

**Regional Mental Health and Addictions
Client/Patient Experience Survey Results
2019-2020**



**Western
Health**

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In collaboration with:
Mental Health and Addictions
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Background

Survey Instrument

The Ontario Perception of Care Tool for Mental Health and Addictions (OPOC-MHA) was utilized in the evaluation of Mental Health and Addictions services at Western Health (Appendix A). The OPOC-MHA was developed at the Centre for Addiction and Mental Health, with support from Health Canada's Drug Treatment Funding Program and the Ontario Ministry of Health and Long-Term Care. This survey was reviewed and approved by Accreditation Canada. The OPOC-MHA meets the four client experience dimensions and Accreditation Canada's requirements for a comprehensive assessment of client experience.

Participants

The survey was promoted to all clients and patients receiving Mental Health and Addictions services at Western Health. This includes Mental Health Services, Addictions Services, Blomidon Place, Humberwood Treatment Centre, Assertive Community Treatment Team (ACTT), Westlane Recycling Program, Case Management Services, Early Psychosis Program, Mental Health Unit at Western Memorial Regional Hospital, and the Psychiatry Outpatient Clinic.

Method

The survey was available to complete electronically through Google Forms or by paper, from October 15, 2019 to January 31, 2020. Mental Health and Addictions staff were asked to discuss the survey with their clients and provide a survey information letter. The letter contained information about the survey as well as instructions on how to complete the survey electronically. Clients also had the option of completing a paper-based survey if they preferred.

Privacy, Confidentiality, Data Security

Privacy and confidentiality were achieved as all participants voluntarily and anonymously completed the survey electronically, and names were not provided. Any paper-based surveys that were completed were placed in a sealed envelope and forwarded to the Regional Manager Research and Evaluation. All survey data was stored on a password protected computer used by Quality staff.

Data Analysis

When the survey closed, all data was compiled, transferred, and analyzed using Statistical Package for Social Sciences (SPSS). As recommended in the OPOC-MHA manual, all missing and not applicable responses were excluded from data analysis. Statistics were calculated regionally. The following report provides a regional summary of survey results, and across all program areas.

Results

Demographics

A total of 157 surveys were completed. Respondents were asked to indicate which Mental Health and Addictions program area they attend (Table 1), and the majority of respondents reported that they received Mental Health Counselling (22.9%).

Table 1. Survey Responses by Program Area

Program Area	Percent (%)	Frequency
FACT	5.7	9
Mental Health Counselling	22.9	36
Addictions Services	1.9	3
Blomidon Place	13.4	21
Humberwood	7.6	12
West Lane	5.7	9
Mental Health Unit	11.5	18
Psychiatry Outpatient	15.9	25
Doorways	4.5	7
Opioid Dependency Treatment (ODT)	2.5	4
I don't know	7.6	12
Did not report	0.6	1

Respondents were asked about their gender; 61.1% reported being female, 33.8% male, 1.9% other, 1.9 trans- female to male, and 1.3% reported trans- male to female.

Respondents were also asked to report their age, and the percentage and frequency of responses for each age group are listed in Table 2. The majority (23.6%) of respondents were in the 35-44 age group.

Table 2. Percentage and Frequency of Respondents' Age Groups

Age Group	Percent (%)	Frequency
12-18	10.8	17
19-25	8.9	14
26-34	17.2	27
35-44	23.6	37
45-54	19.1	30
55-64	15.9	25
65+	3.8	6
Did not report	0.6	1

When respondents were asked to indicate their mother tongue; 99.4% reported English, and 0.6% reported French. Respondents were also asked in what language they prefer to receive health services and 96.8% reported English, and 3.2% did not report.

When respondents were asked to indicate their race or ethnicity; 86% reported being white/Caucasian, 13.4% Aboriginal, and 0.6% African American. The survey included a question about sexual orientation and the majority of respondents (66.9%) reported being

heterosexual. See Table 3 for the percent and frequency of responses for each response option.

