



# Community Health Needs and Resources

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## Survey Summary: Bonne Bay Area

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## Introduction

A community health needs and resource assessment (CHNRA) is a method to identify key health needs and community issues and assets, through collecting and analyzing information about communities and the people that live in them. Western Health uses CHNRAs to help prioritize, plan and act on unmet community needs to improve the health of residents of the Western Region. Western Health's CHNRA process uses a mixed methods approach, to compile data on the community health needs and resources of the Western region of Newfoundland and Labrador which includes the collection of quantitative and qualitative data. There are four components of the CHNRA: the *health needs* of the region determined through the dissemination of the CHNRA survey; public *feedback* obtained through focus groups; the *health status* of Western region community residents assessed through data from various statistical sources and relevant regional reports; and finally, a list of community assets compiled in consultation with Community Advisory Committees (CACs), Western Health staff, key stakeholders, and community members. The CHNRA process is an ongoing process that is completed over a six year cycle. Information obtained in each component is used by Western Health in service planning on an ongoing basis.

The following report is a summary of the CHNRA survey (Appendix A) for the Bonne Bay area, which is the first component of the CHNRA process. The survey was used to collect quantitative and qualitative data from residents of the region about their perceptions of health and community services, available resources, barriers to accessing these services, identification of top health and community concerns, how communities help deal with these concerns, where individuals go for routine health care, where they obtain health information, information on the Western Health website, and other comments about community health needs and resources.

The following report provides a summary of the CHNRA surveys completed in the Bonne Bay Primary Health Care Area which includes 17 rural communities from Trout River north to Bellburns. These communities include: Trout River, Woody Point (including Curzon Village), Winterhouse Brook, GBS (Glenburnie, Birchy Head, Shoal Brook), Wiltondale, Norris Point, Rocky Harbour, Sally's Cove, St. Paul's, Cow Head, Three Mile Rock, Parsons Pond, Portland Creek, Daniel's Harbour, and Bellburns.

## Methodology

The survey tool and method of administration were modified over the last two CHNRA processes based on the needs of stakeholders and the 2013 CHNRA evaluation. In the current CHNRA cycle, surveys were made available on the Western Health website for electronic completion between January 1 and February 29, 2016. The target audience for surveys was individuals residing in the Western region, aged 18 and older. (information from individuals under the age of 18 is obtained through student health surveys completed as a part of the comprehensive school health assessment). Communications, Information and Quality, and Population Health developed a detailed communication plan to disseminate the availability of the CHNRA survey. The communication plan included articles in the Western Health newsletters, posters, tweets through Western Health's twitter account, the Western Health website, local newspapers, radio announcements, local bulletins (e.g., church), and interviews with the media and distribution of survey information sheets throughout the Primary Health Care (PHC) areas. To enhance collaboration with the Qalipu Mi'kmaq population, the Manager of Health Services with the Qalipu Mi'kmaq First Nation Band was contacted and the survey link was provided for distribution to members. In addition, a partnership with the Francophone Association on the Port Au Port Peninsula resulted in the translation of the CHNRA survey into French. The French survey was made available electronically and uploaded to the Western Health website. Members of the francophone population were emailed to communicate the availability of the survey in French and provided with the survey link.

To ensure that each PHC area was represented, the Community Health Managers received a weekly update on respondent demographics. Efforts were made to enhance the number of participants in low response PHC areas.

Feedback from community representatives indicated concern with lack of accessibility for some individuals as the survey was only available online. As a result, members of the Regional Primary Health Care Management Committee agreed that the online survey should be available in paper format for those who requested a paper survey. On February 1, 2016, Western Health provided a media release to the public indicating that paper surveys were available and who to contact for the surveys. The availability of the survey in paper was also tweeted through Western Health's Twitter account.

Following the survey completion deadline of February 29, 2016, the Regional Manager Research and Evaluation compiled all of the data from Google Forms and transferred it to a Statistical Package for Social Sciences (SPSS) data file. SPSS was then used to analyze the data frequencies by PHC area and the overall region. The results and output of each PHC area was forwarded to the appropriate Community Health Manager. To analyze the qualitative data, each Community Health Manager reviewed question comments and identified themes. All identifying information was deleted (e.g., names, specific situations that could identify the person, reference to specific people and so on). A survey summary report was prepared by the appropriate Community Health Manager for each of the seven PHC areas. The Regional Manager Research and Evaluation reviewed the survey results on a regional basis and the individual PHC

area reports to complete a survey summary report for the overall Western region. The following sections provide a summary of the CHNRA surveys completed from the Bonne Bay area.

