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Commonwealth Fund International Health Policy: 2003 Hospital Survey

J:\18xxx\182xx\18223 IHP Hospitals\Edit Master\J18223_QA Final Revised 041603.doc

Field Period: *Australia* – April 16, 2003 – May 14, 2003;
Canada – April 16, 2003 – May 14, 2003;
New Zealand – April 21, 2003 – May 16, 2003;
United Kingdom – April 17, 2003 – May 16, 2003;
United States – April 14, 2003 – May 16, 2003

QUESTIONNAIRE TOPICS:

Section 300: Preloaded Sample Variables
Section 400: Introduction and Screening
Section 500: Overview of Major Hospital Issues
Section 600: Medical Errors
Section 700: Quality of Care: Use of Technology and Quality Initiatives
Section 800: Workforce Shortages
Section 900: Selected Topical Issues
Section 1000: Factsuals – Background Information

Proprietary Questions Not To Be Released: None
Number of Response Equivalentents (REs): NA
Estimated Survey Duration: 20 minutes
Template: HI
TTT Code (Q23): 079914

[PROGRAMMER NOTE: PLEASE ENSURE THAT ALL MISSING DATA IS REPRESENTED IN SPSS DATA SET AS OUT OF RANGE NEGATIVE NUMBERS]

SECTION 300: PRELOAD SAMPLE VARIABLES**BASE: ALL RESPONDENTS****Q300** COUNTRY CODE (CC):

- 1 Australia
- 2 Canada
- 3 New Zealand
- 4 United Kingdom
- 5 United States

BASE: AUSTRALIA (Q300/1)**Q310** ID (PP_RECORD ID)**BASE: AUSTRALIA (Q300/1)****Q312** PRAC_SUBURB**BASE: AUSTRALIA (Q300/1)****Q314** PRAC-STATE (PRACTICE STATE)

- 1 ACT
- 2 NSW
- 3 NT
- 4 QLD
- 5 SA
- 6 TAS
- 7 VIC
- 8 WA

BASE: AUSTRALIA (Q300/1)**Q316** PRAC_POSTCODE**BASE: AUSTRALIA (Q300/1)****Q318** ACC_ER (ACCIDENT/EMERGENCY)

- 1 Yes
- 2 No

BASE: AUSTRALIA (Q300/3)**Q320** BED_SIZE (NUMBER OF BEDS)**BASE: AUSTRALIA (Q300/1)****Q322** PUB/PRIV(OWNERSHIP STATUS – PUBLIC VS. PRIVATE)

- 1 Public
- 2 Private

BASE: AUSTRALIA (Q300/1)**Q324** TEACH (TEACHING HOSPITAL)

- 1 Yes
- 2 No

BASE: AUSTRALIA (Q300/1)**Q326** METRO (AREA TYPE)

- 1 Yes
- 2 No

BASE: AUSTRALIA (Q300/1)

Q328 NAME (HOSPITAL NAME)

[TEXT]

BASE: CANADA (Q300/2)**Q330** ID (CHA RECORD ID)**BASE: CANADA (Q300/2)****Q332** FACID (FACILITY ID)**BASE: CANADA (Q300/3)****Q334** ACUTBEDS (NUMBER OF ACUTE BEDS)**BASE: CANADA (Q300/3)****Q336** PROV (PROVINCE/REGION)

- 01 AB
- 02 BC
- 03 MB
- 04 NB
- 05 NF
- 06 NS
- 07 ON
- 08 PE
- 09 QC
- 10 SK

BASE: CANADA (Q300/2)**Q338** POSTCODE (USE TO CREATE AREA TYPE – URBAN VERSUS RURAL)**BASE: CANADA (Q300/2)****Q344** AREA TYPE (URBAN VERSUS RURAL FROM POSTCODE)

- 1 URBAN
- 2 RURAL

BASE: CANADA (Q300/2)**Q340** TEACH (TEACHING)

- 3 YES
- 4 NO

BASE: CANADA (Q300/2)**Q342** OWNERSHIP (OWNERSHIP STATUS)

- 1 Lay
- 2 Municipal Government
- 3 Provincial Government
- 4 Regional Authority Board
- 5 Religious

BASE: NEW ZEALAND (Q300/3)

Q350 ID (RECORD ID)

BASE: NEW ZEALAND (Q300/3)

Q352 CITYTOWN

BASE: NEW ZEALAND (Q300/3)

Q356 BEDS (NUMBER OF BEDS)

BASE: NEW ZEALAND (Q300/3)

Q358 HOSPITAL (HOSPITAL NAME)

BASE: NEW ZEALAND (Q300/3)

Q359 CEOMANAGER (HOSPITAL CEO/MANAGER)

BASE: U.K. (Q300/4)**Q360** ID (RECORD ID)**BASE: U.K. (Q300/4)****Q362** TOWN**BASE: U.K. (Q300/4)****Q364** NEW REGION

- 1 North
- 2 Northern Ireland
- 3 Midlands & Eastern
- 4 South
- 5 London
- 6 Wales
- 7 Scotland

BASE: U.K. (Q300/4)**Q366** OLD REGION

- 01 Eastern
- 02 Northern & Yorkshire
- 03 Northern Ireland
- 04 Trent
- 05 London
- 06 South East
- 07 South West
- 08 West Midlands
- 09 North West
- 10 Wales
- 11 Scotland

BASE: U.K. (Q300/4)**Q368** POSTCODE**BASE:UK (Q300/4)****Q370** BEDS (NUMBER OF BEDS)**BASE:UK (Q300/4)****Q372** STATUS (OWNERSHIP STATUS)

- 1 TRUST (PUBLIC HOSPITAL)
- 2 NON-TRUST (PRIVATE HOSPITAL)