Table 3. Percentage and Frequency of Respondents' Sexual Orientation

Sexual Orientation	Percent (%)	Frequency
Asexual or non-sexual	7.0	11
Bisexual	5.1	8
Gay	2.5	4
Heterosexual	66.9	105
Lesbian	0.6	1
Not sure or questioning	6.4	10
Two-spirited	1.3	2
Other	1.9	3
Did not report	8.3	13

Respondents were asked if they were required, mandated, or pressured to attend treatment services and supports; 83.4% reported no, 15.3% reported yes, and 1.2% did not report. The 15.3% who indicated they were required, mandated or pressured to attend treatment were asked to indicate the reason (see Table 4).

Table 4. Percentage and Frequency of Reasons Why Respondents Attend Services and Supports

Reason for Attending Services	Percent (%)	Frequency
Medical certificate	1.3	2
Legal requirement	0	0
Child welfare authority	0.6	1
Condition/pressure from school	1.9	3
Condition/pressure from employment	0	0
Condition/pressure from family	3.2	5
Community Treatment Order	0.6	1
Don't know	1.3	2
Other	4.5	7
Did not report	86.6	136

Respondents were asked to indicate how far along they are in the treatment process and just under half (45.8%) reported that the treatment services/support is in process (see Table 5).

Table 5. Percentage and Frequency of Respondents' Treatment Progress

Reason for Attending Services	Percent (%)	Frequency
Just getting started	12.7	20
Treatment services/support is in process	45.9	72
Completed or almost completed	15.9	25
Completed but still receiving some services	12.7	20
Left early	3.2	5
Other	9.6	15
Did not report	0	0

Lastly, respondents were asked if they received help completing the questionnaire; 82.2% reported no, 14.6% reported yes, and 3.2% did not report. Any support needed to complete the questionnaire included help in reading the survey questions and writing answers due to visual impairment and literacy difficulties.

Access/Entry to Services

Respondents were asked to indicate the extent to which they agree or disagree with statements regarding access/entry to services (see Table 6). The majority of respondents indicated that they strongly agreed or agreed that the services were at a convenient location (77.4%), that they were seen on time (84.6%), that they felt welcome (92.1%), and that they received enough information about the programs and services (83%). Just over 68% of respondents strongly agree or agree that the wait time was reasonable, and 71.9% strongly agree or agree that services were at a convenient time.

Table 6. Level of Agreement with Statements Regarding Access/Entry to Services

Statement	Strongly Disagree % (N)	Disagree % (N)	Agree % (N)	Strongly Agree % (N)
The wait time for services was reasonable for me	14.8 (23)	16.8 (26)	32.9 (51)	35.5 (55)
When I first started looking for help, services were available at times that were convenient for me	15.0 (23)	13.1 (20)	41.8 (64)	30.1 (46)
The location of services was convenient for me	7.1 (11)	15.5 (24)	47.1 (73)	30.3 (47)
I was seen on time when I had an appointment	4.7 (7)	10.7 (16)	41.3 (62)	43.3 (65)
I felt welcome from the start	3.3 (5)	4.6 (7)	36.8 (56)	55.3 (84)
I received enough information about the programs and services available to me	5.2(8)	11.8 (18)	46.4 (71)	36.6 (56)

Respondents were asked to provide comments about access/entry to services and the following themes were identified from the responses:

Long wait time

Many respondents commented that the wait time for service is too long.

Satisfaction with services

Many respondents provided positive comments related to services such as the reliability, accommodation, and support of program staff.

Services Provided

Participants were asked to indicate the extent to which they agree or disagree with statements regarding services provided (see Table 7). Participants strongly agreed or agreed that they had a good understanding of their treatment plan (86.4%), that they and staff agreed on their treatment plan (91.5%), that responses to their crises or urgent needs were provided when needed (77.8%), and that they received clear information about their medication (78.5%). Just over 73% of respondents strongly agreed or agreed that they were referred or had access to other services when needed, including alternative approaches.

