



GNWT Health and Social Services 2004-05 Community Client Feedback

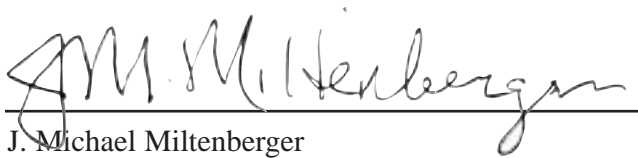
Minister's Report to the Public

Message from the Minister

I am pleased to present the results of the *2004-05 Community Health and Social Services Client Feedback Report*. It represents the commitment made in the *Health and Social Services System Action Plan 2002-2005* to measure consumer satisfaction with health and social services. You have told us that you are satisfied, for the most part, with the health and social services in your community. The completed feedback forms gave considerable recognition of staff competence, professionalism, helpfulness and friendliness.

Your suggestions for improvement are being considered as part of our regular business planning cycle.

I would like to extend my appreciation to everyone who took the time to complete a form and provide us with comments. The Health and Social Services System continues to change in an effort to provide the best possible services within existing resources. Client feedback lets us know how effective our efforts have been and we will continue to invite feedback on an annual basis.



J. Michael Miltenberger
Minister of Health and Social Services

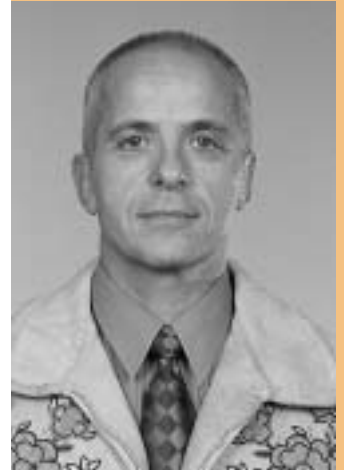


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Summary of Results

In October 2004, the Department of Health and Social Services placed Client Feedback Forms in community health centres and social services offices across the NWT.

The total number of forms returned was 512. This included 487 from communities outside Yellowknife.

Completed forms represented clients who had received services from:

- doctors;
- nurses;
- social workers;
- community health representatives;
- home care workers; and
- wellness workers.

Overall results are as follows:

Overall Friendliness of Staff -

89.3% of respondents were satisfied or very satisfied

Overall Quality of Services -

88.8% of respondents were satisfied or very satisfied

Top three aspects that people like about the health and social services in their community:

- Communication (including friendliness of staff) (26%)
- Quality (includes staff competence) (23%)
- Responsiveness (19%).

Top areas for improvement to the health and social services in their community:

- Accessibility (41%)
- Responsiveness (14%)
- Communication (14%)
- Continuity of Service Provider (13%).

The Health and Social Services System will continue to measure satisfaction and seek feedback in an effort to provide the best possible services with existing resources.

Tłjchq Edàani gondi hoòlj

October 2004 k'e, edzanèk'e azhq naidik'èzhq kò gohłj eyits'q ts'èko k'aawo gınlhtł'èkò, dणे edàgıwq gogedi gha dıı nıhtł'è azhq akq negıwa.

512 nıhtł'è goghògıwa. Sombak'e weèrò ts'ò kòta yagòla gots'q 487 nıhtł'è goghògıwa.

Dıı haanı dणे gıts'aıdı t'à nıhtł'è segıla t'à goghògıwa:

- Naidik'èzhq
- Naidik'èzhq ts'adı
- Ts'èko k'aawo
- Kòta naidik'èzhq xè eghàlada
- Dणे kò segıhwhq eyits'q
- Hotits'enda gha dणे ts'andı

Dणे azhq edàgedı wegondi hót'e:

Azhq gha nındè akq dणे eghàlaede sıı ahsj sògıwq -
89.3% gıgha nezı eyits'q sıı gıgha nezı gedi

Azhq gha nındè, edàani nets'agıdı
88.8% gıgha nezı eyits'q sıı gıgha nezı gedi

Dekòta gots'q Naidik'èzhq naawo eyits'q Ts'èko k'aawo naawo ghq asıı tai gıgha nezı gedi:

- Edàani ełexèts'q gots'ende (dणे sògıwq sıı gedi) (26%)
- Edàani dणे ts'agıdı (edàani dणे ts'agedı) (23%)
- łwhq dणे ts'ahòdı (19%)

Naxikòta gots'q Naidik'èzhq naawo ts'qhk'e eyits'q Ts'èko k'aawo naawo ts'qhk'e akwełò seèdle gha hahòdı.