BASE:UK (Q300/4)**Q374** HOSPITAL STATUS

- 1 SINGLE HOSPITAL TRUST
- 2 MULTI- HOSPITAL TRUST

BASE: U.S. (Q300/5)**Q380** ID (RECORD ID/AHA ID KEY)**BASE: U.S. (Q300/5)****Q381** AREA TYPE (CODE FROM TELEPHONE AREA CODE AND EXCHANGE)

- 01 Urban
- 02 Suburban
- 03 Rural

BASE: U.S. (Q300/5)**Q382** MAREA (CODE AREA TYPE FROM TELEPHONE AREA CODE AND EXCHANGE)**BASE: U.S. (Q300/5)****Q383** MTELN (CODE AREA TYPE FROM TELEPHONE AREA CODE AND EXCHANGE)**BASE: U.S. (Q300/5)****Q384** REGION

- 1 Northeast
- 2 South
- 3 Midwest
- 4 West

BASE: U.S. (Q300/5)**Q385** BEDSA (NUMBER OF BEDS)**BASE: U.S. (Q300/5)****Q386** CNTRL (OWNERSHIP STATUS)

GOVERNMENT, NONFEDERAL
12 = STATE
13 = COUNTY
14 = CITY
15 = CITY-COUNTY
16 = HOSPITAL DISTRICT AUTHORITY

NONGOVERNMENT, NOT-FOR-PROFIT
21 = CHURCH-OPERATED
23 = OTHER NOT-FOR-PROFIT

NONGOVERNMENT, FOR-PROFIT
31 = INDIVIDUAL
32 = PARTNERSHIP
33 = CORPORATION

BASE: U.S. (Q300/5)**Q387** CONTROL (OWNERSHIP STATUS)

- 1 NFP (Not-for-Profit)
- 2 PFP (Private-for-Profit)
- 3 Public

BASE: U.S. (Q300/5)**Q388** NET (NETWORK STATUS)

- 1 Member of a group/network of hospitals
- 0 Not a member of a group/ network of hospitals
- 3 Missing value [SAMPLER: MISSING VALUES EXIST FOR THIS VARIABLE, 17%]

BASE: U.S. (Q300/5)**Q389** BRNH (BURN UNIT)

- 1 Burn unit
- 0 No burn unit
- 3 Missing value [SAMPLER: MISSING VALUES EXIST FOR THIS VARIABLE, 12%]

BASE: U.S. (Q300/5)**Q390** EMERH (EMERGENCY ROOM)

- 1 Emergency room
- 0 No emergency room
- 3 Missing value [SAMPLER: MISSING VALUES EXIST FOR THIS VARIABLE, 12%]

BASE: U.S. (Q300/5)**Q391** URGCH (URGENT CARE CENTER)

- 1 Urgent care center
- 0 No urgent care center
- 3 Missing value [SAMPLER: MISSING VALUES EXIST FOR THIS VARIABLE, 12%]

BASE: U.S. (Q300/5)**Q392** MSIH (MED/SURG INTENSIVE CARE)

- 1 Med/Surg intensive care
- 0 No med/surg intensive care
- 3 Missing value [SAMPLER: MISSING VALUES EXIST FOR THIS VARIABLE, 12%]

BASE: U.S. (Q300/5)**Q393** OHS GH (OPEN HEART SURGERY DEPARTMENT)

- 1 Open heart surgery department
- 0 No open heart surgery department
- 3 Missing value [SAMPLER: MISSING VALUES EXIST FOR THIS VARIABLE, 12%]

BASE: U.S. (Q300/5)**Q394** TEACH (TEACHING HOSPITAL)

- 1 Yes
- 0 No

BASE: U.S. (Q300/5)**Q395** REGTEACH (REGION & TEACHING STATUS)

- 1 MW-N
- 2 MW-Y
- 3 NE-N
- 4 NE-Y
- 5 SO-N
- 6 SO-Y
- 7 WE-N

8 WE-Y

BASE: U.S. (Q300/5)

Q396 MADNM (HOSPITAL ADMINISTRATOR'S NAME)

BASE: U.S. (Q300/5)

Q397 MNAME (HOSPITAL NAME)

Section 400: Introduction and Screening

[PROGRAMMER NOTE: IF AUSTRALIA (Q300/1) ASK Q400; IF CANADA (Q300/2) JUMP TO Q404; IF NEW ZEALAND (Q300/3) JUMP TO Q408; IF U.K. (Q300/4) JUMP TO Q412; IF U.S. (Q300/5) JUMP TO Q416.]

BASE: AUSTRALIA (Q300/1)

Q400 (INTRO) Good morning/ afternoon/ evening, my name is _____ from AMR Interactive, the research company. My purpose in calling is to talk to [INSERT HOSPITAL ADMIN'S NAME] about an international research project we are conducting with the Harvard School of Public Health. He/She should have received a letter from Mark Cormack, National Director of the Australian Healthcare Association and Jane Halton, Secretary of the Department of Health and Ageing regarding his/her participation in this important research project. Additionally, as appreciation for his/her time we will send him/her a \$100 gift voucher upon completion of the study. Can you please connect me with [INSERT HOSPITAL ADMIN'S NAME]?

- | | | |
|---|---|---------------------------------|
| 1 | Continue | JUMP TO Q402 |
| 2 | Not available – leave message, call back | LEAVE MESSAGE/SCHEDULE CALLBACK |
| 3 | Fax alert/endorsement letters, if necessary | CONFIRM FAX NUMBER |
| 4 | Enter new hosp Admin/CEO name | JUMP TO Q401 |
| 8 | Not sure (V) | TERMINATE |
| 9 | Decline to answer (V) | TERMINATE |

BASE: AUSTRALIA & NEW HOSPITAL ADMIN/CONTACT (Q300/1 & Q400/4)

Q401 ENTER NEW HOSPITAL ADMIN/CEO, IF NECESSARY.