Table 7. Level of Agreement with Statements Regarding Services Provided

Statement	Strongly Disagree % (N)	Disagree % (N)	Agree % (N)	Strongly Agree % (N)
I had a good understanding of my treatment services and support plan	4.5 (7)	9.0 (14)	53.5 (83)	32.9(51)
Staff and I agreed on my treatment services and support plan	3.2 (5)	5.2 (8)	53.2 (82)	38.3 (59)
Responses to my crises or urgent needs were provided when needed.	10.7 (15)	11.4 (16)	40.7 (57)	37.1 (52)
I received clear information about my medication	5.2 (6)	16.4 (19)	46.6 (54)	31.9 (37)
I was referred or had access to other services when needed, including alternative approaches	10.4 (14)	16.4 (22)	46.3 (62)	26.9 (36)

Survey participants were asked to comment on services provided. The following theme was identified from the responses:

Quality service and staff

Respondent comments indicated they are very satisfied with the services they received. Many respondents also reported that the therapist, support worker, and/or staff were very helpful and understanding.

Participation and Rights

To assess client participation and rights, survey respondents were asked to indicate the extent to which they agree or disagree with statements about their participation and rights (see Table 8). The majority of respondents reported that they were happy about their participation and rights; respondents indicated they strongly agreed or agreed that they are involved as much they want to be in their treatment (89.6%), that they understand they can discuss options to participate in certain activities (85.5%), that they were assured their personal information was kept confidential (94%), and that they felt comfortable asking questions about their treatment including medication (90%). When respondents were asked if they knew how to make a formal complaint to this organization, 68.2% of respondents strongly agreed or agreed.

Table 8. Level of Agreement with Statements Regarding Participation/Rights

Statement	Strongly Disagree % (N)	Disagree % (N)	Agree % (N)	Strongly Agree % (N)
I was involved as much as I wanted to be in decisions about my treatment services and supports	2.6 (4)	7.8 (12)	51.9 (80)	37.7 (58)
I understood I could discuss options to participate in certain activities	3.4 (5)	11.0 (16)	51.0 (74)	34.5 (50)
I was assured my personal information was kept confidential	1.9 (3)	3.9 (6)	40.1 (61)	53.9 (82)
I felt comfortable asking questions about my treatment services and support, including medication	2.0 (3)	8.1 (12)	47.7 (71)	42.3 (63)
If I had a serious concern, I know how to make a formal complaint to this organization	12.3 (19)	18.8 (29)	38.3 (59)	29.9 (46)

Respondents were asked to provide comments about their participation and rights. There were several individual comments; however, there were no identifiable themes.

Therapists/Support Workers/Staff

Survey respondents were asked to indicate their level of agreement with statements regarding the therapists, support workers, and staff (see Table 9). Overall, respondents rated statements about the therapists, support workers, and staff positively; 92.6% of respondents strongly agreed or agreed that staff are knowledgeable and competent/qualified, 94.8% strongly agreed or agreed that they were treated with respect, 94.2% strongly agreed or agreed that staff were sensitive to their cultural needs, 84.7% strongly agreed or agreed staff believed they could change and grow, and 84.7% strongly agreed or agreed that staff understood and responded to their needs and concerns.

Table 9. Level of Agreement with Statements Regarding Therapists/Support Workers/Staff

Statement	Strongly Disagree % (N)	Disagree % (N)	Agree % (N)	Strongly Agree % (N)
I found staff knowledgeable and competent/qualified	2.0 (3)	5.4 (8)	43.6 (65)	49.0 (73)
I was treated with respect by program staff	2.6 (4)	2.6 (4)	44.1 (67)	50.7 (77)
Staff were sensitive to my cultural needs	2.3 (2)	3.4 (3)	44.8 (39)	49.4(43)
Staff believed I could change and grow	1.4 (2)	5.6 (8)	38.7 (58)	46.0 (69)
Staff understood and responded to my needs and concerns	4.7 (7)	10.7 (16)	38.7 (58)	46.0 (69)

Respondents were given the opportunity to provide comments about the therapists, support workers, or staff. The following themes were identified:

Excellent staff

Many of the survey respondents reported that they feel staff are caring, understanding, and very helpful.