### **Demographics**

A total of 98 surveys were completed in the Bonne Bay Area (29 of the surveys completed were in paper form). Respondents reported being from the following communities: Bellburns, Bonne Bay South, Cow Head, Curzon Village, GBS, Norris Point, Parsons Pond, Portland Creek, Rocky Harbour, Sally’s Cove, Trout River, Winterhouse Brook, and Woody Point.

Of the 98 surveys completed, 70.4% of the respondents were female, 27.6% were male, and 2% did not report their gender. When respondents were asked to indicate their race or ethnicity, 94.9% of respondents were White/ Caucasian, and 5.1% were aboriginal. When asked their language 100% of respondents reported English as their primary language. When asked how long they lived in the community, 1% reported less than one year, 17.3% reported 1-5 years, 25.5% reported 6-20 years, and 55.1% reported over 21 years and 1% did not report. The majority of respondents were from the 61-65 age category (17.3%) and the 66-70 age category (14.3%). Refer to Table 1 for age groups, percentages, and frequencies of respondents.

Table 1 - Respondent Age Groups, Percentages, and Frequencies

<b>Age Group</b>	<b>Percentage (%)</b>	<b>Frequency (N)</b>
16-20	2	2
21-25	1	1
26-30	1	1
31-35	4.1	4
36-40	7.1	7
41-45	11.2	11
46-50	4.1	4
51-55	11.2	11
56-60	10.2	10
61-65	17.3	17
66-70	14.3	14
71-75	6.1	6
76+	10.2	10
Did not report	0	0

## Community Services

Respondents were provided with a list of community services. They were asked to indicate whether they were satisfied or not satisfied with the services that they used or required. Refer to Table 2 for a percentage of those who responded they were satisfied, or not satisfied, with each community service listed. Respondents were most satisfied with Education (61.7%) and Emergency services (59.8%) and least satisfied with Food Banks (92.7%). While 92.7% of respondents who used or required food banks were not satisfied this represents only 38 respondents. A higher number of respondents were not satisfied with other services such as grocery stores (65 respondents) and environmental services (46 respondents).

Table 2 - Percentage and Frequency of Satisfied and Not Satisfied with each Community Service

Community Service	Satisfied % (N)	Not satisfied % (N)
Education	61.7 (29)	38.3 (18)
Child care/day care	37.9 (11)	62.1 (18)
Children/youth programs	27.8 (10)	72.2 (26)
Seniors programs (65+)	55.7 (34)	44.3 (27)
Grocery stores	23.5 (20)	76.5 (65)
Public transportation (e.g., buses, taxis)	39.1 (27)	60.9 (42)
Recreation programs (e.g., soccer, hockey, walking trails, darts)	50 (36)	50 (36)
Food Bank	7.3 (3)	92.7 (38)
Environmental services (e.g., recycling, water, sewer)	42.5 (34)	57.5 (46)
Emergency services (e.g., police, fire dept., emergency preparedness)	59.8 (55)	40.2 (37)

Survey respondents were asked to provide comments as to why they were satisfied with the community services listed above. The comments were themed and the following themes were identified:

- Close/supportive community
- Many community activities
- Lots of outdoor activities (e.g. hiking trails)/National Park
- Active volunteer base/committed/well trained volunteers (e.g. volunteer fire department, search and rescue, etc.)
- Caring and well qualified staff (e.g. schools, Health Care Center)

Survey respondents were asked to provide comments as to why they were not satisfied with the community services listed. The comments were themed and the following themes were identified:

- Limited access to child care services and recreation facilities
- Limited access to fresh healthy food choices, high cost, limited variety
- No food banks in the area

- Emergency response times too long (e.g. Ambulance, RCMP)
- Limited access to consistent health care providers (e.g. physicians)
- Limited/or no access to public transportation
- Limited programming for seniors and youth
- Recycling limited
- Hard to recruit new volunteers

Survey respondents were also asked to indicate if there were any community services that they had/have trouble getting and 55.2% reported yes and 44.8% reported no. The community services that respondents reported having trouble getting were:

- Pharmacy/Blood collection at Rural Health Clinics
- Physician Services Inconsistent
- Mental Health and Addictions services (Bonne Bay South Area)
- Physiotherapy/Rehab services
- Emergency services: Ambulance services, police
- Public Transportation (i.e. Bus, taxi)
- Child Care Services
- Grocery Stores
- Skating programs (other than hockey)
- Family Resource Center programs outside of regular work hours
- Services to support seniors living in their own homes (e.g. snow removal, gardening care, groceries, etc.)

