0	0.0
Q30	Do your home care providers treat you with courtesy and respect?	96.3	0.0	3.7	0.0	100.0	0.0	0.0	0.0	90.8	0.0	9.2	0.0	96.7	0.0	3.4	0.0
Q31	Do your home care providers have the necessary skills?	92.6	0.0	3.7	3.7	97.1	0.0	0.7	2.2	88.2	0.0	9.2	2.6	93.7	0.0	3.8	2.5
Q32	Do you feel safe receiving home care from your home care providers?	96.3	0.0	3.7	0.0	100.0	0.0	0.0	0.0	90.8	0.0	9.2	0.0	96.7	0.0	3.4	0.0
Q33	Do you believe you were harmed because of an error, mistake, or omission?	92.6	0.0	7.4	0.0	99.3	0.0	0.7	0.0	90.8	0.0	9.2	0.0	95.8	0.0	4.2	0.0
Q34	What is your experience with the complaint process?	33.3	59.3	3.7	3.7	27.9	69.9	0.7	1.5	32.9	54.0	6.6	6.6	30.1	63.6	2.9	3.4
Q35	Has a home care provider ever shared information that you did not consent to?	55.6	0.0	3.7	40.7	93.4	0.0	0.0	6.6	77.6	0.0	5.3	17.1	84.1	0.0	2.1	13.8
After a Hospital Stay…																	
Q36$_{Sc}$	Were you hospitalized before the start of your home care services, or <6mth ago?	100.0	0.0	0.0	0.0	100.0	0.0	0.0	0.0	-	-	-	-	100.0	0.0	0.0	0.0
Q36	The hospital took my preferences and those of my family into account.	87.5	0.0	0.0	12.5	93.1	0.0	3.4	3.4	81.3	0.0	0.0	18.8	90.2	0.0	2.4	7.3
Q37	I had a good understanding of the things I was responsible for.	87.5	0.0	0.0	12.5	94.8	0.0	0.0	5.2	87.5	0.0	6.3	6.3	92.7	0.0	1.2	6.1
Q38	I clearly understood the purpose of taking each of my medications.	87.5	0.0	0.0	12.5	93.1	0.0	1.7	5.2	81.3	0.0	18.8	0.0	90.2	0.0	4.9	4.9

Q39	Did you know whom to contact if you had a question?	87.5	0.0	0.0	12.5	94.8	0.0	3.4	1.7	100.0	0.0	0.0	0.0	95.1	0.0	2.4	2.4
Q40	Did your home care providers seem well-informed and up-to-date?	87.5	0.0	0.0	12.5	86.2	0.0	1.7	12.1	81.3	0.0	12.5	6.3	85.4	0.0	3.7	11.0
Q41	Were you told different things by hospital staff and your home care providers?	62.5	0.0	0.0	37.5	89.7	0.0	1.7	8.6	87.5	0.0	0.0	12.5	86.6	0.0	1.2	12.2
Q42	Were your care needs met after you were discharged from the hospital?	87.5	0.0	0.0	12.5	93.1	0.0	3.4	3.4	100.0	0.0	0.0	0.0	93.9	0.0	2.4	3.7
After Your Home Care Ended…																	
Q43$_{Sc}$	Have your Home and Community Care services ended?	100.0	0.0	0.0	0.0	100.0	0.0	0.0	0.0	-	-	-	-	100.0	0.0	0.0	0.0
Q43	If you needed further support, did a home care provider connect you?	100.0	0.0	0.0	0.0	100.0	0.0	0.0	0.0	81.8	0.0	18.2	0.0	94.6	0.0	5.4	0.0
Q44	How prepared did you feel for your home care services to end?	100.0	0.0	0.0	0.0	91.7	0.0	8.3	0.0	90.9	0.0	9.1	0.0	91.9	0.0	8.1	0.0
Q45	Do you know whom to contact if you need home care again?	100.0	0.0	0.0	0.0	100.0	0.0	0.0	0.0	100.0	0.0	0.0	0.0	100.0	0.0	0.0	0.0
Overall…																	
Q46	How helpful are/were your services in allowing you to stay at home?	81.5	14.8	3.7	0.0	85.3	11.8	2.9	0.0	72.4	13.2	14.5	0.0	80.8	12.6	6.7	0.0
Q47	Overall, how would you rate Home and Community Care services?	96.3	0.0	3.7	0.0	99.3	0.0	0.7	0.0	88.2	0.0	11.8	0.0	95.4	0.0	4.6	0.0
Q48	The overall quality of care from your home care providers is/was:	96.3	0.0	3.7	0.0	94.1	0.0	5.9	0.0	85.5	0.0	14.5	0.0	91.6	0.0	8.4	0.0
About You…																	
Q49	Who is the main person/ people completing this questionnaire?	96.3	0.0	3.7	0.0	100.0	0.0	0.0	0.0	92.1	0.0	7.9	0.0	97.1	0.0	2.9	0.0
Q50	What best describes your race/ethnicity?	92.6	0.0	7.4	0.0	94.1	0.0	5.9	0.0	92.1	0.0	7.9	0.0	93.3	0.0	6.7	0.0
Q51	Do you self-identify as a Francophone?	96.3	0.0	3.7	0.0	99.3	0.0	0.7	0.0	93.4	0.0	6.6	0.0	97.1	0.0	2.9	0.0

Q52	Do you self-identify as an Indigenous person?	96.3	0.0	3.7	0.0	97.1	0.0	2.9	0.0	90.8	0.0	9.2	0.0	95.0	0.0	5.0	0.0
Q53	What is your age?	96.3	0.0	3.7	0.0	97.8	0.0	2.2	0.0	94.7	0.0	5.3	0.0	96.7	0.0	3.4	0.0
Q54	What sex were you assigned at birth?	96.3	0.0	3.7	0.0	100.0	0.0	0.0	0.0	93.4	0.0	6.6	0.0	97.5	0.0	2.5	0.0
Q55	Which of the following describes your present gender identity?	96.3	0.0	3.7	0.0	99.3	0.0	0.7	0.0	94.7	0.0	5.3	0.0	97.5	0.0	2.5	0.0
Q56	Do you consider yourself to be...?	92.6	0.0	7.4	0.0	83.1	0.0	16.9	0.0	88.2	0.0	11.8	0.0	85.8	0.0	14.2	0.0
Q57	How often do you feel isolated from others?	92.6	0.0	7.4	0.0	91.2	0.0	8.8	0.0	93.4	0.0	6.6	0.0	92.1	0.0	8.0	0.0
Q58	How often do you feel left out?	92.6	0.0	7.4	0.0	93.4	0.0	6.6	0.0	94.7	0.0	5.3	0.0	93.7	0.0	6.3	0.0
Q59	How often do you feel that you lack companionship?	88.9	0.0	11.1	0.0	89.0	0.0	11.0	0.0	90.8	0.0	9.2	0.0	89.5	0.0	10.5	0.0
Q60	Do you ever worry about losing your home or place to live?	92.6	0.0	7.4	0.0	90.4	0.0	9.6	0.0	93.4	0.0	6.6	0.0	91.6	0.0	8.4	0.0
Q61	Do you ever have difficulty making ends meet/paying your bills?	81.5	0.0	18.5	0.0	92.7	0.0	7.4	0.0	94.7	0.0	5.3	0.0	92.1	0.0	8.0	0.0
Q62	After paying your bills, do you typically have enough money left for food?	81.5	0.0	18.5	0.0	88.2	0.0	11.8	0.0	94.7	0.0	5.3	0.0	89.5	0.0	10.5	0.0

Abbreviations: N/A=Not Applicable; PNA=Prefer Not to Answer or Missing; DK/DNR=Don't Know/Do Not Remember

Note: Respondents did not have to respond to the optional hospital discharge and home care discharge modules if they answered *No* to the conditional branching questions (Q36$_{Sc}$ & Q43$_{Sc}$) and are not included in the completion rates for these questions. Questions 36$_{Sc}$ and 43$_{Sc}$ were not included on the paper survey.

Table 29. Caregiver Survey question-level completion rates, by survey completion mode.

		Online (n=29)				**Telephone** (n=25)				**Paper** (n=61)				**Overall** (n=115)			
Item	**Abridged Question Text**	**Valid**	**N/A**	**PNA**	**DK/ DNR**	**Valid**	**N/A**	**PNA**	**DK/ DNR**	**Valid**	**N/A**	**PNA**	**DK/ DNR**	**Valid**	**N/A**	**PNA**	**DK/ DNR**
Being a Caregiver…																	
Q01	What is your relationship to [client]?	96.6	0.0	3.5	0.0	100.0	0.0	0.0	0.0	100.0	0.0	0.0	0.0	99.1	0.0	0.9	0.0
Q02	In an average week, how many hours of help do you provide to [client]?	100.0	0.0	0.0	0.0	100.0	0.0	0.0	0.0	98.4	0.0	1.6	0.0	99.1	0.0	0.9	0.0
Q03	In addition to yourself, how many other unpaid caregivers are you aware of that.	96.6	0.0	3.5	0.0	96.0	0.0	4.0	0.0	100.0	0.0	0.0	0.0	98.3	0.0	1.7	0.0
Q04	What kind of care do you provide?	100.0	0.0	0.0	0.0	100.0	0.0	0.0	0.0	100.0	0.0	0.0	0.0	100.0	0.0	0.0	0.0
Q05	Do you also receive home care services to support your own needs?	100.0	0.0	0.0	0.0	100.0	0.0	0.0	0.0	98.4	0.0	1.6	0.0	99.1	0.0	0.9	0.0
Caregiver Supports…																	
Q06	How well prepared did you feel for your caregiving role?	100.0	0.0	0.0	0.0	100.0	0.0	0.0	0.0	98.4	0.0	1.6	0.0	99.1	0.0	0.9	0.0
Q07	Do you feel well supported by home care providers as a caregiver?	100.0	0.0	0.0	0.0	96.0	0.0	4.0	0.0	100.0	0.0	0.0	0.0	99.1	0.0	0.9	0.0
Q08	If you needed support, did a home care provider connect you to other services?	72.4	17.2	0.0	10.3	52.0	48.0	0.0	0.0	52.5	27.9	8.2	11.5	57.4	29.6	4.4	8.7
Accessing Home Care…																	
Q09	Were you involved in planning [client]'s home care as much as you wanted to be?	100.0	0.0	0.0	0.0	92.0	0.0	8.0	0.0	96.7	0.0	3.3	0.0	96.5	0.0	3.5	0.0
Q10	Do you understand what home care services [client] should receive?	100.0	0.0	0.0	0.0	100.0	0.0	0.0	0.0	98.4	0.0	1.6	0.0	99.1	0.0	0.9	0.0
Q11	How often are home care visits arranged at a time that works for you?	100.0	0.0	0.0	0.0	88.0	0.0	12.0	0.0	96.7	0.0	3.3	0.0	95.7	0.0	4.4	0.0
Q12	Are you able to make changes to [client]'s home care services if needed?	82.8	17.2	0.0	0.0	76.0	24.0	0.0	0.0	77.1	21.3	1.6	0.0	78.3	20.9	0.9	0.0
Q13	How often do changes in appointments/service times negatively affect you?	82.8	17.2	0.0	0.0	76.0	24.0	0.0	0.0	88.5	6.6	4.9	0.0	84.4	13.0	2.6	0.0