[TEXT]

BASE: AUSTRALIA & CONNECTED TO HOSPITAL ADMIN (Q300/1 & Q400/1)

Q402 (HOSPITAL ADMIN INTRO) Good morning/ afternoon/ evening, my name is _____ from AMR Interactive, the research company. My purpose in calling is to talk to you about an international research project we are conducting with the Harvard School of Public Health. You should have received a letter from Mark Cormack, National Director of the Australian Healthcare Association and Jane Halton, Secretary of the Department of Health and Ageing encouraging you to participate in this important research project. As appreciation for your time we will send you a \$100 gift voucher upon completion of the study.

Would it be possible for me to interview you now? It should take about 15 to 20 minutes of your time.

- | | | |
|---|---------------------------|--------------------|
| 1 | Continue | JUMP TO Q500 |
| 2 | Not available – call back | SCHEDULE CALL BACK |

- | | | |
|---|---|--------------------|
| 3 | Fax alert/endorsement letters, if necessary | CONFIRM FAX NUMBER |
| 8 | Not sure (V) | TERMINATE |
| 9 | Decline to answer (V) | TERMINATE |

BASE: CANADA (Q300/2)

Q404 (INTRO) Hello, my name is _____ of Research House. My purpose in calling is to talk to [INSERT HOSPITAL ADMIN'S NAME] about an international research project we are conducting with the Harvard School of Public Health. He/She should have received a letter from Sharon Sholzberg-Gray, President of the Canadian Healthcare Association regarding his/her participation in this important research project. Additionally, as appreciation for his/her time we will send him/her a \$100 check upon completion of the study. Can you please connect me with [INSERT HOSPITAL ADMIN'S NAME]?

- | | | |
|---|---|---------------------------------|
| 1 | Continue | JUMP TO Q406 |
| 2 | Not available – leave message, call back | LEAVE MESSAGE/SCHEDULE CALLBACK |
| 3 | Fax alert/endorsement letters, if necessary | CONFIRM FAX NUMBER |
| 4 | Enter new hosp Admin/CEO name | JUMP TO Q405 |
| 8 | Not sure (V) | TERMINATE |
| 9 | Decline to answer (V) | TERMINATE |

BASE: CANADA & NEW HOSPITAL ADMIN/CONTACT (Q300/2 & Q404/4)

Q405 ENTER NEW HOSPITAL ADMIN/CEO, IF NECESSARY.

[TEXT]

BASE: CANADA & CONNECTED TO HOSPITAL ADMIN (Q300/2 & Q404/1)

Q406 (HOSPITAL ADMIN INTRO) Hello, my name is _____ of Research House. My purpose in calling is to talk to you about an international research project we are conducting with the Harvard School of Public Health. You should have received a letter from Sharon Sholzberg-Gray, President of the Canadian Healthcare Association encouraging you to participate in this important research project. As appreciation for your time we will send you a \$100 check upon completion of the study.

Would it be possible for me to interview you now? It should take about 15 to 20 minutes of your time.

- | | | |
|---|---|--------------------|
| 1 | Continue | JUMP TO Q500 |
| 2 | Not available – call back | SCHEDULE CALL BACK |
| 3 | Fax alert/endorsement letters, if necessary | CONFIRM FAX NUMBER |
| 8 | Not sure (V) | TERMINATE |
| 9 | Decline to answer (V) | TERMINATE |

BASE: NEW ZEALAND (Q300/3)

Q408 (INTRO) Good morning/afternoon/evening, my name is _____ from AC Nielsen, the International Research Company, calling from Auckland. My purpose in calling is to talk to [INSERT HOSPITAL ADMIN'S NAME] about an international research project we are conducting with the Harvard School of Public Health. He/She should have received a letter from Dr. Karen Poutasi, Director General of Health regarding his/her participation in this important research project. Additionally, as appreciation for his/her time we will send him/her a \$50 cheque upon completion of the study. Can you please connect me with [INSERT HOSPITAL ADMIN'S NAME]?

- | | | |
|---|---|---------------------------------|
| 1 | Continue | JUMP TO Q410 |
| 2 | Not available – leave message, call back | LEAVE MESSAGE/SCHEDULE CALLBACK |
| 3 | Fax alert/endorsement letters, if necessary | CONFIRM FAX NUMBER |
| 4 | Enter new hosp Admin/CEO name | JUMP TO Q409 |
| 8 | Not sure (V) | TERMINATE |
| 9 | Decline to answer (V) | TERMINATE |

BASE: NEW ZEALAND & HOSPITAL ADMIN/CONTACT (Q300/3 & Q408/4)

Q409 ENTER NEW HOSPITAL ADMIN/CEO, IF NECESSARY.

[TEXT]

BASE: NEW ZEALAND & CONNECTED TO HOSPITAL ADMIN (Q300/3 & Q408/1)

Q410 (HOSPITAL ADMIN INTRO) Good morning/afternoon/evening, my name is _____ from AC Nielsen, the International Research Company, calling from Auckland. My purpose in calling is to talk to you about an international research project we are conducting with the Harvard School of Public Health. You should have received a letter from Dr. Karen Poutasi, Director General of Health encouraging you to participate in this important research project. As appreciation for your time we will send you a \$50 cheque upon completion of the study.

Would it be possible for me to interview you now? It should take about 15 to 20 minutes of your time.

(IF NECESSARY: We are an independent research company and all our work is completely confidential. Your answers will be combined with those of other hospital administrators and there will be nothing in the results that could identify you or your hospital.)