- Ahsj asıı azhót'à gogha hoòrò (41%)
- Edàani dणे ts'ò nàgogede (14%)
- Ełèts'q gots'ende (14%)
- Edàani ats'q dणे ts'ahòdı (13%)

Naidik'èzhq naawo eyits'q Ts'èko k'aawo naawo xè eghàlagidedq, dıı dze k'e asıı azhq edàtłq gıts'q xè łta deèrò nezı dणे ts'agedı ha gıwq.

Chipewyan ?erihł'ís Níla T'ahedi Sí Ts'ı Yatı Húlchu.

?ełts'us k'aatı zók'e 2004, jadızi něne t'ók'e háyqıla ?eya k'áanı chu Dēneba Nádi chu ?erihł'ís k'áanı kué hııı ?erihł'ís hubexa nílya, dēne t'a dáydhēn sí xa.

Harelyı t'á 512 ?erihł'ís nuweghā nílya. Dırı sí, beghúldesche ts'ı ?at'ele, ?eyērle ts'ı ?at'e.

T'ā ?erihł'ís nuweba nııla sí, jā ts'ı bets'édı ?at'e.

- Nádórelya-u
- ?eya k'élıı ?are-u
- Dēneba Náni Dēne-u
- ?eya k'áanı Dēne Ts'énı-u
- Dēne kué surıłthēn Dēne-u
- Dēne suwéna xa Dēne Ts'énı-u

Harélyı ts'ı t'ahedi:

Harélyı t'ā dēneba ghálahéna dēne dánélı-

89.3% dēne hubını tó ?até su hubını

Harélyı t'at'u hubexa ?egháláhdā-

88.8% dēne hubını to ?até su hubını

?ası tághe dırı ?eya k'áanı chu dēneba nádı chu háyqıla dēne hubını:

- ?até dēnexél dáyhēłı-u (26%) (dēne dánélı-u)
- T'at'u ?eghálahena (bıılaè k'óherelyā) (23%)
- T'at'u dēne ts'éhenı ?até su ?ats'én. (19%)

?eya k'áanı chu dēneba nádı chu háyqıla de?aaze hōzı dēneba ?eghálahéna xa:

- Bedınááltı dé het'ı huts'élı (41%)
- T'at'u dēne ts'éhenı ?ate su ?ats'én (14%)
- T'at'u dēnexél yahēłı (14%)
- K'ét'aze t'at'u súgha sí dēne ts'éhénı (13%)

?eya k'áanı chu dēneba nádı chu k'áuneta-ı t'at'u de?ááze dēne ts'éhenı dúwéle sí hurełdzá xa.

Gwich'in Dagwidinu' Gogwandàk

Vàdzaih Zrìi' 2004 dàì', aii Srìigghdaii ts'at Nehsrijàhch'uu K'atr'inahtii Kat gogàhnuu kat Srìigwandaii Zheh gwatagogwinyàanch'uu gwizhìt edìneht'eh gat'oodahkat nìlii gwint'ànatr'inahchuh.

Jidii diint'ànatr'ìnahchuh zrit 512 gidilii t'aginaanch'uu goonli'. Srìitsoonjik geh'at kaik'it gwats'at tthak zrit 487 gidilii t'agòonch'uu.

Juudìn edìneht'eh tthak gwichìlagwidhìl'aih t'at:

- dìnjii srìnalii kat;
- ełts'ik k'ànahhtii kat;
- nehstrijàhch'uu k'ànahhtii kat;
- ełts'ik k'ànahhtii gwats'ànuu kat;
- zheh gwizhìt ełts'ik nìlii guk'ànahhtii kat; ts'at
- srìigwandaii eenjit gwats'ànuu kat chan.