Q14	Do you have all the equipment and supplies you need for [client]?	82.8	17.2	0.0	0.0	96.0	4.0	0.0	0.0	77.1	18.0	4.9	0.0	82.6	14.8	2.6	0.0
Q15	What additional help is needed?	75.9	20.7	3.5	0.0	64.0	36.0	0.0	0.0	73.8	21.3	4.9	0.0	72.2	24.4	3.5	0.0
Q16	What services have you or your family paid for?	86.2	13.8	0.0	0.0	68.0	32.0	0.0	0.0	72.1	26.2	1.6	0.0	74.8	24.4	0.9	0.0
Q17	Do you have enough money to pay for everything needed to support [client]'s?	75.9	17.2	6.9	0.0	76.0	16.0	8.0	0.0	75.4	21.3	3.3	0.0	75.7	19.1	5.2	0.0
Responding to Your Needs…																	
Q18	What help do you need to support yourself?	58.6	37.9	3.5	0.0	28.0	72.0	0.0	0.0	34.4	59.0	6.6	0.0	39.1	56.5	4.4	0.0
Communication…																	
Q19	Is there someone who is reliable in responding to any questions or issues?	79.3	17.2	3.5	0.0	84.0	16.0	0.0	0.0	77.1	13.1	4.9	4.9	79.1	14.8	3.5	2.6
Q20	Do home care providers explain things in a way that is easy to understand?	86.2	10.3	3.5	0.0	88.0	12.0	0.0	0.0	88.5	6.6	4.9	0.0	87.8	8.7	3.5	0.0
Q21	If you were not able to understand, for what reason?	34.5	58.6	6.9	0.0	24.0	76.0	0.0	0.0	26.2	65.6	8.2	0.0	27.8	66.1	6.1	0.0
Q22	How often do you feel that the home care providers listen carefully to you?	89.7	6.9	3.5	0.0	92.0	8.0	0.0	0.0	90.2	6.6	3.3	0.0	90.4	7.0	2.6	0.0
Q23	Do you observe a lack of communication between different home care providers?	96.6	0.0	3.5	0.0	100.0	0.0	0.0	0.0	93.4	0.0	6.6	0.0	95.7	0.0	4.4	0.0
Q24	Do you understand the next steps in [client]'s home care?	75.9	20.7	3.5	0.0	72.0	28.0	0.0	0.0	62.3	34.4	3.3	0.0	67.8	29.6	2.6	0.0
Home Care Providers…																	
Q25	Generally, home care providers...	93.1	0.0	6.9	0.0	100.0	0.0	0.0	0.0	95.1	0.0	4.9	0.0	95.7	0.0	4.4	0.0
Q26	Do you believe [client] was harmed because of an error, mistake or omission?	89.7	0.0	10.3	0.0	100.0	0.0	0.0	0.0	95.1	0.0	4.9	0.0	94.8	0.0	5.2	0.0
Q27	What is your experience with the complaint process?	37.9	51.7	3.5	6.9	48.0	52.0	0.0	0.0	26.2	65.6	8.2	0.0	33.9	59.1	5.2	1.7
After a Hospital Stay…																	
Q28$_{Sc}$	Was [client] hospitalized before the start of their home care or <6mth ago?	100.0	0.0	0.0	0.0	100.0	0.0	0.0	0.0	-	-	-	-	100.0	0.0	0.0	0.0

Q28	How well prepared did you feel for your caregiving role?	100.0	0.0	0.0	0.0	100.0	0.0	0.0	0.0	100.0	0.0	0.0	0.0	100.0	0.0	0.0	0.0
Q29	Did you know whom to contact if you had a question about [client]'s condition?	77.8	0.0	0.0	22.2	100.0	0.0	0.0	0.0	93.3	0.0	0.0	6.7	93.0	0.0	0.0	7.0
Q30	Did the home care providers seem well informed and up-to-date?	77.8	0.0	0.0	22.2	100.0	0.0	0.0	0.0	86.7	0.0	6.7	6.7	90.7	0.0	2.3	7.0
Q31	Did [client]'s home care start when you needed it?	100.0	0.0	0.0	0.0	100.0	0.0	0.0	0.0	86.7	0.0	6.7	6.7	95.3	0.0	2.3	2.3
After Home Care Ended…																	
Q32Sc	Have [client]'s Home and Community Care services ended?	100.0	0.0	0.0	0.0	100.0	0.0	0.0	0.0	-	-	-	-	100.0	0.0	0.0	0.0
Q32	If you needed further support, did a home care provider connect you?	100.0	0.0	0.0	0.0	100.0	0.0	0.0	0.0	75.0	0.0	25.0	0.0	84.2	0.0	15.8	0.0
Q33	How prepared did you feel for [client]'s home care services to end?	50.0	0.0	50.0	0.0	100.0	0.0	0.0	0.0	83.3	0.0	16.7	0.0	78.9	0.0	21.1	0.0
Q34	Do you know whom to contact if [client] needs home care again?	25.0	0.0	75.0	0.0	100.0	0.0	0.0	0.0	100.0	0.0	0.0	0.0	84.2	0.0	15.8	0.0
Overall…																	
Q35	Overall, I am satisfied with...	79.3	0.0	20.7	0.0	100.0	0.0	0.0	0.0	90.2	0.0	9.8	0.0	89.6	0.0	10.4	0.0
Q36	How helpful are [client]'s home care services in allowing them to stay home?	79.3	13.8	6.9	0.0	80.0	16.0	4.0	0.0	80.3	14.8	4.9	0.0	80.0	14.8	5.2	0.0
About You…																	
Q37	What best describes your race/ethnicity?	93.1	0.0	6.9	0.0	96.0	0.0	4.0	0.0	93.4	0.0	6.6	0.0	93.9	0.0	6.1	0.0
Q38	Do you self-identify as a Francophone?	96.6	0.0	3.5	0.0	96.0	0.0	4.0	0.0	96.7	0.0	3.3	0.0	96.5	0.0	3.5	0.0
Q39	Do you self-identify as an Indigenous person?	96.6	0.0	3.5	0.0	96.0	0.0	4.0	0.0	93.4	0.0	6.6	0.0	94.8	0.0	5.2	0.0
Q40	What is your age?	100.0	0.0	0.0	0.0	96.0	0.0	4.0	0.0	95.1	0.0	4.9	0.0	96.5	0.0	3.5	0.0
Q41	What sex were you assigned at birth?	100.0	0.0	0.0	0.0	100.0	0.0	0.0	0.0	93.4	0.0	6.6	0.0	96.5	0.0	3.5	0.0
Q42	Which of the following describes your present gender identity?	100.0	0.0	0.0	0.0	96.0	0.0	4.0	0.0	95.1	0.0	4.9	0.0	96.5	0.0	3.5	0.0
Q43	Do you consider yourself to be...?	93.1	0.0	6.9	0.0	96.0	0.0	4.0	0.0	95.1	0.0	4.9	0.0	94.8	0.0	5.2	0.0

Q44	How often do you feel isolated from others?	100.0	0.0	0.0	0.0	96.0	0.0	4.0	0.0	95.1	0.0	4.9	0.0	96.5	0.0	3.5	0.0
Q45	How often do you feel left out?	100.0	0.0	0.0	0.0	100.0	0.0	0.0	0.0	95.1	0.0	4.9	0.0	97.4	0.0	2.6	0.0
Q46	How often do you feel that you lack companionship?	100.0	0.0	0.0	0.0	100.0	0.0	0.0	0.0	96.7	0.0	3.3	0.0	98.3	0.0	1.7	0.0
Q47	Do you ever worry about losing your home or place to live?	96.6	0.0	3.5	0.0	96.0	0.0	4.0	0.0	100.0	0.0	0.0	0.0	98.3	0.0	1.7	0.0
Q48	Do you ever have difficulty making ends meet/paying your bills at the end of the	93.1	0.0	6.9	0.0	100.0	0.0	0.0	0.0	100.0	0.0	0.0	0.0	98.3	0.0	1.7	0.0
Q49	After paying your monthly bills, do you typically have enough money left for foo	100.0	0.0	0.0	0.0	100.0	0.0	0.0	0.0	100.0	0.0	0.0	0.0	100.0	0.0	0.0	0.0

Abbreviations: N/A=Not Applicable; PNA=Prefer Not to Answer or Missing; DK/DNR=Don't Know/Do Not Remember

Note: Respondents did not have to respond to the optional hospital discharge and home care discharge modules if they answered *No* to the conditional branching questions (Q28$_{Sc}$ & Q32$_{Sc}$) and are not included in the completion rates for these questions. Questions 28$_{Sc}$ and 32$_{Sc}$ were not included on the paper survey.

Table 30. Client Survey question-level completion rates, by survey completion language.

		English (n=208)				**French** (n=31)				**Overall** (n=239)			
Item	**Abridged Question Text**	Valid	N/A	PNA	DK/DNR	Valid	N/A	PNA	DK/DNR	Valid	N/A	PNA	DK/DNR
Planning Your Home Care…													
Q01	Did someone tell you what care and services you would get?	92.3	0.0	1.0	6.7	93.5	0.0	0.0	6.5	92.5	0.0	0.8	6.7
Q02	Were you asked in which language you would like to receive your services?	82.7	0.0	0.5	16.8	80.6	0.0	0.0	19.4	82.4	0.0	0.4	17.2
Q03	Were you involved in planning your home care as much as you wanted to be?	90.9	0.0	2.9	6.3	83.9	0.0	12.9	3.2	90.0	0.0	4.2	5.9
Q04	Did your home care providers include your family/caregiver in planning?	95.2	0.0	1.0	3.8	83.9	0.0	16.1	0.0	93.7	0.0	2.9	3.3
Q05	Were your values, identity(ies), language preferences, and culture considered?	87.0	0.0	1.0	12.0	74.2	0.0	22.6	3.2	85.4	0.0	3.8	10.9
Q06	Did your home care start when you needed it?	97.1	0.0	1.4	1.4	93.5	0.0	3.2	3.2	96.7	0.0	1.7	1.7
Accessing Home Care…													
Q07	Do you understand what home care services you should receive?	98.1	0.0	1.9	0.0	100.0	0.0	0.0	0.0	98.3	0.0	1.7	0.0
Q08	Do you have all the equipment and supplies you need to continue to live at home?	82.2	15.4	2.4	0.0	96.8	3.2	0.0	0.0	84.1	13.8	2.1	0.0
Q09	Are you receiving the right types of home care services for your needs?	94.2	0.0	5.8	0.0	100.0	0.0	0.0	0.0	95.0	0.0	5.0	0.0
Q10	Do you receive enough hours of home care?	95.7	0.0	4.3	0.0	96.8	0.0	3.2	0.0	95.8	0.0	4.2	0.0
Q11	How often are home care visits arranged at a time that works for you?	94.7	0.0	5.3	0.0	100.0	0.0	0.0	0.0	95.4	0.0	4.6	0.0
Q12	Are you able to make changes to your home care services if needed?	69.7	23.6	6.7	0.0	64.5	25.8	9.7	0.0	69.0	23.8	7.1	0.0
Q13	If you needed further support, did a home care provider connect you?	53.8	39.9	3.4	2.9	38.7	58.1	3.2	0.0	51.9	42.3	3.3	2.5
Q14	What additional help did you need?	55.8	40.9	3.4	0.0	29.0	64.5	6.5	0.0	52.3	43.9	3.8	0.0
Q15	What services have you or your family paid for?	63.5	34.1	2.4	0.0	80.6	12.9	6.5	0.0	65.7	31.4	2.9	0.0
Communication…													
Q16	How often do home care providers introduce themselves and explain their role?	90.9	0.0	4.3	4.8	96.8	0.0	3.2	0.0	91.6	0.0	4.2	4.2
Q17	Do you feel that your home care providers listen carefully to you?	94.7	2.9	2.4	0.0	90.3	6.5	3.2	0.0	94.1	3.3	2.5	0.0
Q18	How often can you communicate with your providers in your preferred language?	97.6	0.0	2.4	0.0	93.5	0.0	6.5	0.0	97.1	0.0	2.9	0.0
Q19	Do home care providers explain things in a way that is easy to understand?	95.7	0.0	4.3	0.0	80.6	0.0	19.4	0.0	93.7	0.0	6.3	0.0