Environment

To assess environment, survey respondents were asked to indicate the extent to which they agree or disagree with statements related to their treatment environment (see Table 10). Respondents generally rated the environment positively; 85.4% strongly agreed or agreed that the facility is welcoming, non-discriminating, and comfortable, 93.4% strongly agreed or agreed that the program space is clean and well maintained, 93.9% strongly agreed or agreed that they were given space when discussing personal issues with staff, 86.9% strongly agreed or agreed that they felt safe in the facility at all times, and 79.8% strongly agreed or agreed that the program accommodated their needs related to mobility, hearing, vision, and learning.

Table 10. Level of Agreement with Statements Regarding Environment

Statement	Strongly Disagree % (N)	Disagree % (N)	Agree % (N)	Strongly Agree % (N)
Overall, I found the facility welcome, non-discriminating, and comfortable	6.7 (10)	8.0 (12)	46.7 (70)	38.7 (58)
Overall, I found the program space clean and well maintained	2.0 (3)	4.7 (7)	48.7 (73)	44.7 (67)
I was given a private space when discussing personal issues with staff	1.9 (3)	4.1 (6)	46.3 (68)	47.6 (70)
I felt safe in the facility at all times	4.8 (7)	8.3 (12)	44.8 (65)	42.1 (61)
The program accommodated my needs related to mobility, hearing, vision, learning, etc.	4.8 (6)	5.6 (7)	42.7 (53)	37.1 (46)

There were several individual comments; however, there were no identifiable themes.

Discharge or Finishing the Program/Treatment

Respondents were asked to indicate the extent to which they agree or disagree with statements regarding discharge or finish the program/treatment (see Table 11). Participants strongly agreed or agreed that staff helped them develop a plan for when they finish the program/treatment (73.3%), that they have a plan that will meet their needs after they finish the program/treatment (74.5%), and that staff helped them identify where to get support after they finish the program/treatment (72.7%).

Table 11. Level of Agreement with Statements Regarding Discharge or Finishing the Program/Treatment

Statement	Strongly Disagree % (N)	Disagree % (N)	Agree % (N)	Strongly Agree % (N)
Staff helped me develop a plan for when I finish the program/treatment	11.7 (14)	15.0 (18)	45.8 (55)	27.5 (33)
I have a plan that will meet my needs after I finish the program treatment	9.6 (11)	15.8 (18)	45.6 (52)	28.9 (33)
Staff helped me identify where to get support after I finish the program/treatment	10.3 (12)	17.1 (20)	41.9 (49)	30.8 (36)

Respondents were asked to comment on discharge and finishing the program/treatment. Most responses indicated treatment is still ongoing but that they look forward to being discharged or finishing treatment.

Overall Experience

The survey participants were given the opportunity to rate their overall experience by indicating the extent to which they agree or disagree with statements related to their overall care (see Table 12). Many respondents were satisfied with their overall experience since 87.7% of respondents strongly agreed or agreed that the services they received have helped them deal with life’s challenges more effectively, 82% strongly agreed or agreed that the services provided are of high quality, and 87.4% strongly agreed or agreed they would recommend the services to a friend in need.

Table 12. Level of Agreement with Statements Regarding Overall Experience

Statement	Strongly Disagree % (N)	Disagree % (N)	Agree % (N)	Strongly Agree % (N)
The services I have received have helped me deal more effectively with my life’s challenges	6.2 (9)	6.2 (9)	47.3 (69)	40.4 (59)
I think the services provided here are of high quality	6.0 (9)	12.0 (18)	39.3 (59)	42.7 (64)
If a friend were in need of similar help I would recommend this service.	7.3 (11)	5.3 (8)	34.7 (52)	52.7 (79)

Survey participants were given the opportunity to comment on their overall experience. There were several individual comments; however, there were no identifiable themes.

