

Canada Health Infoway
SYSTEM AND USE – e-Reports of Services

This survey asks questions about the process by which you **generate and share clinical reports electronically**. It will take about 5 minutes. Responses will be kept anonymous and confidential. Mandatory questions are indicated with asterisks (*).

Thank you for completing this survey. Your feedback will help your organization and others improve digital health use and service quality.

If you have any questions about the survey, please contact Canada Health Infoway at innovation@infoway-inforoute.ca or your organization.

SAMPLE

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1. Thinking of the system that you use for generating and sharing clinical reports electronically, please indicate your level of agreement or disagreement with each of the following statements. *

	Strongly Agree	Moderately Agree	Moderately Disagree	Strongly Disagree	Not Sure	Not Applicable
a.) The system is an effective way to document services.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
b.) The system is easy to use.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
c.) I had the technical support I needed to use the system.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
d.) The system is well-integrated into my workflow.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

2. In your experience, what are the results of using the system to generate and share clinical reports electronically?

Please indicate your level of agreement or disagreement with each of the following statements below.*

	Strongly Agree	Moderately Agree	Moderately Disagree	Strongly Disagree	Not Sure	Not Applicable
a) By using the system, it takes less time to complete reports.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
b) Using the system improves the quality of care	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
c) Using the system results in fewer lost reports or less time spent retrieving reports	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
d) Overall, reports reach other clinicians more quickly	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
e) Those who receive reports shared through the system think that they are valuable	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

3. How likely are you to recommend the system to other clinicians? *

Definitely Probably Probably Not Definitely not

4. Do you have any other comments you would like to make regarding the system?

5. On average, how many reports do you make weekly? *

30 or more/week
 15 to 29/week

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- 5 to 14/week
- 1 to 4 /week
- Less than 1/week
- Don't know

6. What is your professional role? *

- Nurse.....
- Pharmacist.....
- Physician
- Other (please specify).....

THANK YOU FOR YOUR RESPONSES

SAMPLE