Respondents were asked what prevented them from getting these services and were provided with a list of options including an “other” option. Approximately 15% of respondents reported that they did not know the service was available: 18.8% reported transportation related issues: 33.3% reported wait time for service, 10.4% reported that the service was too difficult to arrange, 0% reported they were not ready or prepared to get the service, and 40% reported “other” and the following categories were identified:

- Services are not available in the area
- Distance of travel
- Attitude of health care staff
- Sporadic/inconsistent service

Survey respondents were asked to report the top three problems in their communities. The top three problems identified were: alcohol and/or drug abuse (40.8%), drinking and driving (28.6%) and care of the older person (28.6%). Table 3 provides a complete listing of community problems and the frequencies and percentages of respondents who reported them to be community problems.

Table 3 - Frequencies and Percentages of Respondent Reported Community Problems

<b>Community Problems</b>	<b>Percentages (%)</b>	<b>Frequencies (N)</b>
Absence of an age/senior friendly environment	11.2	11
Alcohol and/or drug abuse	40.8	40
Bullying	7.1	7
Care of people with disabilities	11.2	11
Care of the older person	28.6	28
Child abuse/neglect	2	2
Crime (including vandalism)	15.3	15
Distracted driving	6.1	6
Drinking and driving	28.6	28
Environment	3.1	3
Gambling	10.2	10
Homelessness (e.g., couch surfing)	1	1
Illiteracy	0	0
Issues with Day care	5.1	5
Issues with the Education system	5.1	5
Lack of access for people with disabilities (e.g., accessible buildings, wheelchair ramps, sidewalks in disrepair)	7.1	7
Loneliness	3.1	3
Outmigration	21.4	21
Poor housing conditions	2	2
Poor parenting skills	2	2
Poverty	4.1	4
Risks for injury on the job	1.0	1
Suicide	3.1	3
Unemployment	22.4	22
Unplanned pregnancy	0	0
Violence in the community	1	1
Violence in the home	0	0
Young people in trouble with the law	7.1	7
Other (see listing below)	5.1	5

In the “other” category, respondents reported:

- Access to family physicians/medical services
- Wait time for homecare assessments
- Access to support groups/rehab services
- Family/child programming
- Seasonal employment/outmigration
- No sidewalks/sidewalks in disrepair

- Lack of Police presence
- Lack of clean drinking water

When asked how the community helps deal with these challenges, comments indicated:

- A strong sense of community
- Many community/volunteer organizations and groups such as the Kinsmen, the Legion, Lions Club, Firettes, ACWs, etc.
- Community partnerships between volunteer organizations, community groups, Western Health, and Schools – increase awareness
- Supporting community programs and activities
- Some respondents reported a lack of awareness and lack of community support to address community issues and concerns.

## Health Services

Respondents were provided with a list of health services. They were asked to indicate whether they were satisfied or not satisfied with the services that they used or required. See Table 4 for those who responded that they were satisfied or not satisfied with each community service. Respondents were most satisfied with immunizations services (100%) and least satisfied with Meals on Wheels type services (95.2%) and supportive housing (88%). While the percentage of respondents who were not satisfied was high, these percentages represent a limited number of respondents who used/required the service (20 meals on wheels, 22 supportive housing). A larger number of respondents were not satisfied with some other services. For example, 61 respondents were unsatisfied with family doctor services, and 42 respondents were not satisfied with ambulance, emergency department services and specialist services.

