

How Did We Do?

Your comments and feedback about the “**Reporting to Nova Scotians on Comparable Health and Health System Indicators**” report is valuable to us. Please complete this questionnaire and send it to:

PIRC Reports Feedback

Nova Scotia Department of Health
Performance Measurement & Health Informatics
1690 Hollis Street, 10th Floor, PO Box 488
Halifax, NS B3J 2R8
OR Fax: 424 0506 **OR** Email: moreyb@gov.ns.ca

Instructions

For each question, please put an **X** beside the most appropriate response. There are no right or wrong answers; we are only interested in your opinions. Individual responses will be kept confidential.

Overall Satisfaction with the Report

1. How did you find out about “Reporting to Nova Scotians on Comparable Health and Health System Indicators, 2002”

- News Media
- Government Alert
- Internet search
- Colleague / Peer
- Other, please specify _____

2. How did you obtain your copy of “Reporting to Nova Scotians on Comparable Health and Health System Indicators, 2002”

- It was mailed to me
- I obtained my copy from a colleague
- I accessed it through the Internet
- I ordered my own copy
- Other, please specify _____

3. To what extent have you read through the report?

- I have read through the entire report
- I have read certain chapters and browsed through the entire report
- I have browsed through the entire report
- I have only read the Executive Summary
- I have only read the Highlights Report
- I have only read the Technical Report
- I have not read any part of the report in any detail

4. How satisfied are you with the following aspects of the report?

- | | | | | |
|-----------------------------|---------------------------------|----------------------------|----------------------------|----------------------------|
| a. Clarity | <input type="radio"/> Excellent | <input type="radio"/> Good | <input type="radio"/> Fair | <input type="radio"/> Poor |
| b. Organization / Format | <input type="radio"/> Excellent | <input type="radio"/> Good | <input type="radio"/> Fair | <input type="radio"/> Poor |
| c. Use of Figures | <input type="radio"/> Excellent | <input type="radio"/> Good | <input type="radio"/> Fair | <input type="radio"/> Poor |
| d. Quality of Analysis | <input type="radio"/> Excellent | <input type="radio"/> Good | <input type="radio"/> Fair | <input type="radio"/> Poor |
| e. Level of Detail | <input type="radio"/> Excellent | <input type="radio"/> Good | <input type="radio"/> Fair | <input type="radio"/> Poor |
| f. Length of Report | <input type="radio"/> Excellent | <input type="radio"/> Good | <input type="radio"/> Fair | <input type="radio"/> Poor |

5. How satisfied are you with the following components of the report?

- | | | | | |
|-------------------------|---------------------------------|----------------------------|----------------------------|----------------------------|
| a. Executive Summary | <input type="radio"/> Excellent | <input type="radio"/> Good | <input type="radio"/> Fair | <input type="radio"/> Poor |
| b. Highlights Report | <input type="radio"/> Excellent | <input type="radio"/> Good | <input type="radio"/> Fair | <input type="radio"/> Poor |
| c. Technical Report | <input type="radio"/> Excellent | <input type="radio"/> Good | <input type="radio"/> Fair | <input type="radio"/> Poor |
| d. Web Site Access | <input type="radio"/> Excellent | <input type="radio"/> Good | <input type="radio"/> Fair | <input type="radio"/> Poor |

Usefulness of the Report

6. Please indicate how useful you found the following sections of the report.

- | | | | | |
|------------------------------|-----------------------------------|--------------------------------|----------------------------------|------------------------------------|
| Health Status | <input type="radio"/> Very Useful | <input type="radio"/> Somewhat | <input type="radio"/> Not useful | <input type="radio"/> Did not read |
| Health Outcomes | <input type="radio"/> Very Useful | <input type="radio"/> Somewhat | <input type="radio"/> Not useful | <input type="radio"/> Did not read |
| Quality of Service | <input type="radio"/> Very Useful | <input type="radio"/> Somewhat | <input type="radio"/> Not useful | <input type="radio"/> Did not read |
| Definitions of Indicators | <input type="radio"/> Very Useful | <input type="radio"/> Somewhat | <input type="radio"/> Not useful | <input type="radio"/> Did not read |
| Indicator Calculations | <input type="radio"/> Very Useful | <input type="radio"/> Somewhat | <input type="radio"/> Not useful | <input type="radio"/> Did not read |
| Community Resources | <input type="radio"/> Very Useful | <input type="radio"/> Somewhat | <input type="radio"/> Not useful | <input type="radio"/> Did not read |

Other Comments

7. How do you plan on using the information in this report?

8. What did you find most useful about this report?

9. What did you find least useful about this report?

10. Is there anything you would like to see included in future reports?

11. How could we improve this report for future releases?

12. Have you read other provinces reports? If so, how did we compare?

Reader Information

13. Where do you live?

- | | |
|--|--|
| <input type="checkbox"/> Nova Scotia | <input type="checkbox"/> Newfoundland |
| <input type="checkbox"/> Prince Edward Island | <input type="checkbox"/> New Brunswick |
| <input type="checkbox"/> Quebec | <input type="checkbox"/> Ontario |
| <input type="checkbox"/> Manitoba | <input type="checkbox"/> Saskatchewan |
| <input type="checkbox"/> Alberta | <input type="checkbox"/> British Columbia |
| <input type="checkbox"/> Northwest Territories | <input type="checkbox"/> Yukon |
| <input type="checkbox"/> Nunavut | <input type="checkbox"/> Outside Canada (please specify) |

14. What is your main position or role?

- | | |
|---|--|
| <input type="checkbox"/> General Public | <input type="checkbox"/> Health Care Provider |
| <input type="checkbox"/> Health Services / Manager Administrator | <input type="checkbox"/> Policy / Planning / Decision Support Analyst |
| <input type="checkbox"/> Board Member | <input type="checkbox"/> Educator |
| <input type="checkbox"/> Elected Official | <input type="checkbox"/> Researcher |
| <input type="checkbox"/> Government employee | <input type="checkbox"/> Policy Maker |
| <input type="checkbox"/> Student | <input type="checkbox"/> Other (specify) |

Thank you for completing and returning this questionnaire