Q20	If you were not able to understand, for what reason?	33.7	61.1	5.3	0.0	48.4	41.9	9.7	0.0	35.6	58.6	5.9	0.0
Q21	Is there someone who is reliable in responding to any questions or issues?	73.1	24.0	2.9	0.0	87.1	6.5	6.5	0.0	74.9	21.8	3.3	0.0
Q22	Do you experience a lack of communication between your different providers?	93.8	0.0	6.3	0.0	90.3	0.0	9.7	0.0	93.3	0.0	6.7	0.0
Q23	Do you have problems because there are different people providing care?	63.5	34.1	2.4	0.0	58.1	35.5	6.5	0.0	62.8	34.3	2.9	0.0
Q24	How often do your providers notify you of a change in service/service time?	85.6	12.5	1.9	0.0	96.8	0.0	3.2	0.0	87.0	10.9	2.1	0.0
Q25	How often do you understand the next steps in your home care?	86.1	0.0	13.9	0.0	90.3	0.0	9.7	0.0	86.6	0.0	13.4	0.0
Home Care Providers…													
Q26	How often do your home care providers arrive when they are scheduled to?	95.7	0.0	4.3	0.0	93.5	0.0	6.5	0.0	95.4	0.0	4.6	0.0
Q27	How often do changes in appointments/service times negatively affect your care?	83.2	14.4	2.4	0.0	74.2	16.1	9.7	0.0	82.0	14.6	3.3	0.0
Q28	Do your home care providers stay long enough to provide the care you need?	94.7	0.0	5.3	0.0	93.5	0.0	6.5	0.0	94.6	0.0	5.4	0.0
Q29	Do your home care providers help you with the things you need?	92.8	0.0	7.2	0.0	87.1	0.0	12.9	0.0	92.1	0.0	7.9	0.0
Q30	Do your home care providers treat you with courtesy and respect?	97.1	0.0	2.9	0.0	93.5	0.0	6.5	0.0	96.7	0.0	3.3	0.0
Q31	Do your home care providers have the necessary skills?	94.7	0.0	3.4	1.9	87.1	0.0	6.5	6.5	93.7	0.0	3.8	2.5
Q32	Do you feel safe receiving home care from your home care providers?	97.1	0.0	2.9	0.0	93.5	0.0	6.5	0.0	96.7	0.0	3.3	0.0
Q33	Do you believe you were harmed because of an error, mistake, or omission?	96.2	0.0	3.8	0.0	93.5	0.0	6.5	0.0	95.8	0.0	4.2	0.0
Q34	What is your experience with the complaint process?	32.7	61.1	2.9	3.4	12.9	80.6	3.2	3.2	30.1	63.6	2.9	3.3
Q35	Has a home care provider ever shared information that you did not consent to?	83.2	0.0	1.4	15.4	90.3	0.0	6.5	3.2	84.1	0.0	2.1	13.8
After a Hospital Stay…													
Q36$_{Sc}$	Were you hospitalized before the start of your home care services, or <6mth ago?	100.0	0.0	0.0	0.0	100.0	0.0	0.0	0.0	100.0	0.0	0.0	0.0
Q36	The hospital took my preferences and those of my family into account.	91.7	0.0	0.0	8.3	80.0	0.0	20.0	0.0	90.2	0.0	2.4	7.3
Q37	I had a good understanding of the things I was responsible for.	91.7	0.0	1.4	6.9	100.0	0.0	0.0	0.0	92.7	0.0	1.2	6.1

Q38	I clearly understood the purpose of taking each of my medications.	90.3	0.0	4.2	5.6	90.0	0.0	10.0	0.0	90.2	0.0	4.9	4.9
Q39	Did you know whom to contact if you had a question?	94.4	0.0	2.8	2.8	100.0	0.0	0.0	0.0	95.1	0.0	2.4	2.4
Q40	Did your home care providers seem well-informed and up-to-date?	84.7	0.0	4.2	11.1	90.0	0.0	0.0	10.0	85.4	0.0	3.7	11.0
Q41	Were you told different things by hospital staff and your home care providers?	86.1	0.0	1.4	12.5	90.0	0.0	0.0	10.0	86.6	0.0	1.2	12.2
Q42	Were your care needs met after you were discharged from the hospital?	95.8	0.0	1.4	2.8	80.0	0.0	10.0	10.0	93.9	0.0	2.4	3.7
After Your Home Care Ended…													
Q43$_{Sc}$	Have your Home and Community Care services ended?	100.0	0.0	0.0	0.0	100.0	0.0	0.0	0.0	100.0	0.0	0.0	0.0
Q43	If you needed further support, did a home care provider connect you?	93.8	0.0	6.3	0.0	100.0	0.0	0.0	0.0	94.6	0.0	5.4	0.0
Q44	How prepared did you feel for your home care services to end?	96.9	0.0	3.1	0.0	60.0	0.0	40.0	0.0	91.9	0.0	8.1	0.0
Q45	Do you know whom to contact if you need home care again?	100.0	0.0	0.0	0.0	100.0	0.0	0.0	0.0	100.0	0.0	0.0	0.0
Overall…													
Q46	How helpful are/were your services in allowing you to stay at home?	81.3	13.9	4.8	0.0	77.4	3.2	19.4	0.0	80.8	12.6	6.7	0.0
Q47	Overall, how would you rate Home and Community Care services?	95.7	0.0	4.3	0.0	93.5	0.0	6.5	0.0	95.4	0.0	4.6	0.0
Q48	The overall quality of care from your home care providers is/was:	91.8	0.0	8.2	0.0	90.3	0.0	9.7	0.0	91.6	0.0	8.4	0.0
About You…													
Q49	Who is the main person/ people completing this questionnaire?	97.6	0.0	2.4	0.0	93.5	0.0	6.5	0.0	97.1	0.0	2.9	0.0
Q50	What best describes your race/ethnicity?	92.8	0.0	7.2	0.0	96.8	0.0	3.2	0.0	93.3	0.0	6.7	0.0
Q51	Do you self-identify as a Francophone?	97.1	0.0	2.9	0.0	96.8	0.0	3.2	0.0	97.1	0.0	2.9	0.0
Q52	Do you self-identify as an Indigenous person?	95.2	0.0	4.8	0.0	93.5	0.0	6.5	0.0	95.0	0.0	5.0	0.0
Q53	What is your age?	96.2	0.0	3.8	0.0	100.0	0.0	0.0	0.0	96.7	0.0	3.3	0.0
Q54	What sex were you assigned at birth?	97.1	0.0	2.9	0.0	100.0	0.0	0.0	0.0	97.5	0.0	2.5	0.0
Q55	Which of the following describes your present gender identity?	97.1	0.0	2.9	0.0	100.0	0.0	0.0	0.0	97.5	0.0	2.5	0.0
Q56	Do you consider yourself to be...?	87.5	0.0	12.5	0.0	74.2	0.0	25.8	0.0	85.8	0.0	14.2	0.0
Q57	How often do you feel isolated from others?	93.3	0.0	6.7	0.0	83.9	0.0	16.1	0.0	92.1	0.0	7.9	0.0
Q58	How often do you feel left out?	94.2	0.0	5.8	0.0	90.3	0.0	9.7	0.0	93.7	0.0	6.3	0.0
Q59	How often do you feel that you lack companionship?	89.9	0.0	10.1	0.0	87.1	0.0	12.9	0.0	89.5	0.0	10.5	0.0

Q60	Do you ever worry about losing your home or place to live?	91.3	0.0	8.7	0.0	93.5	0.0	6.5	0.0	91.6	0.0	8.4	0.0
Q61	Do you ever have difficulty making ends meet/paying your bills?	92.3	0.0	7.7	0.0	90.3	0.0	9.7	0.0	92.1	0.0	7.9	0.0
Q62	After paying your bills, do you typically have enough money left for food?	89.9	0.0	10.1	0.0	87.1	0.0	12.9	0.0	89.5	0.0	10.5	0.0

Abbreviations: N/A=Not Applicable; PNA=Prefer Not to Answer or Missing; DK/DNR=Don't Know/Do Not Remember

Note: Respondents did not have to respond to the optional hospital discharge and home care discharge modules if they answered *No* to the conditional branching questions (Q36_{Sc} & Q43_{Sc}) and are not included in the completion rates for these questions. Questions 36_{Sc} and 43_{Sc} were not included on the paper survey.

APPENDIX D – RESPONSE DISTRIBUTION

Table 31. Client Survey response distribution for each item, by mode

Item	Abridged Question Text	Response Option	Mode of Completion							
			Online		Telephone		Paper		Overall	
			n	%	n	%	n	%	n	%
Planning Your Home Care...										
Q01	Did someone tell you what care and services you would get?	Yes	23	92.0	114	89.1	62	91.2	199	90.0
		No	2	8.0	14	10.9	6	8.8	22	10.0
Q02	Were you asked in which language you would like to receive your services?	Yes	13	68.4	64	58.7	44	63.8	121	61.4
		No	6	31.6	45	41.3	25	36.2	76	38.6
Q03	Were you involved in planning your home care as much as you wanted to be?	Not at all	3	12.0	18	14.9	9	13.0	30	14.0
		Somewhat	9	36.0	21	17.4	20	29.0	50	23.3
		Mostly	1	4.0	23	19.0	16	23.2	40	18.6
		Fully	12	48.0	52	43.0	20	29.0	84	39.1
		I did not want to be involved.	0	0	7	5.8	4	5.8	11	5.1
Q04	Did your home care providers include your family/caregiver in planning?	Not at all	3	11.5	29	23.4	13	17.6	45	20.1
		Somewhat	5	19.2	13	10.5	15	20.3	33	14.7
		Mostly	3	11.5	18	14.5	13	17.6	34	15.2
		Fully	12	46.2	50	40.3	26	35.1	88	39.3
		I do not have family or caregivers.	2	7.7	10	8.1	4	5.4	16	7.1
		I did not want my family/caregiver to be included	1	3.8	4	3.2	3	4.1	8	3.6
Q05	Were your values, identity(ies), language preferences, and culture considered?	Not at all	5	20.0	28	25.2	15	22.1	48	23.5
		Somewhat	4	16.0	14	12.6	7	10.3	25	12.3
		Mostly	4	16.0	19	17.1	24	35.3	47	23.0
		Fully	12	48.0	50	45.0	22	32.4	84	41.2
Q06	Did your home care start when you needed it?	Yes	25	92.6	123	93.2	64	88.9	212	91.8
		No	2	7.4	9	6.8	8	11.1	19	8.2
Accessing Home Care...										
Q07	Do you understand what home care services you should receive?	Not at all	2	7.4	5	3.7	4	5.4	11	4.7
		Somewhat	4	14.8	19	14.2	20	27.0	43	18.3
		Mostly	11	40.7	32	23.9	29	39.2	72	30.6
		Fully	10	37.0	78	58.2	21	28.4	109	46.4