- | | | |
|---|---|--------------------|
| 1 | Continue | JUMP TO Q500 |
| 2 | Not available – call back | SCHEDULE CALL BACK |
| 3 | Fax alert/endorsement letters, if necessary | CONFIRM FAX NUMBER |
| 8 | Not sure (V) | TERMINATE |
| 9 | Decline to answer (V) | TERMINATE |

BASE: UK (Q300/4)

Q412 (INTRO) Good morning/afternoon/evening. My name is _____ and I'm phoning on behalf of MORI, the social research company. I'm phoning to talk to [INSERT HOSPITAL ADMIN'S NAME] about an international research project we are conducting with the Harvard School of Public Health. He/She should have received a letter from [INSERT CONTACT NAME] regarding his/her participation in this important research project. Additionally, as appreciation for his/her time we are providing a donation of £20 to a charitable organisation of his/her choice upon completion of the study. Can you please connect me with [INSERT HOSPITAL ADMIN'S NAME]?

- | | | |
|---|---|---------------------------------|
| 1 | Continue | JUMP TO Q414 |
| 2 | Not available – leave message, call back | LEAVE MESSAGE/SCHEDULE CALLBACK |
| 3 | Fax alert/endorsement letters, if necessary | CONFIRM FAX NUMBER |
| 4 | Enter new hosp Admin/CEO name | JUMP TO Q413 |
| 8 | Not sure (V) | TERMINATE |
| 9 | Decline to answer (V) | TERMINATE |

BASE: UK & NEW HOSPITAL ADMIN/CONTACT (Q300/4 & Q412/4)

Q413 ENTER NEW HOSPITAL ADMIN/CEO, IF NECESSARY.

[TEXT]

BASE: UK & CONNECTED TO HOSPITAL ADMIN (Q300/4 & Q412/1)

Q414 (HOSPITAL ADMIN INTRO) Good morning/afternoon/evening. My name is _____ and I'm phoning on behalf of MORI, the social research company. I'm phoning to talk to you about an international research project we are conducting with the Harvard School of Public Health. You should have received a letter from [INSERT CONTACT NAME] encouraging you to participate in this important research project. Additionally, as appreciation for your time we are providing a donation of £20 to a charitable organisation of your choice upon completion of the study. I would like to assure you that your answers will be treated in the strictest confidence; both you and your hospital's anonymity is assured. Would it be possible for me to interview you now? It should take about 15 to 20 minutes of your time.

- | | | |
|---|---|--------------------|
| 1 | Continue | JUMP TO Q500 |
| 2 | Not available – call back | SCHEDULE CALL BACK |
| 3 | Fax alert/endorsement letters, if necessary | CONFIRM FAX NUMBER |
| 8 | Not sure (V) | TERMINATE |
| 9 | Decline to answer (V) | TERMINATE |

BASE: U.S. (Q300/5)

Q416 Hello, my name is _____ and I'm calling from Harris Interactive, a firm that conducts health policy research. My purpose in calling is to talk to [INSERT VAR MADNM – HOSPITAL ADMIN'S NAME] about a research project we are conducting with the Harvard School of Public Health and The Commonwealth Fund. He/She should have received a letter from Dick Davidson, President and CEO of the American Hospital Association regarding his/her participation in this important research project. Additionally, as appreciation for his/her time we will send him/her a \$35 check upon completion of the study. Can you please connect me with [INSERT VAR MADNM – HOSPITAL ADMIN'S NAME]?

- | | | |
|---|---|---------------------------------|
| 1 | Continue | JUMP TO Q418 |
| 2 | Not available – leave message, call back | LEAVE MESSAGE/SCHEDULE CALLBACK |
| 3 | Fax alert/endorsement letters, if necessary | CONFIRM FAX NUMBER |
| 4 | Enter new hosp Admin/CEO name | JUMP TO Q417 |
| 8 | Not sure (V) | TERMINATE |
| 9 | Decline to answer (V) | TERMINATE |

BASE: U.S. & NEW HOSPITAL ADMIN/CONTACT (Q300/5 & Q416/4)

Q417 ENTER NEW HOSPITAL ADMIN/CEO, IF NECESSARY.
[TEXT]

BASE: U.S. & CONNECTED TO HOSPITAL ADMIN (Q300/5 & Q416/1)

Q418. (HOSPITAL ADMIN INTRO) Hello, my name is _____ and I'm calling from Harris Interactive, a firm that conducts health policy research. My purpose in calling is to talk to you about a research project we are conducting with the Harvard School of Public Health and The Commonwealth Fund. You should have received a letter from Dick Davidson, President and CEO of the American Hospital Association encouraging you to participate in this important research project. As this letter indicates, in appreciation for your time we will send you a \$35 check upon completion of the study.

Would it be possible for me to interview you now? It should take about 15 to 20 minutes of your time. (IF NOT AVAILABLE NOW: Can I make an appointment to call you back?)

(IF NECESSARY: Let me assure you that everything you tell me will be kept in the strictest confidence.)

- | | | |
|---|---|----------------------|
| 1 | Continue | ASK Q500 |
| 2 | Make an appointment | SCHEDULE APPOINTMENT |
| 3 | Fax alert/endorsement letters, if necessary | CONFIRM FAX NUMBER |
| 8 | Not sure (V) | TERMINATE |
| 9 | Decline to answer (V) | TERMINATE |

SECTION 500: OVERVIEW OF MAJOR HOSPITAL ISSUES

BASE: AU,CA,NZ,UK (Q300/1,2,3,4)

Q499. Is this hospital exclusively for obstetrics or gynecological care or mental health care?

- 1 Yes JUMP TO Q1063
- 2 No JUMP TO Q500
- 8 Not sure (v) JUMP TO Q1063
- 9 Decline to answer (v) JUMP TO Q1063

BASE: ALL RESPONDENTS

Q500. Thank you for agreeing to take part in this study. This interview focuses on overall policies and common challenges such as quality improvement, patient safety, staffing shortages, and investment in information technology at your hospital. To begin...

Please tell me whether you are very satisfied, fairly satisfied, not very satisfied, or not satisfied at all with our country’s health care system in general. [IHP 2002 Q300]

- 1 Very satisfied
- 2 Fairly satisfied
- 3 Not very satisfied
- 4 Not satisfied at all

BASE: ALL RESPONDENTS

Q505 What are the two biggest problems faced by your hospital?