Residential/Inpatient Program

All survey participants were asked if they are receiving services in a residential or inpatient program and 70.1% reported no, 20.4% reported yes, and 9.6% did not report. The 20.4% of respondents that reported yes were directed to an additional set of questions where they were asked to indicate the extent to which they agree or disagree with statements regarding their residential or inpatient program (see Table 13). The majority of respondents were satisfied with their residential or inpatient program since 94.8% strongly agreed or agreed that the rules and guidelines concerning contact with family and friend was appropriate to their needs, the layout of the facility was suitable for visits with family and friends (94.1%), the area in and around their room was comfortable

for sleeping (85.7%), the quality of the food was acceptable (81.8%), and their special dietary needs were met (83.3%). Just over 66% of respondents also strongly agreed or agreed that there were enough activities of interest to them during free time.

Table 13. Level of Agreement with Statements Regarding Residential or Inpatient Program

Statement	Strongly Disagree % (N)	Disagree % (N)	Agree % (N)	Strongly Agree % (N)
There were enough activities of interest to me during free time	6.7 (2)	26.7 (8)	50.0 (15)	16.7 (5)
Rules or guidelines concerning my contact with my family and friends were appropriate to my needs	0 (0)	5.3 (1)	73.7 (14)	21.1 (4)
The layout of the facility was suitable for visits with my family and friends	0 (0)	5.9 (1)	76.5 (13)	17.6 (3)
The area in and around my room was comfortable for sleeping	0 (0)	14.3 (4)	60.7 (17)	25.0 (7)
The quality of the food was acceptable	9.1 (1)	9.1 (1)	63.6 (7)	18.2 (2)
My special dietary needs were met	8.3 (2)	8.3 (2)	58.3 (14)	25.0 (6)

Respondents were asked to provide comments on the residential or inpatient program but no themes were identified due to the low number of responses.

Overall Comments

Survey respondents were given the opportunity to comment on aspects of their overall experience with the treatment/support services that were particularly helpful and the following themes were identified:

Supportive staff

Many respondents commented that the most helpful aspect of their treatment is the support from therapists and support workers. Respondents stated that the therapists and support workers are helpful in many ways such as providing an opportunity for respondents to express their feelings, listening, providing meaningful feedback, being professional, and very understanding.

Respondents were asked to comment on aspects of their experience with their overall treatment/support service same comment that they felt could be improved and the following theme was identified:

Access

The majority of comments were related to improvements in access to services such as wait times for an appointment after referral, and shortage of physicians. Some suggestions for improvement from the comments included expanding and promoting the Doorways program.

Opportunities for Improvement

Overall, the results of the Mental Health and Addictions Client/Patient Experience Survey were positive. Outcomes of the survey indicate that respondents feel welcome, staff are knowledgeable and competent/qualified, they were treated with respect, program space is clean and well maintained, and respondents would recommend services to a friend in need.

Based on the results of the Mental Health and Addictions Client/Patient Experience Survey, opportunities for improvement were based on the statements where less than 80% of participants strongly agreed or agreed. The following opportunities for improvement are identified for Mental Health and Addictions services at Western Health:

1. Enhance access for clients/patients by reducing wait times, providing convenient appointment times, and convenient locations for services.
2. Ensure response to clients'/patients' crises or urgent needs are provided when needed.
3. Ensure clients/patients receive clear information about their medication
4. Explore ways to promote or refer clients/patients to other services/alternative approaches when needed.
5. Enhance awareness related to Western Health's formal compliments and complaints process so clients/patient know how to make a formal complain to the organization.
6. Ensure all clients/patients are prepared and have a plan for support at the end of their treatment/discharge.
7. Enhance opportunities for leisure activities for patients during free time during residential or inpatient programs.

Appendix A

Ontario Perception of Care Tool for Mental Health and Addictions (OPOC-MHA)

Organization: _____ | | | | | | | |

Program: _____ | | | | | | | |

Ontario Perception of Care Tool for Mental Health and Addictions (OPOC-MHA)

This questionnaire asks about your perceptions of care. This information is being collected to help agencies and programs identify areas of strengths on which to build, and areas for improvement. Your feedback is important and will ultimately help to enhance the overall mental health and substance use system in Ontario.