Q08	Do you have all the equipment and supplies you need to continue to live at home?	Yes, I have all the equipment and supplies needed	17	63.0	105	78.4	56	76.7	178	76.1
		I am missing important equipment and supplies, and I do not know how to obtain them	0	0	1	0.7	1	1.4	2	0.9
		I am missing important equipment and supplies because I cannot afford them	3	11.1	8	6.0	5	6.8	16	6.8
		I am missing important equipment and supplies for other reasons	2	7.4	3	2.2	0	0.0	5	2.1
		Not applicable / I do not need any equipment or supplies	5	18.5	17	12.7	11	15.1	33	14.1
Q09	Are you receiving the right types of home care services for your needs?	Not at all	1	3.8	2	1.5	1	1.4	4	1.8
		Somewhat	5	19.2	15	11.5	11	15.7	31	13.7
		Mostly	10	38.5	36	27.5	30	42.9	76	33.5
		Fully	10	38.5	78	59.5	28	40.0	116	51.1
Q10	Do you receive enough hours of home care?	I need a lot more.	4	15.4	8	6.1	6	8.5	18	7.9
		I need a little more.	8	30.8	36	27.3	22	31.0	66	28.8
		I receive enough.	13	50.0	80	60.6	40	56.3	133	58.1
		I receive more than enough.	1	3.8	8	6.1	3	4.2	12	5.2
Q11	How often are home care visits arranged at a time that works for you?	Never	1	3.8	5	3.8	0	0	6	2.6
		Sometimes	3	11.5	16	12.1	5	7.1	24	10.5
		Usually	14	53.8	38	28.8	41	58.6	93	40.8
		Always	8	30.8	73	55.3	24	34.3	105	46.1
Q12	Are you able to make changes to your home care services if needed?	Never	2	7.7	12	9.5	3	4.3	17	7.7
		Sometimes	4	15.4	19	15.1	13	18.6	36	16.2
		Usually	10	38.5	21	16.7	25	35.7	56	25.2
		Always	6	23.1	38	30.2	12	17.1	56	25.2
		Not applicable / My needs have not changed	4	15.4	36	28.6	17	24.3	57	25.7
Q13	If you needed further support, did a home care provider connect you?	Yes, I was connected to enough of the right services	8	33.3	43	32.3	17	25.0	68	30.2
		Yes, I was connected, but they were not the right ones.	0	0	1	0.8	2	2.9	3	1.3
		Yes, I was connected to the right ones, but I needed more services	2	8.3	4	3.0	5	7.4	11	4.9
		Yes, I was connected, but I declined.	1	4.2	8	6.0	2	2.9	11	4.9
		No, I was not connected to other services	4	16.7	14	10.5	13	19.1	31	13.8
		Not applicable / I did not need further support	9	37.5	63	47.4	29	42.6	101	44.9
Q14	What additional help did you need?	Personal support	9	34.6	21	15.6	13	18.8	43	18.7
		Nursing	7	26.9	10	7.4	5	7.2	22	9.6
		Physiotherapy	8	30.8	24	17.8	12	17.4	44	19.1
		Other special therapies	4	15.4	7	5.2	3	4.3	14	6.1
		Social visits	5	19.2	16	11.9	14	20.3	35	15.2
		Transportation	8	30.8	19	14.1	11	15.9	38	16.5
		Housework and laundry	13	50.0	25	18.5	24	34.8	62	27.0
		Meal preparation	5	19.2	11	8.1	8	11.6	24	10.4
		Shopping	7	26.9	10	7.4	12	17.4	29	12.6
		Other supports	3	11.5	7	5.2	4	5.8	14	6.1
		N/A	10	38.5	68	50.4	27	39.1	105	45.7

Q15	What services have you or your family paid for?	Equipment	13	50.0	50	37.0	19	26.8	82	35.3
		Home modification	10	38.5	29	21.5	14	19.7	53	22.8
		Personal support	5	19.2	12	8.9	10	14.1	27	11.6
		Nursing	5	19.2	9	6.7	9	12.7	23	9.9
		Physiotherapy	6	23.1	9	6.7	8	11.3	23	9.9
		Other special therapies	3	11.5	2	1.5	3	4.2	8	3.4
		Transportation	12	46.2	47	34.8	22	31.0	81	34.9
		Housework and laundry	16	61.5	27	20.0	24	33.8	67	28.9
		Meal preparation	8	30.8	13	9.6	11	15.5	32	13.8
		Shopping	5	19.2	13	9.6	13	18.3	31	13.4
		Cannot afford to pay	2	7.7	1	0.7	3	4.2	6	2.6
		Other supports	5	19.2	7	5.2	4	5.6	16	6.9
		N/A did not have OOP expenses	6	23.1	45	33.3	24	33.8	75	32.3
Communication...										
Q16	How often do home care providers introduce themselves and explain their role?	Never	3	12.0	15	12.2	2	2.8	20	9.1
		Sometimes	5	20.0	23	18.7	18	25.4	46	21.0
		Usually	6	24.0	22	17.9	21	29.6	49	22.4
		Always	11	44.0	63	51.2	30	42.3	104	47.5
Q17	Do you feel that your home care providers listen carefully to you?	Never	0	0	3	2.2	1	1.4	4	1.7
		Sometimes	6	23.1	13	9.6	11	15.3	30	12.9
		Usually	11	42.3	25	18.5	30	41.7	66	28.3
		Always	8	30.8	88	65.2	29	40.3	125	53.6
		Not applicable / I did not speak with providers	1	3.8	6	4.4	1	1.4	8	3.4
Q18	How often can you communicate with your providers in your preferred language?	Never	3	11.5	9	6.8	6	8.2	18	7.8
		Sometimes	0	0	14	10.5	4	5.5	18	7.8
		Usually	4	15.4	11	8.3	20	27.4	35	15.1
		Always	19	73.1	99	74.4	43	58.9	161	69.4
Q19	Do home care providers explain things in a way that is easy to understand?	Never	2	7.7	5	4.0	2	2.7	9	4.0
		Sometimes	3	11.5	14	11.2	6	8.2	23	10.3
		Usually	11	42.3	20	16	32	43.8	63	28.1
		Always	10	38.5	86	68.8	33	45.2	129	57.6
Q20	If you were not able to understand, for what reason?	Language barrier	5	19.2	22	16.9	17	24.6	44	19.6
		Use of jardon	2	7.7	9	6.9	5	7.2	16	7.1
		Spoke too fast	5	19.2	13	10.0	6	8.7	24	10.7
		Not listening	2	7.7	5	3.8	4	5.8	11	4.9
		Other reasons	4	15.4	11	8.5	8	11.6	23	10.2
		N/A no difficulty	14	53.8	89	68.5	37	53.6	140	62.2

Q21	Is there someone who is reliable in responding to any questions or issues?	Never	2	7.7	5	3.8	0	0	7	3.0
		Sometimes	2	7.7	11	8.3	6	8.3	19	8.2
		Usually	7	26.9	22	16.5	24	33.3	53	22.9
		Always	11	42.3	58	43.6	31	43.1	100	43.3
		Not applicable / I have not had any questions	4	15.4	37	27.8	11	15.3	52	22.5
Q22	Do you experience a lack of communication between your different providers?	Never	16	61.5	92	72.4	36	51.4	144	64.6
		Sometimes	7	26.9	18	14.2	28	40.0	53	23.8
		Usually	1	3.8	7	5.5	2	2.9	10	4.5
		Always	2	7.7	10	7.9	4	5.7	16	7.2
Q23	Do you have problems because there are different people providing care?	Never	6	23.1	44	33.1	23	31.5	73	31.5
		Sometimes	7	26.9	20	15.0	23	31.5	50	21.6
		Usually	1	3.8	7	5.3	2	2.7	10	4.3
		Always	2	7.7	11	8.3	4	5.5	17	7.3
		Not applicable / I only have one provider coming to my home	10	38.5	51	38.3	21	28.8	82	35.3
Q24	How often do your providers notify you of a change in service/service time?	Never	3	11.5	6	4.4	6	8.3	15	6.4
		Sometimes	3	11.5	24	17.6	19	26.4	46	19.7
		Usually	12	46.2	30	22.1	20	27.8	62	26.5
		Always	7	26.9	57	41.9	21	29.2	85	36.3
		Not applicable / I have not had any changes in the timing of appointments	1	3.8	19	14.0	6	8.3	26	11.1
Q25	How often do you understand the next steps in your home care?	Never	5	20.0	12	10.3	5	7.6	22	10.6
		Sometimes	3	12.0	16	13.8	16	24.2	35	16.9
		Usually	12	48.0	20	17.2	26	39.4	58	28.0
		Always	5	20.0	68	58.6	19	28.8	92	44.4
Home Care Providers...										
Q26	How often do your home care providers arrive when they are scheduled to?	Never	1	3.8	3	2.2	0	0	4	1.8
		Sometimes	2	7.7	10	7.5	1	1.5	13	5.7
		Usually	12	46.2	45	33.6	39	57.4	96	42.1
		Always	11	42.3	76	56.7	28	41.2	115	50.4
Q27	How often do changes in appointments/service times negatively affect your care?	Never	12	46.2	50	37.0	33	47.1	95	41.1
		Sometimes	8	30.8	40	29.6	28	40.0	76	32.9
		Usually	1	3.8	9	6.7	2	2.9	12	5.2
		Always	2	7.7	8	5.9	3	4.3	13	5.6
		Not applicable / I have not had any changes in the timing of appointments	3	11.5	28	20.7	4	5.7	35	15.2
Q28	Do your home care providers stay long enough to provide the care you need?	Never	2	7.7	2	1.5	1	1.4	5	2.2
		Sometimes	6	23.1	10	7.7	6	8.6	22	9.7
		Usually	7	26.9	25	19.2	25	35.7	57	25.2
		Always	11	42.3	93	71.5	38	54.3	142	62.8

Q29	Do your home care providers help you with the things you need?	Never	1	3.8	4	3.2	2	2.9	7	3.2
		Sometimes	3	11.5	12	9.5	4	5.9	19	8.6
		Usually	13	50.0	30	23.8	28	41.2	71	32.3
		Always	9	34.6	80	63.5	34	50.0	123	55.9
Q30	Do your home care providers treat you with courtesy and respect?	Never	1	3.8	1	0.7	0	0	2	0.9
		Sometimes	2	7.7	6	4.4	4	5.8	12	5.2
		Usually	5	19.2	14	10.3	9	13.0	28	12.1
		Always	18	69.2	115	84.6	56	81.2	189	81.8
Q31	Do your home care providers have the necessary skills?	Never	1	4.0	1	0.8	1	1.5	3	1.3
		Sometimes	5	20.0	8	6.1	3	4.5	16	7.1
		Usually	7	28.0	32	24.2	21	31.3	60	26.8
		Always	12	48.0	91	68.9	42	62.7	145	64.7
Q32	Do you feel safe receiving home care from your home care providers?	Never	1	3.8	1	0.7	0	0	2	0.9
		Sometimes	0	0	5	3.7	1	1.4	6	2.6
		Usually	7	26.9	18	13.2	14	20.3	39	16.9
		Always	18	69.2	112	82.4	54	78.3	184	79.7
Q33	Do you believe you were harmed because of an error, mistake, or omission?	No	22	88.0	125	92.6	66	95.7	213	93.0
		Yes, and there was a good follow-up to address the problem	1	4.0	5	3.7	2	2.9	8	3.5
		Yes, but there was not a good enough follow-up to address the problem	2	8.0	5	3.7	1	1.4	8	3.5
Q34	What is your experience with the complaint process?	I do not know how to make a complaint	0	0	4	3.0	7	10.6	11	4.9
		I know how, but I do not feel comfortable making a complaint	1	4.0	5	3.8	3	4.5	9	4.0
		I made a complaint, but not enough was done to address my complaint	3	12.0	13	9.8	7	10.6	23	10.3
		I made a complaint and it was resolved to my satisfaction	5	20.0	16	12.0	8	12.1	29	12.9
		Not applicable / I have not needed to complain	16	64.0	95	71.4	41	62.1	152	67.9
Q35	Has a home care provider ever shared information that you did not consent to?	Yes	0	0	3	2.4	1	1.7	4	2.0
		No	15	100	124	97.6	58	98.3	197	98.0
After Your Hospital Stay…										
Q36$_{Sc}$	Were you hospitalized before the start of your home care services, or <6mth ago?	Yes	8	29.6	58	42.6	16	21.1	82	34.3
		No	19	70.4	78	57.4	60	78.9	157	65.7
Q36	The hospital took my preferences and those of my family into account.	Strongly disagree	1	14.3	3	5.6	0	0	4	5.4
		Disagree	2	28.6	3	5.6	1	7.7	6	8.1
		Agree	1	14.3	29	53.7	6	46.2	36	48.6
		Strongly Agree	3	42.9	19	35.2	6	46.2	28	37.8
Q37	I had a good understanding of the things I was responsible for.	Strongly disagree	1	14.3	4	7.3	1	7.1	6	7.9
		Disagree	1	14.3	4	7.3	2	14.3	7	9.2
		Agree	3	42.9	30	54.5	8	57.1	41	53.9
		Strongly Agree	2	28.6	17	30.9	3	21.4	22	28.9