[TEXT ITEM]

BASE: ALL RESPONDENTS

Q510 In your hospital, how often do the following occur? (READ EACH ITEM) – is it very often, often, sometimes, rarely, or never?

Q511	1	2	3	4	5	8	9
	Very					Not	Decline to
[RANDOMIZE ITEMS]	<u>Often</u>	<u>Often</u>	<u>Sometimes</u>	<u>Rarely</u>	<u>Never</u>	<u>Sure(v)</u>	<u>Answer(v)</u>

- 1 Patients have to wait 6 months or more to be admitted for elective surgery.
- 5 Delays or problems with discharge because of limited availability of post-hospital care (IF NECESSARY:

including nursing homes, home care aides or nurses)

6 Diversions of patients to other hospitals due to lack of emergency or hospital capacity

BASE: ALL RESPONDENTS

Q515 On average, how long do patients wait to be seen in the hospital [IF CA,US “emergency room”; IF AU,UK “accident and emergency department”; IF NZ “emergency department”]? (DO NOT READ LIST) [INTERVIEWER

NOTE: THIS REFERS TO THE TOTAL TIME PATIENTS WAIT IN THE ER.]

- 01 Less than 30 minutes
- 02 30 minutes to less than 1 hour
- 03 1 to less than 2 hours
- 04 2 to less than 3 hours
- 05 3 to less than 4 hours
- 06 4 to less than 5 hours
- 07 5 to less than 8 hours
- 08 8 hours or more
- 09 Don’t have an emergency room/accident and emergency department (v)
- 88 Not sure (v)
- 99 Decline to answer (v)

BASE: ALL RESPONDENTS

Q520 Thinking about quality, how would you rate the following resources in your hospital? [READ EACH ITEM] – would you rate this as excellent, very good, good, only fair or poor?

Q521	1	2	3	4	5	7	8	9
		Very		Only		Not	Not	Decline to
[RANDOMIZE ITEMS]	<u>Excellent</u>	<u>Good</u>	<u>Good</u>	<u>Fair</u>	<u>Poor</u>	<u>Applicable (v)</u>	<u>Sure (v)</u>	<u>Answer (v)</u>

- 1 [IF AU,CA,US “Surgical or operating room”; IF UK “Operating theatres”; IF NZ “Emergency theatres”]
- 2 [IF CA,US “Emergency room”; IF AU,UK “Accident and emergency department”; IF NZ “Emergency department”] facilities
- 3 Intensive care unit
- 4 Diagnostic imaging equipment or other medical technology

BASE: ALL RESPONDENTS

Q525 In the past two years, have the waiting times for elective surgery in your hospital become longer or shorter, or have they remained the same?

- 1 Longer
- 2 Shorter
- 3 Remained the same/ No change
- 4 No waiting time (v)
- 8 Not sure (v)
- 9 Decline to answer (v)

SECTION 600: MEDICAL ERRORS**BASE: ALL RESPONDENTS**

Q600 How effective is the program for finding and addressing preventable medical errors in your hospital? Is the program very effective, somewhat effective, not very effective, or not at all effective? If there is no program in place, please say so.

(INTERVIEWER NOTE: IF RESPONDENT ASKS WHAT IS INCLUDED IN MEDICAL ERRORS: "By medical errors we mean medication errors, surgical or medical mistakes and human error in interpreting results of diagnostic tests.")

- 1 Very effective
- 2 Somewhat effective
- 3 Not very effective
- 4 Not at all effective
- 5 No program
- 8 Not sure (v)
- 9 Decline to answer (v)

BASE: ALL RESPONDENTS

Q605 How supportive are doctors of systematic reporting and addressing of preventable medical errors in your hospital? Would you say they are very supportive, somewhat supportive, somewhat resistant, or very resistant?

- 1 Very supportive
- 2 Somewhat supportive
- 3 Somewhat resistant
- 4 Very resistant
- 8 Not sure (v)
- 9 Decline to answer (v)

BASE: ALL RESPONDENTS

Q610 In your hospital is there a written policy for informing patients or their families if a preventable medical error resulting in serious harm is made in their care, or not?

- 1 Yes, have a policy
- 2 No, do not have a policy
- 8 Not sure (v)
- 9 Decline to answer (v)

BASE: ALL RESPONDENTS

Q615 In your opinion, how effective are current government policies [IF AU,CA,NZ,US: “and”] regulations [IF UK “and targets”] designed to improve the quality of care in your hospital? Would you say that they are very effective, somewhat effective, not very effective or not at all effective?

- 1 Very effective
- 2 Somewhat effective
- 3 Not very effective
- 4 Not at all effective
- 8 Not sure (v)
- 9 Decline to answer (v)

SECTION 700: QUALITY OF CARE: USE OF TECHNOLOGY AND QUALITY INITIATIVES

BASE: ALL RESPONDENTS

Q710 In most departments in your hospital, [IF Q710/2,4,5,6 INSERT “is”; IF Q710/1,3 INSERT “are”] (READ EACH ITEM) used at all to improve the quality of medical care, or not? (IF “YES” ASK: “Is it a standard procedure?”)

Q711	1	2	3	8	9
	Standard	Used, But Not	Do Not Use	Not	Decline to
[RANDOMIZE ITEMS]	<u>Procedure</u>	<u>Standard</u>	<u>At All</u>	<u>Sure (v)</u>	<u>Answer (v)</u>

- 1 Treatment guidelines or protocols for common conditions or procedures
- 2 Information comparing medical outcomes of selected procedures between your hospital and other hospitals
- 3 Electronic or computerized patient medical records
- 4 Electronic or computerized ordering of drugs and medical tests
- 5 Including pharmacists on hospital rounds when doctors review the progress of patients
- 6 Bar-coding for medications

BASE: ALL RESPONDENTS

Q700 How effective is (SELECT ITEM INDICATED AT Q710 – Q710/1-6 & Q711/1,2) at improving the quality of care in your hospital?