Table 4 - Percentage and Frequency of Satisfied and Not Satisfied with each Health Service

<b>Health Related Community Service</b>	<b>Satisfied % (N)</b>	<b>Not satisfied % (N)</b>
Mental health and addiction services (including counseling services)	40.5 (15)	59.5 (22)
Ambulance services	44 (33)	56 (42)
Emergency department services	50 (32)	50 (32)
Dental care services	59.4 (41)	40.6 (28)
Pharmacy services	53.7 (44)	46.3 (38)
Immunization services	100 (48)	0 (0)
Family doctor services	31.5 (28)	68.5 (61)
Specialist services (e.g., surgeon, internists)	20.8 (11)	79.2 (42)
Nurse practitioner services	46.8 (29)	53.2(33)
Nutrition services (e.g., dietitians)	51.2 (21)	48.8 (20)
Respiratory services	35.7 (10)	64.3 (18)
Rehabilitation services (e.g., physiotherapy, occupational therapy, Speech and language, and social work)	42.2(19)	57.8 (26)
Diagnostic services (e.g., x-ray, blood collection)	57.4 (39)	42.6 (29)
Vision services	29.3 (12)	70.7 (29)
Women's wellness (e.g., cervical screening, breast screening)	34.1 (15)	65.9 (29)
Home support services/Home care	52.6 (20)	47.4 (18)
Respite services (e.g., adult day support programs, children's respite)	20 (4)	80 (16)
Meals on wheels type services	4.8 (1)	95.2 (20)
Supportive housing (e.g., personal care homes, alternate family care)	12 (3)	88 (22)
Long term care	20 (6)	80 (24)
Services for pregnant mothers/new mothers/babies	60.9 (14)	39.1 (9)
Services for people with chronic diseases (disease longer than 3 months, e.g., asthma, diabetes, cancer)	32.4 (11)	67.6 (23)

<b>Health Related Community Service</b>	<b>Satisfied % (N)</b>	<b>Not satisfied % (N)</b>
Intervention services (including services for people with developmental and physical disabilities and autism)	40.9 (9)	59.1 (13)
Community supports (services for seniors and adults with intellectual and physical disabilities)	31 (9)	69 (20)
HealthLine	84.2 (32)	15.8 (6)
Telehealth services	87.5 (21)	12.5(3)
School health services (e.g., school health nurses, immunization, sexually transmitted infections, stress management, health promotion)	74.3 (26)	25.7 (9)

Survey respondents were asked to provide comments as to why they were satisfied with the health services listed. The comments were themed and the following themes were identified:

- Services are well promoted and accessible
- Positive experience with service (e.g. staff friendly, information provided)
- Staff seem to be well trained and knowledgeable
- Reasonable access/wait times

Survey respondents were asked to provide comments as to why they were not satisfied with the health services listed. The comments were themed and the following themes were identified:

- Ambulance directed to Bonne Bay Health Centre and not Corner Brook
- Long response times for ambulance services
- Limited access to services (providers not available, service sporadic, hard to get an appointment i.e. physician, physiotherapist)
- Limited outreach in the community from health care professionals (i.e. dietitian, mental health and addictions)
- Lack of follow-up by provider/inconsistent care/high turn over
- Limited access to long term care and personal care homes
- Limited access to telehealth (Woody Point Clinic)
- Distance required to travel to access services

Survey respondents were also asked to indicate if there were any health services that they had/have trouble getting and 56.1% reported yes and 43.9% reported no. The health services that respondents reported having trouble getting were:

- Physician/Family Doctor
- Specialists
- Dentist
- Vision Care
- Physiotherapy
- Mental Health and Addictions Counseling

- Home Support
- Long-term care
- Pharmacy
- Massage/Acupuncture
- International Travel Immunizations

Respondents were asked what prevented them from getting these services and were provided with a list of options including an “other” option. Approximately 7% of respondents reported that they did not know the service was available, 4.3% reported transportation related issues, 17.4% reported wait time for service, 13% reported that the service was too difficult to arrange, and 0% reported that they were not ready or prepared to get this service. Nearly 52% reported “other” and the following categories were identified:

- Doctor not available
- No doctor at the rural medical clinic
- Doctor not accepting new clients
- Wait times too long
- Referrals not given to other providers as needed
- Service not available in the area
- Distance of travel too great

Survey respondents were asked to report the top three health problems in their communities. The top three problems identified were: cancer (44.9%), addictions (25.5%), and mental health (23.5%) and diabetes (23.5%) which were rated the same. Refer to Table 5 for list of potential health problems and percentages and frequencies of respondents who indicated that they were most concerned about them.