Q38	I clearly understood the purpose of taking each of my medications.	Strongly disagree	1	14.3	3	5.6	1	7.7	5	6.8
		Disagree	0	0	1	1.9	2	15.4	3	4.1
		Agree	3	42.9	26	48.1	6	46.2	35	47.3
		Strongly Agree	3	42.9	24	44.4	4	30.8	31	41.9
Q39	Did you know whom to contact if you had a question?	Yes	5	71.4	42	76.4	13	81.3	60	76.9
		No	2	28.6	13	23.6	3	18.8	18	23.1
Q40	Did your home care providers seem well-informed and up-to-date?	Not at all	2	28.6	9	18.0	0	0	11	15.7
		Somewhat	1	14.3	7	14.0	3	23.1	11	15.7
		Mostly	2	28.6	10	20.0	5	38.5	17	24.3
		Fully	2	28.6	24	48.0	5	38.5	31	44.3
Q41	Were you told different things by hospital staff and your home care providers?	Never	3	60.0	41	78.8	10	71.4	54	76.1
		Sometimes	1	20.0	7	13.5	4	28.6	12	16.9
		Usually	0	0	2	3.8	0	0	2	2.8
		Always	1	20.0	2	3.8	0	0	3	4.2
Q42	Were your care needs met after you were discharged from the hospital?	Not at all	1	14.3	6	11.1	0	0	7	9.1
		Somewhat	1	14.3	7	13.0	2	12.5	10	13.0
		Mostly	2	28.6	7	13.0	7	43.8	16	20.8
		Fully	3	42.9	34	63.0	7	43.8	44	57.1
After Your Home Care Ended...										
Q43$_{Sc}$	Have your Home and Community Care services ended?	Yes	2	7.4	24	17.6	11	14.5	37	15.5
		No	25	92.6	112	82.4	65	85.5	202	84.5
Q43	If you needed further support, did a home care provider connect you?	I did not need further support.	2	100	17	70.8	4	44.4	23	65.7
		Yes, I was connected to enough of the right community services	0	0	3	12.5	3	33.3	6	17.1
		Yes, I was connected, but they were not the right ones	0	0	0	0	0	0	0	0
		Yes, I was connected to the right ones, but I needed more services	0	0	1	4.2	1	11.1	2	5.7
		Yes, I was connected, but I declined.	0	0	1	4.2	0	0	1	2.9
		No, I was not connected to other community services	0	0	2	8.3	1	11.1	3	8.6
Q44	How prepared did you feel for your home care services to end?	Not at all	0	0	6	27.3	1	10.0	7	20.6
		Somewhat	0	0	2	9.1	1	10.0	3	8.8
		Mostly	0	0	2	9.1	2	20.0	4	11.8
		Fully	2	100	12	54.5	6	60.0	20	58.8
Q45	Do you know whom to contact if you need home care again?	Yes	1	50.0	19	79.2	9	81.8	29	78.4
		No	1	50.0	5	20.8	2	18.2	8	21.6
Overall...										
Q46	How helpful are/were your services in allowing you to stay at home?	Not helpful	1	3.8	2	1.5	1	1.5	4	1.8
		Somewhat helpful	3	11.5	19	14.4	13	20.0	35	15.7
		Very helpful	18	69.2	95	72.0	41	63.1	154	69.1
		Not applicable	4	15.4	16	12.1	10	15.4	30	13.5

Q47	Overall, how would you rate Home and Community Care services?	Poor	2	7.7	4	3.0	3	4.5	9	3.9
		Fair	2	7.7	6	4.4	4	6.0	12	5.3
		Good	7	26.9	32	23.7	16	23.9	55	24.1
		Very Good	13	50	55	40.7	28	41.8	96	42.1
		Excellent	2	7.7	38	28.1	16	23.9	56	24.6
Q48	The overall quality of care from your home care providers is/was:	Far below what I expected	2	7.7	3	2.3	2	3.1	7	3.2
		Somewhat below what I expected	1	3.8	2	1.6	4	6.2	7	3.2
		About what I expected	13	50	55	43.0	28	43.1	96	43.8
		Somewhat better than I expected	6	23.1	34	26.6	18	27.7	58	26.5
		Far better than I expected	4	15.4	34	26.6	13	20.0	51	23.3

Table 32. Caregiver Survey response distribution for each item, by mode

Item	Abridged Question Text	Response Option	Mode of Completion							
			Online		Telephone		Paper		Total	
			n	%	n	%	n	%	n	%
Caregiver Supports...										
Q06	How well prepared did you feel for your caregiving role?	Not at all	5	17.2	6	24.0	7	11.7	18	15.8
		Somewhat	10	34.5	3	12.0	23	38.3	36	31.6
		Mostly	10	34.5	4	16.0	16	26.7	30	26.3
		Fully	4	13.8	12	48.0	14	23.3	30	26.3
Q07	Do you feel well supported by home care providers as a caregiver?	Not at all	4	13.8	1	4.2	3	4.9	8	7.0
		Somewhat	11	37.9	6	25.0	18	29.5	35	30.7
		Mostly	8	27.6	6	25.0	28	45.9	42	36.8
		Fully	6	20.7	11	45.8	12	19.7	29	25.4
Q08	If you needed support, did a home care provider connect you to other services?	Yes, I was connected to enough of the right services	7	26.9	4	16.0	20	40.8	31	31.0
		Yes, I was connected, but they were not the right ones	2	7.7	1	4.0	0	0	3	3.0
		Yes, I was connected to the right ones, but I needed more services	5	19.2	3	12.0	1	2.0	9	9.0
		Yes, I was connected, but I declined.	2	7.7	1	4.0	3	6.1	6	6.0
		No, I was not connected to other services	5	19.2	4	16.0	8	16.3	17	17.0
		Not applicable / I did not need further support	5	19.2	12	48.0	17	34.7	34	34.0
Accessing Home Care...										
Q09	Were you involved in planning [client]'s home care as much as you wanted to be?	Not at all	2	6.9	2	8.7	5	8.5	9	8.1
		Somewhat	5	17.2	4	17.4	9	15.3	18	16.2
		Mostly	7	24.1	3	13.0	19	32.2	29	26.1
		Fully	15	51.7	13	56.5	26	44.1	54	48.6
		I did not want to be involved.	0	0	1	4.3	0	0	1	0.9
Q10	Do you understand what home care services [client] should receive?	Not at all	1	3.4	2	8.0	2	3.3	5	4.4
		Somewhat	8	27.6	1	4.0	12	20.0	21	18.4
		Mostly	10	34.5	5	20.0	26	43.3	41	36.0
		Fully	10	34.5	17	68.0	20	33.3	47	41.2
Q11	How often are home care visits arranged at a time that works for you?	Never	1	3.4	2	9.1	4	6.8	7	6.4
		Sometimes	6	20.7	2	9.1	6	10.2	14	12.7
		Usually	14	48.3	5	22.7	31	52.5	50	45.5
		Always	8	27.6	13	59.1	18	30.5	39	35.5
Q12	Are you able to make changes to [client]'s home care services if needed?	Never	1	3.4	0	0	5	8.3	6	5.3
		Sometimes	11	37.9	2	8.0	8	13.3	21	18.4
		Usually	7	24.1	3	12.0	24	40.0	34	29.8
		Always	5	17.2	14	56.0	10	16.7	29	25.4
		Not applicable / [client]'s needs have not changed	5	17.2	6	24.0	13	21.7	24	21.1

Q13	How often do changes in appointments/service times negatively affect you?	Never	7	24.1	8	32.0	18	31.0	33	29.5
		Sometimes	12	41.4	10	40.0	29	50.0	51	45.5
		Usually	3	10.3	1	4.0	4	6.9	8	7.1
		Always	2	6.9	0	0	3	5.2	5	4.5
		Not applicable / There have not been any changes in the timing of appointments	5	17.2	6	24.0	4	6.9	15	13.4
Q14	Do you have all the equipment and supplies you need for [client]?	Yes, we have all the equipment and supplies needed	19	65.5	22	88.0	45	77.6	86	76.8
		We are missing important equipment and supplies, and I do not know how to obtain them	1	3.4	1	4.0	0	0	2	1.8
		We are missing important equipment and supplies because we cannot afford them	1	3.4	1	4.0	2	3.4	4	3.6
		We are missing important equipment and supplies for other reasons	3	10.3	0	0	0	0	3	2.7
		Not applicable / We do not need any equipment or supplies	5	17.2	1	4.0	11	19.0	17	15.2
Q15	What additional help is needed?	Personal support	13	46.4	10	40.0	19	32.8	42	37.8
		Nursing	9	32.1	6	24.0	14	24.1	29	26.1
		Physiotherapy	11	39.3	7	28.0	17	29.3	35	31.5
		Other special therapies	8	28.6	4	16.0	3	5.2	15	13.5
		Social visits and recreational activities	13	46.4	3	12.0	17	29.3	33	29.7
		Housekeeping, shopping, cooking	11	39.3	5	20.0	17	29.3	33	29.7
		Transportation	13	46.4	4	16.0	22	37.9	39	35.1
		Other supports	4	14.3	4	16.0	3	5.2	11	9.9
		N/A no additional help needed	6	21.4	9	36.0	13	22.4	28	25.2
Q16	What services have you or your family paid for?	Equipment	17	58.6	15	60.0	20	33.3	52	45.6
		Home modification	14	48.3	10	40.0	14	23.3	38	33.3
		Personal support	8	27.6	4	16.0	5	8.3	17	14.9
		Respite services	5	17.2	2	8.0	8	13.3	15	13.2
		Nursing	6	20.7	6	24.0	4	6.7	16	14.0
		Physiotherapy	2	6.9	2	8.0	8	13.3	12	10.5
		Other special therapies	0	0	0	0	1	1.7	1	0.9
		Transportation	14	48.3	11	44.0	21	35.0	46	40.4
		Housework and laundry	13	44.8	7	28.0	20	33.3	40	35.1
		Cannot afford to pay	3	10.3	0	0	3	5.0	6	5.3
		Other supports	3	10.3	4	16.0	3	5.0	10	8.8
		N/A did not have OOP expenses	4	13.8	8	32.0	16	26.7	28	24.6
Q17	Do you have enough money to pay for everything needed to support [client]'s?	Never	2	7.4	0	0	3	5.1	5	4.6
		Sometimes	2	7.4	5	21.7	11	18.6	18	16.5
		Usually	8	29.6	2	8.7	15	25.4	25	22.9
		Always	10	37.0	12	52.2	17	28.8	39	35.8
		Not applicable / I do not have to pay for anything to support their care	5	18.5	4	17.4	13	22.0	22	20.2