How effective do you think (SELECT ITEM NOT INDICATED AT Q710 – Q710/1-6 & Q711/3,8,9) would be at improving the quality of care **in your hospital**?

Q701	1	2	3	4	8	9
	Very	Somewhat	Not Very	Not At All	Not	Decline to
[RANDOMIZE ITEMS]	<u>Effective</u>	<u>Effective</u>	<u>Effective</u>	<u>Effective</u>	<u>Sure(v)</u>	<u>Answer(v)</u>

- 01 Use of treatment guidelines or protocols for common conditions or procedures
- 02 Information to compare medical outcomes of selected procedures between your hospital and other hospitals
- 03 Use of electronic or computerized patient medical records
- 04 Use of electronic or computerized ordering of drugs and medical tests
- 05 Including pharmacists on hospital rounds when doctors review the progress of patients
- 08 Bar-coding for medications

BASE: ALL RESPONDENTS

Q715 If you had new funds to invest in a one-time capital improvement in only one area of your hospital to improve the quality of care for patients, what would it be?

[TEXT]

BASE: ALL RESPONDENTS

Q720 Does your hospital conduct regular surveys of patients and/or patients' families about their experiences with the care they received in your hospital, or not? (IF YES ASK: "Does your hospital use these surveys to provide feedback to doctors and other clinicians?")

- 1 Provides feedback to doctors and other clinicians
- 2 Does not provide feedback to doctors and other clinicians
- 4 No, does not conduct regular surveys
- 8 Not sure (v)
- 9 Decline to answer (v)

BASE: ALL RESPONDENTS

Q725 Do most departments in your hospital share data on the clinical outcomes of care to provide doctors with feedback in order to improve quality, or not?

- 1 Yes
- 2 No
- 8 Not sure (v)
- 9 Decline to answer (v)

BASE: ALL RESPONDENTS

Q730 Some hospital departments have joined with other departments, hospitals, and/or doctor groups in collaborative efforts to exchange information and try different approaches to improving specific aspects of care. For example, a collaborative might try to improve outcomes for diabetic or asthmatic patients, or care for patients following specific types of surgery.

In the past two years, have any departments in your hospital been involved in such a collaborative effort with a focus on quality of care, or not?

- 1 Yes
- 2 No
- 8 Not sure (v)
- 9 Decline to answer (v)

BASE: ALL RESPONDENTS

Q735 Do you think the following information about quality of care in hospitals should be reported to the general public, or not? (READ ITEM)

Q736	1	2	8	9
			Not	Decline to
	<u>Yes</u>	<u>No</u>	<u>Sure (v)</u>	<u>Answer (v)</u>

[RANDOMIZE ITEMS]

- 1 Mortality rates for specific medical conditions, using standardized reporting procedures
- 2 Frequency or volume of specific procedures
- 3 Medical error rates, using standardized reporting procedures
- 4 Patient satisfaction ratings, using standardized reporting procedures
- 5 Average waiting times for elective procedures
- 7 Nosocomial infection rates (INTERVIEWER NOTE: PRONOUNCED: “No-zo ko mee al” (IF NEEDED: Infections acquired in hospitals.)

SECTION 800: WORKFORCE SHORTAGES

BASE: ALL RESPONDENTS

Q800 In your hospital, would you say that there is no staffing shortage, a moderate staffing shortage or a serious staffing shortage of (READ ITEM)?

Q801	1	2	3	8	9
	No	Moderate	Serious	Not	Decline to
[RANDOMIZE ITEMS]	<u>Shortage</u>	<u>Shortage</u>	<u>Shortage</u>	<u>Sure (v)</u>	<u>Answer (v)</u>

- 1 Pharmacists
- 2 Lab technicians
- 4 Nurses
- 5 Specialists or consultant doctors (INTERVIEWER NOTE: refers to specialists/consultant doctors staffing overall)
- 6 Trained managerial staff

BASE: ALL RESPONDENTS

Q805 Compared to two years ago, is the situation with nurse staffing levels in your hospital better, worse, or about the same?

- 1 Better
- 2 Worse
- 3 About the same
- 8 Not sure (v)
- 9 Decline to answer (v)

BASE: ALL RESPONDENTS

Q810 Which of the following strategies, if any, are you using to recruit and retain nurses?

Q811	1	2	8	9
		Not	Not	Decline to
[RANDOMIZE ITEMS]	<u>Using</u>	<u>Using</u>	<u>Sure (v)</u>	<u>Answer (v)</u>

- 1 Sign-up bonuses
- 2 Flexible schedule or job sharing
- 3 Assistance with nursing school tuition [PROGRAMMER NOTE: DO NOT ASK IN UK (Q300/4)]
- 4 Recruiting from other countries
- 5 Redesigning nursing jobs (INTERVIEWER NOTE: IF RESPONDENT ASKS IN WHAT WAY, TELL THEM IN WHATEVER WAY THEY SEE APPROPRIATE.)

BASE: ALL RESPONDENTS

Q825 How would you rate the morale of the doctors at your hospital? Would you say it is excellent, very good, good, only fair, or poor?

- 1 Excellent
- 2 Very good
- 3 Good
- 4 Only fair
- 5 Poor
- 8 Not sure (v)
- 9 Decline to answer (v)

SECTION 900: REVIEW OF SELECTED TOPICAL ISSUES

BASE: ALL RESPONDENTS

Q905 In the past year, what percent of scheduled surgeries or other medical procedures did your hospital have to cancel, postpone, or reschedule due to a lack of capacity or shortage of appropriate staff? (IF NECESSARY: Your best guess will do.)

