



Primary Care Patient Experience Survey

The Primary Care Patient Experience survey was developed with input from patients, specifically for Alberta’s primary care providers and their teams.



Providers receive feedback that is:

- **Standardized:** Compare your results with peers.
- **Actionable:** Identify quality improvement opportunities, including Alberta Health’s updated patient experience indicator (Schedule B) for PCNs.
- **Credible:** Trust a survey that has been rigorously tested by patients and clinics and based in evidence.

THE SURVEY PROCESS

Contact the HQCA: Let us know that you’re interested. Select your optional modules.	Send a message to patients to alert them of an email survey from HQCA. Allow 7-10 days for patients to opt out.	Provide patient email addresses to the HQCA.	The HQCA will send the survey to patients (open for three weeks).	Get your personalized and confidential report two weeks after the survey closes.	Review your results and work on a quality improvement project as a team.

WHY PARTICIPATE?

“The HQCA’s Patient Experience Survey is a valid, evidence-based, and patient-informed measurement tool. The implementation of HQCA’s survey in primary care will benefit not only quality improvement activities but also will also allow care providers to be able to respond to what matters most to patients.”

Dr. Maria J. Santana, a health services researcher, Associate Professor in the departments of Pediatrics and Community Health Sciences at the Cumming School of Medicine, University of Calgary



QUESTIONS THAT MATTER TO YOUR PATIENTS

With approximately 25 questions, this survey covers a range of topics that matter to your patients:



Access	<p>In the last 6 months...</p> <ul style="list-style-type: none"> • How many times did you visit this care provider to get care for yourself? • Did you contact this care provider's office to get an appointment for an illness, injury, or condition that needed care right away? <ul style="list-style-type: none"> • How often did you get an appointment as soon as you needed? • Did you make any appointments for a check-up or routine care with this care provider? <ul style="list-style-type: none"> • How often did you get an appointment as soon as you needed? • Where did you go when this care provider was unavailable? 			
Communication	<p>In the last 6 months, how would you rate...</p> <ul style="list-style-type: none"> • The amount of time that your care provider gave you? • The way your care provider listened to you? • The way your care provider explained things in a way you could understand? • The way your care provider involved you in decisions about your care? • Your care provider's knowledge of your medical history? • The way this care provider showed respect for what you had to say? 			
Overall care rating	<ul style="list-style-type: none"> • Using any number from 0 to 10, where 0 is the worst care provider and 10 is the best care provider, what number would you use to rate this care provider? 			
Healthcare team	<p>In the last 6 months...</p> <ul style="list-style-type: none"> • How often did your health care team seem to effectively coordinate your care? • How often were clerks and receptionists at this provider's office as helpful as you thought they should be? • How often did clerks and receptionists at this provider's office treat you with courtesy and respect? • Did this care provider order a blood test, x-ray, or other test for you? <ul style="list-style-type: none"> • When this care provider ordered a blood test, x-ray, or other test for you, how often did someone from this care provider's office follow up to give you those results? • Did you take any prescription medicine? <ul style="list-style-type: none"> • How often did you and someone from this care provider's office talk about all the prescription medicines you were taking? • Overall, how would you rate the care you received from this clinic over the past 6 months? (Schedule B Patient Experience Measure) 			
Demographics	<ul style="list-style-type: none"> • Which of the following best describes how you have used the healthcare system in the last 6 months? • In general, how would you rate your overall health? • In general, how would you rate your overall mental or emotional health? • What is your age? • Which of the following best describes your gender identity? • Which of the following best describes your financial situation? 			
Optional modules	Treatment plans	Care priorities	EQ-5D-5L	Extended demographics