Responding to Your Needs...										
Q18	What help do you need to support yourself?	Personal support	0	0	0	0	0	0	0	0
		Nursing	0	0	0	0	0	0	0	0
		Special therapies	3	10.7	2	8.0	2	3.5	7	6.4
		Housekeeping, shopping, cooking	2	7.1	0	0	1	1.8	3	2.7
		Transportation	2	7.1	0	0	1	1.8	3	2.7
		Instrumental support	2	7.1	2	8.0	12	21.1	16	14.5
		Respite	3	10.7	1	4.0	4	7.0	8	7.3
		Social visits and recreational activities	6	21.4	2	8.0	3	5.3	11	10.0
		Peer support	4	14.3	2	8.0	4	7.0	10	9.1
		Emotional support	1	3.6	2	8.0	1	1.8	4	3.6
		Informational support	3	10.7	0	0	4	7.0	7	6.4
		Training	13	46.4	2	8.0	8	14.0	23	20.9
		Financial support	14	50.0	3	12.0	5	8.8	22	20.0
		Other supports	5	17.9	2	8.0	2	3.5	9	8.2
		N/A do not need any additional help	11	39.3	18	72.0	36	63.2	65	59.1
Communication...										
Q19	Is there someone who is reliable in responding to any questions or issues?	Never	1	3.6	1	4.0	1	1.8	3	2.8
		Sometimes	5	17.9	4	16.0	7	12.7	16	14.8
		Usually	8	28.6	4	16.0	19	34.5	31	28.7
		Always	9	32.1	12	48.0	20	36.4	41	38.0
		Not applicable / I have not had any questions	5	17.9	4	16.0	8	14.5	17	15.7
Q20	Do home care providers explain things in a way that is easy to understand?	Never	1	3.6	1	4.0	0	0	2	1.8
		Sometimes	3	10.7	1	4.0	7	12.1	11	9.9
		Usually	13	46.4	5	20.0	30	51.7	48	43.2
		Always	8	28.6	15	60.0	17	29.3	40	36.0
		Not applicable / I have not communicated with providers	3	10.7	3	12.0	4	6.9	10	9.0
Q21	If you were not able to understand, for what reason?	Language barrier	3	11.1	4	16.0	8	14.3	15	13.9
		Use of jargon	2	7.4	0	0	4	7.1	6	5.6
		Spoke too fast	3	11.1	0	0	1	1.8	4	3.7
		Not listening	2	7.4	1	4.0	3	5.4	6	5.6
		Other reasons	4	14.8	2	8.0	2	3.6	8	7.4
		N/A no difficulty	17	63.0	19	76.0	40	71.4	76	70.4
Q22	How often do you feel that the home care providers listen carefully to you?	Never	2	7.1	0	0	1	1.7	3	2.7
		Sometimes	4	14.3	3	12.0	8	13.6	15	13.4
		Usually	9	32.1	5	20.0	26	44.1	40	35.7
		Always	11	39.3	15	60.0	20	33.9	46	41.1
		Not applicable / I did not speak with providers	2	7.1	2	8.0	4	6.8	8	7.1

Q23	Do you observe a lack of communication between different home care providers?	Never	15	53.6	17	68.0	40	70.2	72	65.5
		Sometimes	7	25.0	7	28.0	14	24.6	28	25.5
		Usually	4	14.3	0	0	1	1.8	5	4.5
		Always	2	7.1	1	4.0	2	3.5	5	4.5
Q24	Do you understand the next steps in [client]'s home care?	Never	3	10.7	0	0	0	0	3	2.7
		Sometimes	5	17.9	1	4.0	7	11.9	13	11.6
		Usually	7	25.0	3	12.0	21	35.6	31	27.7
		Always	7	25.0	14	56.0	10	16.9	31	27.7
		Not applicable / I have not discussed [client]'s home care	6	21.4	7	28.0	21	35.6	34	30.4
Home Care Providers...										
Q25	Generally, home care providers...	are punctual	21	72.4	24	96.0	47	78.3	92	80.7
		are courteous and respectful	26	89.7	25	100	55	91.7	106	93.0
		keep us informed	17	58.6	22	88.0	41	68.3	80	70.2
		are efficient in the use of alloted time	16	55.2	24	96.0	49	81.7	89	78.1
		have the necessary skills	18	62.1	24	96.0	46	76.7	88	77.2
		are emotionally supportive	14	48.3	22	88.0	37	61.7	73	64.0
		pay attention to detail	14	48.3	23	92.0	33	55.0	70	61.4
		communicate clearly	16	55.2	24	96.0	41	68.3	81	71.1
		are friendly	23	79.3	24	96.0	54	90.0	101	88.6
		are safety oriented	18	62.1	24	96.0	40	66.7	82	71.9
		are responsive to needs	17	58.6	24	96.0	46	76.7	87	76.3
		are reliable	15	51.7	24	96.0	44	73.3	83	72.8
Q26	Do you believe [client] was harmed because of an error, mistake or omission?	No	21	80.8	22	88	56	96.6	99	90.8
		Yes, and there was a good follow-up to address the problem	3	11.5	2	8	2	3.4	7	6.4
		Yes, but there was not a good enough follow-up to address the problem	2	7.7	1	4	0	0	3	2.8
Q27	What is your experience with the complaint process?	I do not know how to make a complaint	1	3.8	0	0	1	1.8	2	1.9
		I know how, but it is difficult to make a complaint	1	3.8	1	4.0	2	3.6	4	3.7
		I made a complaint, but not enough was done to address my complaint	7	26.9	2	8.0	3	5.4	12	11.2
		I made a complaint and it was resolved to my satisfaction	2	7.7	9	36.0	10	17.9	21	19.6
		Not applicable / I have not needed to complain	15	57.7	13	52.0	40	71.4	68	63.6
After a Hospital Stay...										
Q28$_{Sc}$	Was [client] hospitalized before the start of their home care or <6mth ago?	Yes	9	31.0	19	76.0	15	24.6	43	37.4
		No	20	69.0	6	24.0	46	75.4	72	62.6
Q28	How well prepared did you feel for your caregiving role?	Not at all	1	11.1	4	21.1	2	13.3	7	16.3
		Somewhat	5	55.6	4	21.1	4	26.7	13	30.2
		Mostly	2	22.2	1	5.3	6	40.0	9	20.9
		Fully	1	11.1	10	52.6	3	20.0	14	32.6

Q29	Did you know whom to contact if you had a question about [client]'s condition or treatment?	Yes	5	71.4	16	84.2	12	85.7	33	82.5
		No	2	28.6	3	15.8	2	14.3	7	17.5
Q30	Did [client]'s home care start when you needed it?	Yes	7	77.8	16	84.2	12	92.3	35	85.4
		No	2	22.2	3	15.8	1	7.7	6	14.6
Q31	Did the home care providers seem well informed and up-to-date?	Not at all	1	14.3	4	21.1	1	7.7	6	15.4
		Somewhat	3	42.9	1	5.3	2	15.4	6	15.4
		Mostly	2	28.6	1	5.3	6	46.2	9	23.1
		Fully	1	14.3	13	68.4	4	30.8	18	46.2
After Home Care Ended...										
Q32$_{\text{Sc}}$	Have [client]'s Home and Community Care services ended?	Yes	4	13.8	3	12.0	12	19.7	19	16.5
		No	25	86.2	22	88.0	49	80.3	96	83.5
Q32	If you needed further support, did a home care provider connect you?	I did not need further support.	4	100	0	0	6	66.7	10	62.5
		Yes, I was connected to enough of the right community services	0	0	2	66.7	3	33.3	5	31.3
		Yes, I was connected, but I declined	0	0	1	33.3	0	0	1	6.3
Q33	How prepared did you feel for [client]'s home care services to end?	Not at all	0	0	0	0	0	0	0	0
		Somewhat	0	0	1	33.3	2	20.0	3	20.0
		Mostly	0	0	0	0	4	40.0	4	26.7
		Fully	2	100	2	66.7	4	40.0	8	53.3
Q34	Do you know whom to contact if [client] needs home care again?	Yes	1	100	2	66.7	11	91.7	14	87.5
		No	0	0	1	33.3	1	8.3	2	12.5
Overall...										
Q35	Overall, I am satisfied with...	the supports available to me as a caregiver	9	32.1	22	88.0	32	55.2	63	56.8
		the type of care that client was eligible for	15	53.6	22	88.0	47	81.0	84	75.7
		the amount of care that client was receiving	11	39.3	20	80.0	36	62.1	67	60.4
		the way care was provided by home care providers	17	60.7	24	96.0	39	67.2	80	72.1
Q36	How helpful are [client]'s home care services in allowing them to stay home?	Not at all	3	11.1	0	0	0	0	3	2.8
		Somewhat	3	11.1	1	4.2	8	13.8	12	11.0
		Mostly	10	37.0	2	8.3	18	31.0	30	27.5
		Totally	7	25.9	17	70.8	23	39.7	47	43.1
		Not applicable / The reason for [client]'s home care was unrelated to staying at home	4	14.8	4	16.7	9	15.5	17	15.6

Note: For items 25 and 36, if someone did not select any of the response options but did respond to the subsequent question, they were included in the denominator. Individuals who did not respond to items 25/26 and 36/37 were excluded from the respective denominators.

Table 33. Client Survey response distribution for each item, by survey language

Item	Abridged Question Text	Response Option	Language of Completion					
			English		French		Overall	
			n	%	n	%	n	%
Planning Your Home Care...								
Q01	Did someone tell you what care and services you would get?	Yes	170	88.5	29	100	199	90.0
		No	22	11.5	0	0	22	10.0
Q02	Were you asked in which language you would like to receive your services?	Yes	104	60.5	17	68	121	61.4
		No	68	39.5	8	32	76	38.6
Q03	Were you involved in planning your home care as much as you wanted to be?	Not at all	28	14.8	2	7.7	30	14.0
		Somewhat	43	22.8	7	26.9	50	23.3
		Mostly	33	17.5	7	26.9	40	18.6
		Fully	74	39.2	10	38.5	84	39.1
		I did not want to be involved.	11	5.8	0	0	11	5.1
Q04	Did your home care providers include your family/caregiver in planning?	Not at all	38	19.2	7	26.9	45	20.1
		Somewhat	30	15.2	3	11.5	33	14.7
		Mostly	28	14.1	6	23.1	34	15.2
		Fully	81	40.9	7	26.9	88	39.3
		I do not have family or caregivers.	15	7.6	1	3.8	16	7.1
		I did not want my family/caregiver to be included	6	3.0	2	7.7	8	3.6
Q05	Were your values, identity(ies), language preferences, and culture considered?	Not at all	42	23.2	6	26.1	48	23.5
		Somewhat	24	13.3	1	4.3	25	12.3
		Mostly	39	21.5	8	34.8	47	23.0
		Fully	76	42.0	8	34.8	84	41.2
Q06	Did your home care start when you needed it?	Yes	187	92.6	25	86.2	212	91.8
		No	15	7.4	4	13.8	19	8.2
Accessing Home Care...								
Q07	Do you understand what home care services you should receive?	Not at all	9	4.4	2	6.5	11	4.7
		Somewhat	40	19.6	3	9.7	43	18.3
		Mostly	62	30.4	10	32.3	72	30.6
		Fully	93	45.6	16	51.6	109	46.4