/_/_/_/ Percent [RANGE: 0-100, 888, 999]

(INTERVIEWER NOTE: CODE 888 FOR NOT SURE AND 999 FOR DECLINE TO ANSWER)

BASE: ALL RESPONDENTS

Q910 Consider a patient with the following medical symptoms. [READ EACH ITEM] On average, when a patient is referred to your hospital, how long would a patient like this generally wait from the time a doctor first recommends the test or treatment until the time the test or treatment is received? [2000 IHP Q400, modified to focus on hospital]

(DO NOT READ; PROMPT IF NECESSARY)

Q911

01	02	03	04	05	06	07	08	98	99
1-2	3-6	1-2	3-4	1-5	6-12	More than	Not	Not	Decline to
<u>Days</u>	<u>Days</u>	<u>Weeks</u>	<u>Weeks</u>	<u>Months</u>	<u>Months</u>	<u>A Year</u>	<u>Applicable(v)</u>	<u>Sure(v)</u>	<u>Answer(v)</u>

[RANDOMIZE ITEMS]

1. A 50-year-old woman with an ill-defined mass in her breast, but no adenopathy, who requires a breast biopsy
2. A 65-year-old man who requires a routine hip replacement

BASE: ALL RESPONDENTS

Q915 In the event of a terrorist attack in your community, how prepared is your hospital to accommodate a large number of patients needing emergency care? Is your hospital very prepared, somewhat prepared, not very prepared, or not at all prepared?

- 1 Very prepared
- 2 Somewhat prepared
- 3 Not very prepared
- 4 Not at all prepared
- 8 Not sure (v)
- 9 Decline to answer (v)

BASE: ALL RESPONDENTS

Q920 In the past year, has your hospital had a surplus or profit, broken even, or had a loss or deficit
 [PROGRAMMER NOTE: IN AU,CA,NZ,UK: INCLUDE “or was your hospital unable to stay within budget]?

- 1 Surplus or profit
- 2 Broken even
- 3 Loss, deficit (or unable to stay within budget)
- 8 Not sure (v)
- 9 Decline to answer (v)

BASE: ALL RESPONDENTS

Q925 Which of the following best describes your hospital’s current financial situation? Would you say finances are
 (READ LIST) ...

- 1 Insufficient to maintain current levels of service
- 2 Sufficient to maintain current levels of service
- 3 Allow for some improvement or expansions of care
- 8 Not sure (v)
- 9 Decline to answer (v)

BASE: ALL RESPONDENTS

Q930 How concerned are you that you will lose patients to [READ ITEM] in the next two years? Are you very
 concerned, somewhat concerned, not very concerned, or not at all concerned?

Q931	1	2	3	4	8	9
	Very	Somewhat	Not Very	Not At All	Not	Decline to
[RANDOMIZE ITEMS]	<u>Concerned</u>	<u>Concerned</u>	<u>Concerned</u>	<u>Concerned</u>	<u>Sure(v)</u>	<u>Answer(v)</u>

- 1 Other hospitals
- 2 Free-standing diagnostic or treatment centers
- 3 Free-standing ambulatory or primary care centers

BASE: ALL RESPONDENTS

Q935 Does your hospital have patient medical records that can be accessed electronically by doctors when they are not
 in the hospital, or not?

- 1 Yes
- 2 No

- 8 Not sure (v)
- 9 Decline to answer (v)

BASE: ALL RESPONDENTS

Q940 On average, how quickly does your hospital send discharge information to the doctor who will be caring for the patient after discharge? (DO NOT READ LIST)

- 1 1 day
- 2 2-3 days
- 3 4-6 days
- 4 1 week
- 5 1-2 weeks
- 6 More than 2 weeks
- 7 Never
- 8 Not sure (v)
- 9 Decline to answer (v)

BASE: ALL RESPONDENTS

Q945 How much of a barrier is each of the following to greater use of computer technology in your hospital? [READ EACH ITEM] – is this a major barrier, minor barrier, or not at all a barrier?

(IF NECESSARY: includes more use of computers for ordering of prescriptions or lab tests, more use of computerized or electronic medical records.)

	1	2	3	8	9
	Major	Minor	Not At All A	Not	Decline to
[RANDOMIZE ITEMS]	<u>Barrier</u>	<u>Barrier</u>	<u>Barrier</u>	<u>Sure(v)</u>	<u>Answer(v)</u>

- 1 Medical or administrative staff lack training or knowledge on how to use computer technology
- 2 Start up costs are too high (IF NECESSARY: investment into new equipment and training)
- 3 Privacy concerns (IF NECESSARY: clinical information and medical records are not secure)
- 4 Lack of uniform standards within industry (IF NECESSARY: having to use multiple systems used by different providers and plans)
- 5 Projected maintenance costs, or insufficient technical staff
- 6 Doctor’s resistance to change

BASE: ALL RESPONDENTS

Q950 Does more than 10 percent of your patient population have a different culture or language background from a majority of the population? (INTERVIEWER NOTE: THIS REFERS TO THE POPULATION OF THE

COMMUNITY THE HOSPITAL IS LOCATED.)

- 1 Yes
- 2 No
- 8 Not sure (v)
- 9 Decline to answer (v)

BASE: ALL RESPONDENTS

Q955 Is your hospital able to provide adequately trained interpreter services, or not?

- 1 Yes
- 2 No
- 7 Not applicable (v)
- 8 Not sure (v)
- 9 Decline to answer (v)

SECTION 1000: FACTUALS**BASE: ALL RESPONDENTS**

Q1000 Does your hospital have an [IF CA,US “emergency room”; IF AU,UK “accident and emergency department”; IF NZ “emergency department”]?

- 1 Yes
- 2 No
- 8 Not sure (v)
- 9 Decline to answer (v)

BASE: ALL RESPONDENTS

Q1005 Including all departments and day surgery, what is the total bed count in your hospital? (DO NOT READ ITEMS) (IF NECESSARY: “This refers to hospital beds in your hospital only.”)