Table 5 - Frequencies and Percentages of Health Problems

<b>Health Problems</b>	<b>Percentages (%)</b>	<b>Frequencies (N)</b>
Addictions	25.5	25
Arthritis	6.1	6
Cancer	44.9	44
Chronic pain	5.1	5
Diabetes	23.5	23
Eating disorders	3.1	3
Heart disease	22.4	22
High blood pressure	15.3	15
HIV/Aids	0	0
Kidney disease	2	2
Lack of physical activity	19.4	19
Lung disease	3.1	3
Mental health	23.5	23

<b>Health Problems</b>	<b>Percentages (%)</b>	<b>Frequencies (N)</b>
Overweight/obesity	17.3	17
Sexually transmitted infections	4.1	4
Smoking	14.3	14
Stroke	4.1	4
Suicide	1	1
Unhealthy eating habits	16.3	16
Other	2	2

In the other category, respondents reported:

- Aging concerns
- Concerned about all of the health problems listed

When asked how the community helps deal with these challenges, comments included:

- A strong sense of community/support from family and friends
- Volunteer organizations support community activities (e.g. Kinsmen, the Legion, Lions Club, Firettes, ACWs, etc.)
- Community fundraisers to help those in need (medical treatments/cost of travel)
- Community partnerships between volunteer organizations, community groups, Western Health, and Schools – increase awareness/health promotion activities
- Community programs/activities focused on lifestyle, healthy eating and physical activity (e.g. community gardens, community kitchens, yoga, youth recreation programs, Improving Healthy My Way program etc.)
- Wellness workshops and one off community events
- Smoke free buildings (e.g. restaurants, community centers)
- Some respondents reported that the community doesn't do anything to help.

The final question in this section was “Where do you go for routine healthcare?” and included a list of options. Nearly 69% reported family physician, 14.3% reported hospital emergency department/ health center, 11.2% reported nurse practitioner, 11.2% reported I do not receive routine healthcare, and 25.5% reported other. Respondents reported the following in the “other” category:

- I have no health issues
- Majority of respondents specified Family Physician out of area (Deer Lake and Corner Brook)

## Health Information

Survey respondents were asked where they get their health related information. The top three sources were: physicians (62.2%), the internet (60.2%), and the pharmacy (34.7%). Refer to Table 6 for percentages and frequencies of sources selected. Respondents could report other sources in the “other” category. Responses included:

- Phone
- Self - personal knowledge/skill/training

Table 6 - Percentages and Frequencies of Sources Selected

Sources	Percentages (%)	Frequencies (N)
Internet	60.2	59
Facebook or Twitter	8.2	8
Other social media	3.1	3
Physicians	62.2	61
Community Health Nurse (e.g., Public Health Nurse or Community Support Nursing)	33.7	33
Nurse practitioner	12.2	12
Pharmacy	34.7	34
Friends/Family	26.5	26
Library	4.1	4
Newspaper/magazine	2	2
Radio/television	12.2	12
Church group	0	0
School/university/college	3.1	3
HealthLine	13.3	13
Other	5.1	5

When respondents were asked to report if the Western Health website provides the health related information that they need, 19.4% responded yes, 16.1% responded no, 29% responded that they did not know that Western Health had a website, and 35.5% reported that they have not been to the Western Health website. Respondents indicated that they would like the following information to be on the Western Health website:

- Health Promotion Information
  - A list of Health promotion materials/resources with descriptions to support community groups who wish to do health promotion
  - How to access health promotion resources and funding
  - Links to available on-line health promotion resources

- Service information
  - Services that are available and where they are available
  - A listing of Doctors/Family Practices and how to reach them/if they are accepting new patients
  - How to access home care/what a home care worker is allowed to do
  - What supports groups or services are available and how to get in touch with them
  
- Health Information
  - Information on diet, physical activity, diabetes, etc.
  - Healthy recipes
  - Healthy living tips
  - Information on head lice – treatment and home cleaning
  - Regulations around privacy and confidentiality
  - How to access your own health records

## **Overall Comments**

Respondents were also asked to provide other comments related to community health needs and resources in the community. The comments were themed and the following themes were identified:

- Services need to be closer to home
- Increased awareness of services available in the area
- Increase awareness of when services/traveling clinics are available
- More consistent service (physician) provided at rural medical clinics
- Ensure all staff are respectful to the public and set a good example in the community