Q08	Do you have all the equipment and supplies you need to continue to live at home?	Yes, I have all the equipment and supplies needed	151	74.4	27	87.1	178	76.1
		I am missing important equipment and supplies, and I do not know how to obtain them	1	0.5	1	3.2	2	0.9
		I am missing important equipment and supplies because I cannot afford them	14	6.9	2	6.5	16	6.8
		I am missing important equipment and supplies for other reasons	5	2.5	0	0	5	2.1
		Not applicable / I do not need any equipment or supplies	32	15.8	1	3.2	33	14.1
Q09	Are you receiving the right types of home care services for your needs?	Not at all	4	2.0	0	0	4	1.8
		Somewhat	25	12.8	6	19.4	31	13.7
		Mostly	67	34.2	9	29.0	76	33.5
		Fully	100	51.0	16	51.6	116	51.1
Q10	Do you receive enough hours of home care?	I need a lot more.	15	7.5	3	10.0	18	7.9
		I need a little more.	60	30.2	6	20.0	66	28.8
		I receive enough.	114	57.3	19	63.3	133	58.1
		I receive more than enough.	10	5.0	2	6.7	12	5.2
Q11	How often are home care visits arranged at a time that works for you?	Never	5	2.5	1	3.2	6	2.6
		Sometimes	19	9.6	5	16.1	24	10.5
		Usually	85	43.1	8	25.8	93	40.8
		Always	88	44.7	17	54.8	105	46.1
Q12	Are you able to make changes to your home care services if needed?	Never	14	7.2	3	10.7	17	7.7
		Sometimes	34	17.5	2	7.1	36	16.2
		Usually	49	25.3	7	25.0	56	25.2
		Always	48	24.7	8	28.6	56	25.2
		Not applicable / My needs have not changed	49	25.3	8	28.6	57	25.7
Q13	If you needed further support, did a home care provider connect you?	Yes, I was connected to enough of the right services	63	32.3	5	16.7	68	30.2
		Yes, I was connected, but they were not the right ones.	2	1.0	1	3.3	3	1.3
		Yes, I was connected to the right ones, but I needed more services	10	5.1	1	3.3	11	4.9
		Yes, I was connected, but I declined.	10	5.1	1	3.3	11	4.9
		No, I was not connected to other services	27	13.8	4	13.3	31	13.8
		Not applicable / I did not need further support	83	42.6	18	60.0	101	44.9
Q14	What additional help did you need?	Personal support	37	18.4	6	20.7	43	18.7
		Nursing	18	9.0	4	13.8	22	9.6
		Physiotherapy	42	20.9	2	6.9	44	19.1
		Other special therapies	14	7.0	0	0	14	6.1
		Social visits	30	14.9	5	17.2	35	15.2
		Transportation	33	16.4	5	17.2	38	16.5
		Housework and laundry	57	28.4	5	17.2	62	27.0
		Meal preparation	21	10.4	3	10.3	24	10.4
		Shopping	24	11.9	5	17.2	29	12.6
		Other supports	13	6.5	1	3.4	14	6.1
		N/A	85	42.3	20	69.0	105	45.7

Q15	What services have you or your family paid for?	Equipment	69	34.0	13	44.8	82	35.3
		Home modification	44	21.7	9	31.0	53	22.8
		Personal support	27	13.3	0	0	27	11.6
		Nursing	21	10.3	2	6.9	23	9.9
		Physiotherapy	18	8.9	5	17.2	23	9.9
		Other special therapies	7	3.4	1	3.4	8	3.4
		Transportation	66	32.5	15	51.7	81	34.9
		Housework and laundry	63	31.0	4	13.8	67	28.9
		Meal preparation	30	14.8	2	6.9	32	13.8
		Shopping	27	13.3	4	13.8	31	13.4
		Cannot afford to pay	5	2.5	1	3.4	6	2.6
		Other supports	16	7.9	0	0	16	6.9
		N/A did not have OOP expenses	71	35.0	4	13.8	75	32.3
Communication…								
Q16	How often do home care providers introduce themselves and explain their role?	Never	15	7.9	5	16.7	20	9.1
		Sometimes	39	20.6	7	23.3	46	21.0
		Usually	40	21.2	9	30.0	49	22.4
		Always	95	50.3	9	30.0	104	47.5
Q17	Do you feel that your home care providers listen carefully to you?	Never	4	2.0	0	0	4	1.7
		Sometimes	28	13.8	2	6.7	30	12.9
		Usually	59	29.1	7	23.3	66	28.3
		Always	106	52.2	19	63.3	125	53.6
		Not applicable / I did not speak with providers	6	3.0	2	6.7	8	3.4
Q18	How often can you communicate with your providers in your preferred language?	Never	14	6.9	4	13.8	18	7.8
		Sometimes	12	5.9	6	20.7	18	7.8
		Usually	31	15.3	4	13.8	35	15.1
		Always	146	71.9	15	51.7	161	69.4
Q19	Do home care providers explain things in a way that is easy to understand?	Never	8	4.0	1	4.0	9	4.0
		Sometimes	21	10.6	2	8.0	23	10.3
		Usually	53	26.6	10	40.0	63	28.1
		Always	117	58.8	12	48.0	129	57.6
Q20	If you were not able to understand, for what reason?	Language barrier	35	17.8	9	32.1	44	19.6
		Use of jardon	15	7.6	1	3.6	16	7.1
		Spoke too fast	18	9.1	6	21.4	24	10.7
		Not listening	10	5.1	1	3.6	11	4.9
		Other reasons	21	10.7	2	7.1	23	10.2
		N/A no difficulty	127	64.5	13	46.4	140	62.2

Q21	Is there someone who is reliable in responding to any questions or issues?	Never	7	3.5	0	0	7	3.0
		Sometimes	18	8.9	1	3.4	19	8.2
		Usually	42	20.8	11	37.9	53	22.9
		Always	85	42.1	15	51.7	100	43.3
		Not applicable / I have not had any questions	50	24.8	2	6.9	52	22.5
Q22	Do you experience a lack of communication between your different providers?	Never	125	64.1	19	67.9	144	64.6
		Sometimes	49	25.1	4	14.3	53	23.8
		Usually	8	4.1	2	7.1	10	4.5
		Always	13	6.7	3	10.7	16	7.2
Q23	Do you have problems because there are different people providing care?	Never	60	29.6	13	44.8	73	31.5
		Sometimes	46	22.7	4	13.8	50	21.6
		Usually	9	4.4	1	3.4	10	4.3
		Always	17	8.4	0	0	17	7.3
		Not applicable / I only have one provider coming to my home	71	35.0	11	37.9	82	35.3
Q24	How often do your providers notify you of a change in service/service time?	Never	12	5.9	3	10.0	15	6.4
		Sometimes	43	21.1	3	10.0	46	19.7
		Usually	54	26.5	8	26.7	62	26.5
		Always	69	33.8	16	53.3	85	36.3
		Not applicable / I have not had any changes in the timing of appointments	26	12.7	0	0	26	11.1
Q25	How often do you understand the next steps in your home care?	Never	19	10.6	3	10.7	22	10.6
		Sometimes	34	19.0	1	3.6	35	16.9
		Usually	51	28.5	7	25.0	58	28.0
		Always	75	41.9	17	60.7	92	44.4
Home Care Providers...								
Q26	How often do your home care providers arrive when they are scheduled to?	Never	3	1.5	1	3.4	4	1.8
		Sometimes	11	5.5	2	6.9	13	5.7
		Usually	87	43.7	9	31.0	96	42.1
		Always	98	49.2	17	58.6	115	50.4
Q27	How often do changes in appointments/service times negatively affect your care?	Never	85	41.9	10	35.7	95	41.1
		Sometimes	69	34.0	7	25.0	76	32.9
		Usually	7	3.4	5	17.9	12	5.2
		Always	12	5.9	1	3.6	13	5.6
		Not applicable / I have not had any changes in the timing of appointments	30	14.8	5	17.9	35	15.2
Q28	Do your home care providers stay long enough to provide the care you need?	Never	5	2.5	0	0	5	2.2
		Sometimes	21	10.7	1	3.4	22	9.7
		Usually	49	24.9	8	27.6	57	25.2
		Always	122	61.9	20	69.0	142	62.8

Q29	Do your home care providers help you with the things you need?	Never	6	3.1	1	3.7	7	3.2
		Sometimes	18	9.3	1	3.7	19	8.6
		Usually	60	31.1	11	40.7	71	32.3
		Always	109	56.5	14	51.9	123	55.9
Q30	Do your home care providers treat you with courtesy and respect?	Never	2	1.0	0	0	2	0.9
		Sometimes	11	5.4	1	3.4	12	5.2
		Usually	25	12.4	3	10.3	28	12.1
		Always	164	81.2	25	86.2	189	81.8
Q31	Do your home care providers have the necessary skills?	Never	3	1.5	0	0	3	1.3
		Sometimes	15	7.6	1	3.7	16	7.1
		Usually	53	26.9	7	25.9	60	26.8
		Always	126	64.0	19	70.4	145	64.7
Q32	Do you feel safe receiving home care from your home care providers?	Never	2	1.0	0	0	2	0.9
		Sometimes	6	3.0	0	0	6	2.6
		Usually	34	16.8	5	17.2	39	16.9
		Always	160	79.2	24	82.8	184	79.7
Q33	Do you believe you were harmed because of an error, mistake, or omission?	No	185	92.5	28	96.6	213	93.0
		Yes, and there was a good follow-up to address the problem	8	4.0	0	0	8	3.5
		Yes, but there was not a good enough follow-up to address the problem	7	3.5	1	3.4	8	3.5
Q34	What is your experience with the complaint process?	I do not know how to make a complaint	9	4.6	2	6.9	11	4.9
		I know how, but I do not feel comfortable making a complaint	9	4.6	0	0	9	4.0
		I made a complaint, but not enough was done to address my complaint	23	11.8	0	0	23	10.3
		I made a complaint and it was resolved to my satisfaction	27	13.8	2	6.9	29	12.9
		Not applicable / I have not needed to complain	127	65.1	25	86.2	152	67.9
Q35	Has a home care provider ever shared information that you did not consent to?	Yes	3	1.7	1	3.6	4	2.0
		No	170	98.3	27	96.4	197	98.0
After Your Hospital Stay…								
Q36$_{Sc}$	Were you hospitalized before the start of your home care services, or <6mth ago?	Yes	72	34.6	10	32.3	82	34.3
		No	136	65.4	21	67.7	157	65.7
Q36	The hospital took my preferences and those of my family into account.	Strongly disagree	4	6.1	0	0	4	5.4
		Disagree	4	6.1	2	25.0	6	8.1
		Agree	34	51.5	2	25.0	36	48.6
		Strongly Agree	24	36.4	4	50.0	28	37.8
Q37	I had a good understanding of the things I was responsible for.	Strongly disagree	6	9.1	0	0	6	7.9
		Disagree	7	10.6	0	0	7	9.2
		Agree	37	56.1	4	40.0	41	53.9
		Strongly Agree	16	24.2	6	60.0	22	28.9