- 1 Less than 75
- 2 75 - 99
- 3 100 - 199
- 4 200 - 299
- 5 300 – 399
- 6 400 - 499
- 7 500 or more
- 8 Not sure (v)
- 9 Decline to answer (v)

BASE: RESPONDENTS IN NZ (Q300/3)

Q1010 Is your hospital publicly or privately owned?

- 1 Public
- 2 Private
- 8 Not sure (v)
- 9 Decline to answer (v)

BASE: RESPONDENTS IN CA (Q300/2) & NO SAMPLE VARIABLE FOR OWNERSHIP

Q1012 Which of the following best describes your hospital’s ownership? (READ EACH ITEM)

- 1 Lay
- 2 Municipal Government
- 3 Provincial Government

- 4 Regional Authority Board
- 5 Religious
- 8 Not sure (v)
- 9 Decline to answer (v)

BASE: RESPONDENTS IN NZ & UK (Q300/3,4) & RESPONDENTS IN CA (Q300/2) & NO SAMPLE VARIABLE FOR TEACHING

Q1015 Is your hospital a teaching hospital and/or academic health center?

- 1 Yes
- 2 No
- 8 Not sure (v)
- 9 Decline to answer (v)

BASE: ALL RESPONDENTS

Q1020 Does your hospital currently need major, minor or no renovations?

- 1 Major
- 2 Minor
- 3 No renovations
- 8 Not sure (v)
- 9 Decline to answer (v)

BASE: RESPONDENTS IN NZ (Q300/3)

Q1055 Is your hospital located in a metropolitan, provincial, or small town or rural area?

- 1 Metropolitan
- 2 Provincial
- 3 Small town/Rural
- 8 Not sure (v)
- 9 Decline to answer (v)

BASE: RESPONDENTS IN UK (Q300/4)

Q1060 Would you describe the area in which your hospital is located as urban, suburban, or rural?

- 1 Urban
- 2 Suburbs
- 3 Rural
- 8 Not sure (v)
- 9 Decline to answer (v)

BASE: ALL RESPONDENTS

Q1025 What is your exact title? (DO NOT READ LIST)

- 1 Chief Executive Officer (CEO), President, Directeur Général, Executive Director
- 2 Chief Financial Officer (CFO)
- 3 Chief Operating Officer (COO), General Manager, Administrator
- 4 Vice President
- 5 Other
- 8 Not sure (v)
- 9 Decline to answer (v)

BASE: OTHER TITLE (Q1025/5)

Q1026 RECORD EXACT TITLE

[TEXT]

BASE: RESPONDENTS IN AUSTRALIA, CANADA (Q300/1,2)

Q1030 What is the highest level of education you have completed or the highest degree you have received? (DO NOT READ LIST)

- 1 Less than a college/university degree (include high school and community college, no college degree)
- 2 College/university graduate, bachelor's degree
- 3 Graduate school degree/post college degree (e.g., MBA, MD, MS, Sc.D., Ph.D)
- 8 Not sure (V)
- 9 Decline to answer (V)

BASE: RESPONDENTS IN NEW ZEALAND (Q300/3)

Q1040 What is the highest level of education you have completed or the highest degree you have received?
(DO NOT READ LIST)

- 1 Secondary school (with or without School Certificate, U.E., Matriculation, 6th Form Certificate, Bursary), technical or trade qualification, or other tertiary qualification, attended university but did not graduate
- 2 University graduate (e.g., B.A., B.Sc.)
- 3 Post graduate degree (e.g., MBA, MD, MS, Sc.D., Ph.D)
- 8 Not Sure (V)
- 9 Decline to answer (V)

BASE: RESPONDENTS IN UNITED KINGDOM (Q300/4)

Q1045 What is the highest level of formal education you have completed? (DO NOT READ LIST)

- 1 Less than a college/university degree (including GCSE/O-levels, A levels, NVQ 1 to 3 - also include if left school with no qualifications)
- 2 University/Polytechnic graduate - up to first degree (e.g. B.A., B.Sc.,B.Ed.)
- 3 Post graduate degree (e.g. MBA, MD, MS, Sc.D., Ph.D./D.Phil., MA, MSc)
- 8 Not Sure (V)
- 9 Decline to answer (V)

BASE: RESPONDENTS IN US (Q300/5)

Q1050 What is the highest level of education you have completed or the highest degree you have received? (DO NOT READ LIST)

- 1 Less than college/university degree
- 2 College/University graduate (e.g., B.A., A.B.,B.S.)
- 3 Completed graduate school (e.g., M.B.A., M.D., M.S., Sc.D., Ph.D., PH.D)
- 8 Not sure (v)
- 9 Decline to answer (v)

BASE: OBGYN OR MENTAL HEALTH HOSPITAL (Q499/1)

Q1063. Thank your for your willingness to participating in this study, but we are seeking to interview hospitals which are not exclusively women's or mental health facilities.

THANK AND TERMINATE.

BASE: RESPONDENTS IN AUSTRALIA (Q300/1)

Q1065. Thank your for participating in this study. To what address would you like us to send the \$100 gift voucher?

THANK AND TERMINATE.

BASE: RESPONDENTS IN CANADA (Q300/2)

Q1070. Thank your for participating in this study. To what address would you like us to send the \$100 check?

THANK AND TERMINATE.

BASE: RESPONDENTS IN NZ (Q300/3)

Q1075. Thank your for participating in this study. To what address would you like us to send the \$50 cheque?

THANK AND TERMINATE.

BASE: RESPONDENTS IN UK (Q300/4)

Q1080. Thank your for participating in this study. What is the name of the organisation you would like us to send your £20 honorarium?

THANK AND TERMINATE.

BASE: RESPONDENTS IN US (Q300/5)

Q1085. Thank your for participating in this study. To what address would you like us to send the \$35 check?

THANK AND TERMINATE.