## Conclusion

The CHNRA survey is an important step in determining the needs and resources of the communities in the Western region. The survey included qualitative and quantitative questions, providing residents with an opportunity to express their views of the health and community services offered in the region. A total of 98 respondents from the Bonne Bay area completed the survey and demographic information such as age, gender, and ethnicity were collected. The overall findings of the survey indicated that residents have concerns such as access to health services including mental health and addictions, physicians, specialists, and other necessary services. Themes identified from the comments also indicated they are not satisfied with services for seniors, child care services, recreational facilities and food banks. However, respondents also indicated many positives of living in the Bonne Bay area such as supportive communities, strong volunteer networks, positive community spirit, and good quality health services. The following are additional highlights of the results from the CHNRA survey:

### Demographics:

- 98 surveys were completed in the Bonne Bay area (69 completed electronically, and 29 completed on paper).
- 70.4% of the respondents were female, 27.6% were male, and 2% did not report their gender.
- 94.9% of respondents were white/Caucasian and 5.1% were Aboriginal.
- The majority of respondents to the community survey were age 56 and over (58%)
- 55% of survey respondents reported they lived in their community for more than 21 years.

### Community Services:

- Respondents were most satisfied with education (61.7%) and emergency services (59.8%).
- According to survey results the majority of respondents that use or require community services such as child care/day care (62.1%), children and youth programs (72.2%), grocery stores (76.5%), public transportation (60.9%), and food banks (92.7%) were not satisfied with these services.
- Survey respondents were also asked to indicate if there were any community services that they had/have trouble getting and 55.2% reported yes, and 44.8% reported no. Some of the services respondents indicated they were having trouble getting include pharmacy and blood collection, emergency ambulance services, child care, family resource center programs, grocery stores, public transportation, and services that offer support for seniors living in their own homes.
- The top three community concerns identified were alcohol and/drug abuse (40.8%), drinking and driving (28.6%), and care for the older person (28.6%).
- When asked how the community helps to deal with challenges, the majority of respondents reported that there is a strong sense of community, many volunteer groups and organizations, and strong community partnerships.

### Health Services:

- Respondents were most satisfied with immunization services (100%) and least satisfied with Meals on Wheels type services (95.2%) and supportive housing (88%).
- In addition, survey data indicated a high level of dissatisfaction with health services affecting the older adult/senior population, such as lack of access to respite services (80%), supportive housing (88%), long-term care (80%), vision services (70.7%), and community supports (69%).
- Survey respondents were also asked to indicate if there were any health services that they had/have trouble getting and 56.1% reported yes and 43.9% reported no. Some of the services respondents indicated they were having trouble getting include physician/family doctor, specialist, vision care, dentist, mental health and addictions counseling, home support, and long-term care.
- The top three health problems identified were: cancer (44.9%), addictions (25.5%), and mental health (23.5%) and diabetes (23.5%) were rated the same.
- Heart disease (22.4%) and high blood pressure (15.3%) also ranked high as health concerns, as well as, lack of physical activity (19.4%), unhealthy eating habits (16.3%), and smoking (14.3%).
- Survey respondents reported the following sources for routine healthcare: family physician (68.4%), hospital emergency department/health center (14.3%), nurse practitioner (11.2%), I do not receive routine healthcare (11.2%), and 25.5% reported other.

### Health Information:

- Survey respondents were asked where they get their health related information. The top three sources were: physicians (62.2%), the internet (60.2%), and the pharmacy (34.7%).
- When respondents were asked to report if the Western Health website provides the health related information that they need, 19.4% responded yes, 16.1% responded no, 29% responded that they did not know that Western Health had a website, and 35.5% reported that they have not been to the Western Health website.

Data obtained from the CHNRA for each PHC area will support planning both at the local PHC level as well as organizational strategic, branch, and program planning. While the CHNRA survey results are only one piece of the overall CHNRA process, the survey results will be used by service providers/programs, community advisory committees, and primary health care teams, to determine key priorities and to inform planning. Results will also be shared with relevant community partners to inform their planning and service delivery processes.

Moving forward, the next step of the CHNRA process will be to conduct focus groups to validate and strengthen survey results.

## **Appendix A**

### **Community Health Needs and Resources Assessment Survey**

# Community Health Needs and Resources Assessment Survey

Western Health is conducting a survey about the health needs and resources of our communities to help us plan our programs and services. We will be asking for your thoughts about health and community services in your area.