Q38	I clearly understood the purpose of taking each of my medications.	Strongly disagree	5	7.7	0	0	5	6.8
		Disagree	3	4.6	0	0	3	4.1
		Agree	31	47.7	4	44.4	35	47.3
		Strongly Agree	26	40.0	5	55.6	31	41.9
Q39	Did you know whom to contact if you had a question?	Yes	52	76.5	8	80.0	60	76.9
		No	16	23.5	2	20.0	18	23.1
Q40	Did your home care providers seem well-informed and up-to-date?	Not at all	9	14.8	2	22.2	11	15.7
		Somewhat	10	16.4	1	11.1	11	15.7
		Mostly	13	21.3	4	44.4	17	24.3
		Fully	29	47.5	2	22.2	31	44.3
Q41	Were you told different things by hospital staff and your home care providers?	Never	46	74.2	8	88.9	54	76.1
		Sometimes	12	19.4	0	0	12	16.9
		Usually	1	1.6	1	11.1	2	2.8
		Always	3	4.8	0	0	3	4.2
Q42	Were your care needs met after you were discharged from the hospital?	Not at all	7	10.1	0	0	7	9.1
		Somewhat	8	11.6	2	25.0	10	13.0
		Mostly	15	21.7	1	12.5	16	20.8
		Fully	39	56.5	5	62.5	44	57.1
After Your Home Care Ended...								
Q43$_{Sc}$	Have your Home and Community Care services ended?	Yes	32	15.4	5	16.1	37	15.5
		No	176	84.6	26	83.9	202	84.5
Q43	If you needed further support, did a home care provider connect you?	I did not need further support.	20	66.7	3	60.0	23	65.7
		Yes, I was connected to enough of the right community services	5	16.7	1	20.0	6	17.1
		Yes, I was connected, but they were not the right ones	0	0	0	0	0	0
		Yes, I was connected to the right ones, but I needed more services	2	6.7	0	0	2	5.7
		Yes, I was connected, but I declined.	1	3.3	0	0	1	2.9
		No, I was not connected to other community services	2	6.7	1	20.0	3	8.6
Q44	How prepared did you feel for your home care services to end?	Not at all	6	19.4	1	33.3	7	20.6
		Somewhat	3	9.7	0	0	3	8.8
		Mostly	4	12.9	0	0	4	11.8
		Fully	18	58.1	2	66.7	20	58.8
Q45	Do you know whom to contact if you need home care again?	Yes	24	75.0	5	100	29	78.4
		No	8	25.0	0	0	8	21.6
Overall...								
Q46	How helpful are/were your services in allowing you to stay at home?	Not helpful	3	1.5	1	4.0	4	1.8
		Somewhat helpful	30	15.2	5	20.0	35	15.7
		Very helpful	136	68.7	18	72.0	154	69.1
		Not applicable	29	14.6	1	4.0	30	13.5

Q47	Overall, how would you rate Home and Community Care services?	Poor	7	3.5	2	6.9	9	3.9
		Fair	10	5.0	2	6.9	12	5.3
		Good	46	23.1	9	31.0	55	24.1
		Very Good	87	43.7	9	31.0	96	42.1
		Excellent	49	24.6	7	24.1	56	24.6
Q48	The overall quality of care from your home care providers is/was:	Far below what I expected	7	3.7	0	0	7	3.2
		Somewhat below what I expected	7	3.7	0	0	7	3.2
		About what I expected	79	41.4	17	60.7	96	43.8
		Somewhat better than I expected	55	28.8	3	10.7	58	26.5
		Far better than I expected	43	22.5	8	28.6	51	23.3

APPENDIX E – DESCRIPTIONS OF THEMES AND SAMPLE QUOTES

Table 34. Subthemes of Emerging Categories

Overall		
Overall	Overall quality of care (good and bad), including descriptions of care providers, general experience of care.	“All in all, the experience was good, [REDACTED] well taken care of. Every caregiver was well trained, if no sure would ask for help.” [Caregiver]
Helped stay home	Some respondents indicated that home care services helped the client stay at home.	“He developed a close relationship with these caregivers and appreciated their help. As our father lived alone, having home care made it possible for him to stay living independently at home. We would also go to his house to see/help him. Knowing a home care person was visiting him gave us courage.” [Caregiver]
Accessing Care		
Sufficiency and appropriateness	Respondents spoke to not always receiving enough hours of care or the right types of care for their needs.	“I appreciate the help and effort of the home care providers, but there is rarely enough time for all my needs.” [Client] “Your intro letter defines a caregiver who provides housework, wound care, in addition to other things. We have asked for housecare and they have replied that this is not part of there services. They do not provided assistance in changing colostomy and urostomy bags, which does fall under "Wound Care" I believe.” [Client]
Costs	Some respondents described having to pay for additional home care services out of pocket because the needed care was not covered.	“High needs occupational therapy for wheelchairs used to be an in home service. Now I must travel an hour and pay for staff time to access those services in a hospital due to cutbacks.” [Client]
Waits	Wait times for home care assessnebrs or services were identified, as were wait times for long-term care.	“It took some time to get an initial assessment completed. Time from doctor's appointment to first visit from PT would have been quicker.” [Client] “Trying to get my mom into a long term care facility of our choosing (waitlists too long!). I tried to a few years ago but apparently you had to wait until the LHIN found the client to be in greater need. As my mom has Alzheimer Dementia, the isolation and lack of activities, social contact has had a negative affect on the quality of her life (my opinion).” [Caregiver]
Communication and Information		
Communication, general	Some respondents spoke about general communication related to their home care.	“Communication is very good. People are friendly and professional.” [Client]
Communication, providers	Communication between different providers was identified as a challenge for many respondents, but others indicated that it was working well.	“[REDACTED] does not communicate well with their staff. They send in replacements but do not tell them about important meds or patches that are needed. They have a hard time getting weekend staff.” [Caregiver] “The fact that I have the same PSW's (2) and the same (2) nurses works very well. Everyone is on the same page.” [Client]
Communication, provider-client	Communication between providers and clients/ caregivers was often described as a challenge but there	“It is hard to get answers from the agencies that provide her with personal care giver. Many people involved, everyone "passes the puck."” [Caregiver]

	were also descriptions of excellent communication.	“The caregivers had my phone number and would call to update me on several occasions. I felt as though I was part of a team. We were all working to make my dad's life more manageable as his mobility decreased and his memory changes started to occur.” [Caregiver]
Communications, language	In some cases, a language barrier was identified as the reason for the difficulty in communication.	“I have had homecare since about [REDACTED]. I have three regular paws [sic]. However the fill ins never call the night before they just show up ring the buzzer and yell open door, they do not identify themselves and often have a language barrier. The fill ins also refuse to read the homecare book also check off things they have not done or refuse to do when asked.” [Client]
Responsiveness of Care		
Responsiveness of care	It is important for clients to receive the right care as their needs changed; some respondents felt this was more the case than others.	“I am a large lady and I think more than 2 showers a week is called for especially in the summer. I have a problem with my bladder and would be mortified if someone could smell urine on me.” [Client] “Dad and I like it when caregivers ask if there is anything else they can do for us at end of visit.” [Caregiver]
Transitions		
Consistency	Consistency and reliability in providers. Having the same, or the same few, providers coming into the home was important for many clients and caregviers in particular for clients with cognitive impairments.	“I find it difficult when the LHIN coordinators change. The one I had prev was good but little consistency in who you get it keeps changing & some are better than other.” [Client] “Every time they come in, it's a different person. For Alzheimer patient, this is very hard. Also, when they come, they do the bathing but they don't communicate with the patient at all. Also, there are last minute communication about canceling and then they're not replacing and she's losing the hours.” [Client] “In the beginning it was hard keeping track of so many different PSW's sent on different days. However, now it has been normalized to only 3.” [Caregiver]
Scheduling	Clients and caregivers appreciate when services are scheduled at convenient times. They also often described the importance of providing notice of any changes to services rather than making changes at the last minute.	“I find home care works best for me when we have a balance of when [REDACTED] needs care and when I am not able to be there. IF home care is scheduled properly (by consulting the [REDACTED]), it means I am able to have more eyes and support in the home throughout the day. Eg. [REDACTED] comes early to give pills/breakfast/shower etc, then I can come later and do another time of day/meal/care. Allows me to look after my own family and life a bit.” [Caregiver] “There is one paw [sic] who is supposed to come between [REDACTED]in the morning and often rearranges her schedule without telling us. She often comes later, around [REDACTED]. This causes a problem b/c we give my mom lunchtime pills. However, if the pew [sic] comes at [REDACTED] and we are not made aware of this, giving her lunch pills at [REDACTED] is dangerous.” [Client]
Care gaps	Some respondents experienced gaps where they received no care that they found challenging.	“Also in [REDACTED], he fell while doing his walking exercise, and because he was off for 3 weeks, it turned outhis service through CCAC was cancelled and had to be restarted, and they were going to put us with a different CCAC unit which meant new attendants etc and no guarantee of service. Had to fight like crazy to keep service we had!!!” [Caregiver] “The connection to the caregiver from the hospital was not great. I left with a piece of paper and not a good understanding of process. My husband should have stayed a couple of days in hospital but with no beds available,

		he came home. It was a stressful time for me, and I felt as though no one else thought this was a big deal, only me." [Caregiver]
Service Delivery		
Courtesy and respect	Respondents emphasized the home care services being provided by providers who were courteous, respectful and empathetic; some felt that this was not the case in their care.	"Remind PSWs to treat their clients as they would like homecare services to care for their family members." [Client] "I really like the homecare nurses. They always treat me with respect and understanding about my healthcare needs." [Client]
Staff competency	There was a mix of respondents feeling like their home care staff were well trained and very competent and those who felt staff training and competency was poor or inconsistent.	"All PSW should be trained on consistent services for their job and training program before they assigned their services in the field as some PSW are rushing and at the age of [REDACTED] Yrs it is hard." [Client] "I have multiple issues with [REDACTED] that have the contract to provide the services. I find them totally incompetent and disorganized." [Caregiver]
Stay long enough	Client and caregivers describe experiences of providers not staying as long as needed or as long as they are scheduled to.	"Perhaps if the PSW's had to stay for their full scheduled time, then perhaps they wouldn't be rushing you through." [Client] "PSWs are scheduled for an hour but actually stay for 15 minutes - the social interaction should be as important as the other support but that seems to be lacking in many of the workers." [Caregiver]
Complaints	Client and caregivers described their experiences with complaints, including the fear of losing services or other retaliation as a result.	"Remove the fear of losing service if you complain." [Client] "My caregiver is having hard times dealing with these agencies. There is no support. Coordinators are unprofessional. They simply do not care. Do not raise an issue as they tell you off. You escalate and nothing happens. More retaliation from these agencies." [Client]
Expectations met	Providers and home care services in general were described in some cases as going beyond expectations, in other cases expectations were not met.	"The nurse I get is super, she's more like a friend than someone coming into my home. She really goes the extra steps." [Client] "Our regular caregiver is so amazing I think she should teach a course in caregiver. Bathing." [Caregiver]
Oversight	Several clients and caregivers indicated that they felt that more oversight of home care providers was required.	"Allow the clients to rate individual PSW so that PSW knows that they are being watched for their performance. Coordination between service provider and on filed PSW should be managed by service provider." [Client] "All services must improve. More monitoring of visiting with PSWs. Awful services. [REDACTED] and [REDACTED] and [REDACTED] and all of them, simply awful. We need more people to understand the needs and cares seniors must receive." [Caregiver]
Involvement		
Involvement	Client involvement in planning care was identified as important.	"Religion needs to be brought up when planning the care. It plays a big factor and I'm no the only when that thinks so." [Client]
Preparedness to Care for Client		
Preparedness to care for client	Not observed in open text comments.	N/A

Support		
Support: caregivers and clients	Caregivers reported that the services received by clients, and the supports for caregviers, are not always enough and that they need more support to continue caring. They also report that the services provided do make a big difference.	“We are unable to afford a 24 hour person on a weekly or bi weekly basis and I have not had a vacation for at least seven years. My sisters are not equipped to come and stay over or unwilling to. The caregivers that I trust work during the day so I would have to train someone to care for her at night and this is something I have to consider as I am really feeling fatigued.Try to work and increase my income is impossible and I cannot work a day job in office that is flexible enough.” [Caregiver] “I am vear the top end of the age range provided in question 40. Nevertheless, I am able to provide the services for [REDACTED] as per Q4. In part, this is because I am reasonably fit. But to maintain this situation I invest a significant amount of time in activities that keep me mentally alert and physically functional. Without the home care services provided to [REDACTED] I could not do this. Indirectly, these are also services from which I benefit.”