In terms of services received, which category best describes you?

- Registered client with mental health, substance use, addiction, and/or gambling-related problems
- Registered client who is a family member/significant other/supporter of a person with mental health, substance use, addiction, and/or gambling-related problems

Please note: If you are a family member/significant other/supporter of a person with mental health, substance use, addiction, and/or gambling-related problems, please respond to these questions based on the services **you** have received rather than on the services your family member/friend has received.

The OPOC-MHA was developed at the Centre for Addiction and Mental Health with support from Health Canada's Drug Treatment Funding Program and the Ontario Ministry of Health and Long-Term Care. The OPOC-MHA is free to use but should not be revised or adapted without permission. Questions related to the instrument can be directed to OPOC.MHA@camh.ca. In order to monitor its uptake, agencies/programs that use the OPOC-MHA are asked to email OPOC.MHA@camh.ca. Version 03.2015

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Questionnaire for all Registered Clients

Please indicate the extent to which you agree or disagree with each of the following statements about your treatment/support experience.

	Strongly Disagree	Disagree	Agree	Strongly Agree	Not applicable
Access/Entry to Services					
1. The wait time for services was reasonable for me.	1	2	3	4	N/A
2. When I first started looking for help, services were available at times that were good for me.	1	2	3	4	N/A
3. The location of services was convenient for me.	1	2	3	4	N/A
4. I was seen on time when I had appointments.	1	2	3	4	N/A
5. I felt welcome from the start.	1	2	3	4	N/A
6. I received enough information about the programs and services available to me.	1	2	3	4	N/A

Do you have any comments about access/entry to services?

	Strongly Disagree	Disagree	Agree	Strongly Agree	Not applicable
Services Provided					
7. I had a good understanding of my treatment services and support plan.	1	2	3	4	N/A
8. Staff and I agreed on my treatment services and support plan.	1	2	3	4	N/A
9. Responses to my crises or urgent needs were provided when needed.	1	2	3	4	N/A
10. I received clear information about my medication (i.e., side effects, purpose, etc.)	1	2	3	4	N/A
11. I was referred or had access to other services when needed, including alternative approaches (e.g., exercise, meditation, culturally appropriate approaches).	1	2	3	4	N/A

Do you have any comments about the services provided?

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	Strongly Disagree	Disagree	Agree	Strongly Agree	Not applicable
Participation/Rights					
12. I was involved as much as I wanted to be in decisions about my treatment services and supports.	1	2	3	4	N/A
13. I understood I could discuss options to participate in certain activities.	1	2	3	4	N/A
14. I was assured my personal information was kept confidential.	1	2	3	4	N/A
15. I felt comfortable asking questions about my treatment services and support, including medication.	1	2	3	4	N/A
16. If I had a serious concern, I would know how to make a formal complaint to this organization.	1	2	3	4	N/A

Do you have any comments about participation/rights?

	Strongly Disagree	Disagree	Agree	Strongly Agree	Not applicable
Therapists/Support Workers/Staff					
17. I found staff knowledgeable and competent/qualified.	1	2	3	4	N/A
18. I was treated with respect by program staff.	1	2	3	4	N/A
19. Staff were sensitive to my cultural needs (e.g., religion, language, ethnic background, race).	1	2	3	4	N/A
20. Staff believed I could change and grow.	1	2	3	4	N/A
21. Staff understood and responded to my needs and concerns.	1	2	3	4	N/A

Do you have any comments about the therapists/support workers/staff?

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	Strongly Disagree	Disagree	Agree	Strongly Agree	Not applicable
Environment					
22. Overall, I found the facility welcoming, non-discriminating, and comfortable (e.g., entrance, waiting room, décor, posters, my room if applicable).	1	2	3	4	N/A
23. Overall, I found the program space clean and well maintained (e.g., meeting space, bathroom, and my room if applicable).	1	2	3	4	N/A
24. I was given private space when discussing personal issues with staff.	1	2	3	4	N/A
25. I felt safe in the facility at all times.	1	2	3	4	N/A
26. The program accommodated my needs related to mobility, hearing, vision, and learning, etc.	1	2	3	4	N/A

Do you have any comments about the environment?