Participation in the survey is voluntary and will not affect your health care. It is anonymous - participants cannot be identified. Any potentially identifying information that you provide will be excluded from the report.

All comments and recommendations will be summarized in a report. This report will be posted on the Western Health website. The survey should take about 15 minutes to complete. The deadline for completing the survey is February 29, 2016.

If you have any questions, or you would like to discuss this survey further, please contact Darlene Welsh (Regional Director Planning and Research) by calling (709) 634-4350 or e-mailing [darlenewelsh@westernhealth.nl.ca](mailto:darlenewelsh@westernhealth.nl.ca).

## Demographics

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### 1. What is your age?

*Mark only one oval.*

- 16-20
- 21-25
- 26-30
- 31-35
- 36-40
- 41-45
- 46-50
- 51-55
- 56-60
- 61-65
- 66-70
- 71-75
- 76+

### 2. What is your gender?

.....

**3. What is your race or ethnicity?**

*Mark only one oval.*

- White/Caucasian
- Aboriginal
- Other: \_\_\_\_\_

**4. What is your primary language?**

*Mark only one oval.*

- English
- French
- Other: \_\_\_\_\_

**5. What community do you live in?**

\_\_\_\_\_

**6. How many years have you lived in this community?**

*Mark only one oval.*

- less than one year
- 1-5 years
- 6-20 years
- 21+ years

## Community Services

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**7. For each of the following community services that you USE or REQUIRE, please indicate if you are satisfied or not satisfied with that service. If you do not use or require the service, skip and go to the next service.**

*Mark only one oval per row.*

	Satisfied	Not satisfied
Education	<input type="radio"/>	<input type="radio"/>
Child care/day care	<input type="radio"/>	<input type="radio"/>
Children/youth programs	<input type="radio"/>	<input type="radio"/>
Seniors programs (65+)	<input type="radio"/>	<input type="radio"/>
Grocery stores	<input type="radio"/>	<input type="radio"/>
Public transportation (e.g., buses, taxis)	<input type="radio"/>	<input type="radio"/>
Recreation programs (e.g., soccer, hockey, walking trails, darts)	<input type="radio"/>	<input type="radio"/>
Food bank	<input type="radio"/>	<input type="radio"/>
Environmental services (e.g., recycling, water, sewer)	<input type="radio"/>	<input type="radio"/>
Emergency services (e.g., police, fire department, emergency preparedness)	<input type="radio"/>	<input type="radio"/>

8. Please provide comments about why you are satisfied with the community services listed above.

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9. Please provide comments about why you are not satisfied with the community services listed above.

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10. Are there any community services that you had/have trouble getting?

*Mark only one oval.*

- yes
- no

11. What are they?

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12. What prevented you from getting these services?

*Tick all that apply.*

- Did not know if service was available
- Transportation related issues
- Wait time for service
- Too difficult to arrange
- I was not ready or prepared to get this service
- Other: .....

**13. Please select the 3 problems you are most concerned about in your community.**

*Tick all that apply.*

- Absence of an age/senior friendly environment
- Alcohol and/or drug abuse
- Bullying
- Care of people with disabilities
- Care of the older person
- Child abuse/neglect
- Crime (including vandalism)
- Distracted driving
- Drinking and driving
- Environment
- Gambling
- Homelessness (e.g., couch surfing)
- Illiteracy
- Issues with day care
- Issues with the education system
- Lack of access for people with disabilities (e.g., accessible buildings, wheelchair ramps, sidewalks in disrepair)
- Loneliness
- Outmigration
- Poor housing conditions
- Poor parenting skills
- Poverty
- Risks for injury on the job
- Suicide
- Unemployment
- Unplanned pregnancy
- Violence in the community
- Violence in the home
- Young people in trouble with the law
- Other: \_\_\_\_\_

**14. How does your community help deal with these challenges? (e.g., community groups, community belonging)**

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15. For each of the following health services that you **USE** or **REQUIRE**, please indicate if you are satisfied or not satisfied with that service. If you do not use or require the service, skip and go to the next service.

Mark only one oval per row.