	Strongly Disagree	Disagree	Agree	Strongly Agree	Not applicable
Discharge or Finishing the Program/Treatment					
27. Staff helped me develop a plan for when I finish the program/treatment.	1	2	3	4	N/A
28. I have a plan that will meet my needs after I finish the program/treatment.	1	2	3	4	N/A
29. Staff helped me identify where to get support after I finish the program/treatment.	1	2	3	4	N/A

Do you have any comments about discharge or finishing the program/treatment?

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	Strongly Disagree	Disagree	Agree	Strongly Agree	Not applicable
Overall Experience					
30. The services I have received have helped me deal more effectively with my life's challenges.	1	2	3	4	N/A
31. I think the services provided here are of high quality.	1	2	3	4	N/A
32. If a friend were in need of similar help I would recommend this service.	1	2	3	4	N/A

Do you have any comments about the overall experience?

****Please complete this section only if you are receiving services in a residential or inpatient program**

	Strongly Disagree	Disagree	Agree	Strongly Agree	Not applicable
33. There were enough activities of interest to me during free time.	1	2	3	4	N/A
34. Rules or guidelines concerning my contact with my family and friends were appropriate to my needs.	1	2	3	4	N/A
35. The layout of the facility was suitable for visits with my family and friends (e.g., privacy, comfort level).	1	2	3	4	N/A
36. The area in and around my room was comfortable for sleeping (e.g., noise level, lighting).	1	2	3	4	N/A
37. The quality of the food was acceptable.	1	2	3	4	N/A
38. My special dietary needs were met (e.g., diabetic, halal, vegetarian, kosher).	1	2	3	4	N/A

Do you have any comments about the residential or inpatient program?

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The following questions ask for some details about you in order to help organize the information for quality improvement purposes (for example, ensuring services are non-discriminating). **You may answer only the questions that you feel comfortable answering, and you may stop at any time.**

1. What is your gender? (please check one box).

- Male
- Female
- Trans-Male to Female
- Trans-Female to Male
- Other. Please describe: _____

2. What is your age? (please check one box).

- 12 and under
- 13 – 18 years
- 19 – 25 years
- 26 – 34 years
- 35 – 44 years
- 45 – 54 years
- 55 – 64 years
- 65+ years

3. What is your mother tongue?

- English → please go to question 5 below
- French → please go to question 5 below
- Other. Please specify: _____

4. If your mother tongue is neither French nor English, in which of Canada's official languages are you more comfortable?

- English
- French

5. In what language do you prefer to receive health care services?

- English
- French
- Other. Please specify: _____

6. What term do you prefer to use to describe your sexual orientation? (please check one box). *For word definitions, please see the last page of the questionnaire.*

- Asexual or non-sexual
- Bisexual
- Gay
- Heterosexual
- Lesbian
- Not sure or Questioning
- Queer
- Two-spirited
- Other. Please describe: _____

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7. Which population group best describes you? (please check one box and then proceed to the more detailed question below that corresponds to your answer)