	Satisfied	Not satisfied
Mental health and addiction services (including counselling services)	<input type="radio"/>	<input type="radio"/>
Ambulance services	<input type="radio"/>	<input type="radio"/>
Emergency department services	<input type="radio"/>	<input type="radio"/>
Dental care services	<input type="radio"/>	<input type="radio"/>
Pharmacy services	<input type="radio"/>	<input type="radio"/>
Immunization services	<input type="radio"/>	<input type="radio"/>
Family doctor services	<input type="radio"/>	<input type="radio"/>
Specialist services (e.g., surgeon, internists)	<input type="radio"/>	<input type="radio"/>
Nurse practitioner services	<input type="radio"/>	<input type="radio"/>
Nutrition services (e.g., dietitians)	<input type="radio"/>	<input type="radio"/>
Respiratory services	<input type="radio"/>	<input type="radio"/>
Rehabilitation services (e.g., physiotherapy, occupational therapy, speech/language, and social work)	<input type="radio"/>	<input type="radio"/>
Diagnostic services (e.g., x-ray, blood collection)	<input type="radio"/>	<input type="radio"/>
Vision services	<input type="radio"/>	<input type="radio"/>
Women's wellness (e.g., cervical screening, breast screening)	<input type="radio"/>	<input type="radio"/>
Home support services/Home care	<input type="radio"/>	<input type="radio"/>
Respite services (e.g., adult day support programs, children's respite services)	<input type="radio"/>	<input type="radio"/>
Meals on wheels type services	<input type="radio"/>	<input type="radio"/>
Supportive housing (e.g., personal care homes, alternate family care)	<input type="radio"/>	<input type="radio"/>
Long term care	<input type="radio"/>	<input type="radio"/>
Services for pregnant mothers/new mothers/babies	<input type="radio"/>	<input type="radio"/>
Services for people with chronic diseases (disease longer than 3 months, e.g., asthma, diabetes, cancer)	<input type="radio"/>	<input type="radio"/>
Intervention services (including services for people with developmental and physical disabilities and autism)	<input type="radio"/>	<input type="radio"/>
Community supports (services for seniors and adults with intellectual and physical disabilities)	<input type="radio"/>	<input type="radio"/>
HealthLine	<input type="radio"/>	<input type="radio"/>
Telehealth services	<input type="radio"/>	<input type="radio"/>
School health services (e.g., public health nurses, immunization, sexually transmitted infections, stress management, health promotion)	<input type="radio"/>	<input type="radio"/>

16. Please provide comments about why you are satisfied with the health services listed above.

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17. Please provide comments about why you are not satisfied with the health services listed above.

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18. Are there any health services that you had/have trouble getting?

*Mark only one oval.*

- Yes  
 No

19. What are they?

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20. What prevented you from getting these services?

*Tick all that apply.*

- Did not know if service was available  
 Transportation related issues  
 Wait time for service  
 Too difficult to arrange  
 I was not ready or prepared to get this service  
 Other: \_\_\_\_\_

21. Please select the 3 health problems you are most concerned about in your community.

*Tick all that apply.*

- Addictions
- Arthritis
- Cancer
- Chronic pain
- Diabetes
- Eating disorders
- Heart disease
- High blood pressure
- HIV/AIDS
- Kidney disease
- Lack of physical activity
- Lung disease
- Mental health
- Overweight/obesity
- Sexually transmitted infections
- Smoking
- Stroke
- Suicide
- Unhealthy eating habits
- Other: \_\_\_\_\_

22. How does your community help deal with these health challenges? (e.g., community groups, community belonging)

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23. Where do you go for routine healthcare?

*Tick all that apply.*

- Family physician
- Hospital emergency department/health centre
- Nurse practitioner
- I do not receive routine healthcare
- Other: \_\_\_\_\_

**24. Where do you get your health related information?**

*Tick all that apply.*

- Internet
- Facebook or Twitter
- Other social media
- Physicians
- Community health nurse (e.g., public health nurse or community support nurse)
- Nurse practitioner
- Pharmacy
- Friends/family
- Library
- Newspaper/magazine
- Radio/television
- Church group
- School/university/college
- Healthline
- Other: \_\_\_\_\_

**25. Does the Western Health website provide you with the health related information that you need?**

*Mark only one oval.*

- Yes
- No
- I did not know that Western Health had a website
- I have not been to the Western Health website

**26. What types of information would you like to see on the Western Health website?**

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**Overall Comments**

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27. Please provide any other comments that relate to community health needs and resources in your community.

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**Thank you.**

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