- White → please go to question a below
 - First Nations, Métis, Inuit → please go to question b below
 - Asian → please go to question c below
 - Black → please go to question d below
 - Middle Eastern → please go to question e below
 - Latin American → please go to question f below
 - Multiple or mixed. Please describe. _____
- a. If your population group is **White**, which of the following best describes your background?
- North European (e.g., Danish, Norwegian, Swedish)
 - Central/Western European (e.g., English, Welsh, Scottish, Irish, German, Dutch, Czech, Slovak)
 - South European (e.g., Italian, Spanish, Portuguese, Greek, French, Turkish)
 - East European (e.g., Bulgarian, Ukrainian, Polish, Romanian, Russian, Slovenian, Serbian, Croat)
 - North American (e.g., Canadian, French Canadian, American)
 - Other. Please describe. _____
- b. If your population group is **First Nations, Métis, Inuit**, which of the following best describes your background?
- First Nations
 - Métis
 - Inuit
 - Other. Please describe. _____
- c. If your population group is **Asian**, which of the following best describes your background?
- East Asian (e.g., Chinese, Japanese, Korean)
 - South Asian (e.g., Indian, Pakistani, Afghani, Sri Lankan)
 - South-East Asian (e.g., Filipino, Malaysian)
 - Other. Please describe. _____
- d. If your population group is **Black**, which of the following best describes your background?
- Black African (e.g., Ghanaian, Somali, Kenyan, Ethiopian)
 - Black Caribbean (e.g., Trinidadian, Jamaican)
 - Black Canadian/American
 - Other. Please describe. _____
- e. If your population group is **Middle Eastern**, which of the following best describes your background?
- Arab (e.g., Saudi Arabia, Jordan)
 - Northern African (e.g., Egyptian, Libyan)
 - West Asian (e.g., Syrian, Lebanese, Iraqi, Iranian, Israeli)
 - Other. Please describe. _____
- f. If your population group is **Latin American**, which of the following best describes your background?
- South American (e.g., Argentinean, Chilean, Peruvian, Colombian)
 - Central American (e.g., Mexican, Costa Rican)
 - Caribbean
 - Other. Please describe. _____

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8. If you identified yourself as being a family member/significant other/supporter of a person with mental health, substance use, addiction, and/or gambling-related problems, please note your relationship. (Please check one box). If you are not a family member/significant other/supporter, please skip to question 9.

- Parent
- Spouse/Partner/Significant other
- Service Provider/Peer Helper
- Brother/Sister
- Daughter/Son
- Extended family
- Friend
- Other. Please describe _____

9. Were you required, mandated or pressured to attend treatment services and supports?

- Yes.
- No → please go to question 11.

10. Why were you required, mandated or pressured to attend treatment services and supports? (Please check the box that best applies).

- Medical certificate
- Community Treatment Order
- Legal requirement (e.g., court ordered, bail, probation, parole)
- Child welfare authority (e.g., Family court, Children's Aid Society)
- Condition/pressure from employment
- Condition/pressure from school
- Condition/pressure from family
- Other. Please explain. _____
- Don't know

11. How far along are you in the treatment services and support process? (Please check one box).

- Just getting started
- Treatment services/support is in progress
- Completed or almost completed
- Completed but still receiving some services
- Left early
- Other. Please describe _____

12. Please comment on aspects of your experience with this treatment/support service that were particularly helpful to you.

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13. Please comment on aspects of your experience with this treatment/support service that you feel could be improved.

14. Did you receive help completing this questionnaire?

- No.
- Yes. Please comment on support needed: _____

Thank you for your participation!!!

Definition of Terms

Term	Definition
Asexual or non-sexual	A person who is not sexually and/or romantically active, or not sexually and/or romantically attracted to other persons.
Bisexual	A person whose sexual orientation is directed toward men and women, though not necessarily at the same time.
Gay	A person whose primary sexual orientation is to members of the same gender or who identifies as a member of the gay community. This word can refer to men and women, although many women prefer the term "lesbian."
Heterosexual	A person whose primary sexual orientation is to members of the opposite gender. Heterosexual people are often referred to as "straight."
Lesbian	A female whose primary sexual orientation is to other women or who identifies as a member of the lesbian community.
Not sure or Questioning	People who are questioning their gender identity or sexual orientation and who often choose to explore options.
Queer	Traditionally, a derogatory and offensive term for LGBTTTIQ people. Many LGBTTTIQ people have reclaimed this word and use it proudly to describe their identity. Some transsexual and transgendered people identify as queer, others do not.
Two-spirited	An English term coined to reflect specific cultural words used by First Nation and other indigenous peoples for those in their cultures who are gay or lesbian, are transgendered or transsexual, or have multiple gender identities.

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