Jidii tthak geenjit guk'àgaanjik:

Gwizhìt Gwitr'it T'agwah'ii Kat zhuughat'agidich'uu geenjit -
89.3% geenjit shòh giinlii gòo gwiyaan' an akòo t'agiinich'uu

Nits'oots'at Guk'ànahhtii Geenjit -
88.8% geenjit shòh giinlii gòo gwiyaan' an akòo t'agiinich'uu

Kaik'it gwizhìt jidii iisrits'at tik gidilii hàh gat'agiinindhan:

- Nihts'at tr'igiiinjik (dìnjiikat hàh zhuughat'agidich'uu giinlii) (26%)
- Daoch'uu Geenjit (dìnjii kat gwizhìt chan dagiinch'uu) (23%)
- Nits'oots'at Gwits'at Ak'aaindak Giinlii (19%)

Jidii hàh gwitr'it t'agugwahah'yaa geenjit diinjitr'idizhit:

- Gwits'at tr'iiinjii geenjit (41%)
- Nits'oots'at Gwits'at Ak'aaindak Giinlii (14%)
- Nihts'at tr'igiiinjik (14%)
- Nits'oots'at tth'aih diits'at tr'iiinjii geenjit (13%)

Jii Srìigwandaii ts'at Nehsrijàhch'uu K'anahtii Kat t'at tth'aih aii gwizhìt hàh gwitr'it t'agogwahah'yaa ànts'at dadohnuu geenjit gootadahch'yaa t'agoonch'uu geenjit gàtohkhwindaii gwìlziizrii gwizhìt gwitr'it gogwiteelyaa geenjit.

North Slavey

Dene dahukedeyihke ts'ê yeri hegokñhæô

2004 xat'á gú ʔeyi ráídi hé ʔeyi dene ts'érádi gá ʔeghálayedaí ke ʔeyi júhdá néné gota judeni ʔeghálakeyeda góyæ ʔeyi ʔedjht'é bek'e darudíke dát't'e sóʔats'ulæ gha ríkiníla.

ʔareyóné gogha ʔedjht'e 512 kugháraheya. Derita Sôba kóé godudzine kôta yágóla gots'ê 487 kugháraheya.

Deri ke gots'éráyídi gá ʔedjht'e sóʔakíla:

- ráídi k'óodeyoke;
- kôta ráídi hé ʔeghálayedaíke;
- ts'ónét'e gá ʔeghálayedaíke;
- kôta ráidik'é gogha ʔeghálayedaíke;
- denékqé góyæ dene hé ʔeghálayedaíke; gots'ê
- gonezq ʔats'út'e gá dene hé ʔeghálayedaíke.

ʔareyóné gogha gots'ê godæ duká ʔayít'e:

ʔeyi ʔeghálayedaíke sú dene hækénélj gú dene ts'érákeyídi-
89.3% ke ká kugha máhsí dódí níde goshó kugha máhsí kedeyídi

Sú gonezq kughálayáda-
88.8% ke ká kugha máhsí dódí níde goshó kugha máhsí kedeyídi

Kôta t'áhsj taudet'e kehé xáhwere raxegha gonezq ʔeghálakeyeda
kedeyídi la:

- Dene ts'égokædæni (ʔeghálayedaí dene hækénélj daí) (26%)
- Dá ʔeghálakeyeda (ʔeghálayedaíke deʔeghálayída hé dúle kílj daí) (23%)
- Sú fori kuts'érágodi (19%).

Kôta yeri kehé xáhwere gonezq raxegha ʔeghálakeyedá ʔaragots'ulæ
kedeyídi:

- Kugháts'eyúda godúyíle (41%)
- Sú fori kuts'érágodi (14%)
- Dene ts'égokædæni (14%)
- Sú ʔeht'ái dene ts'érákædi (13%)

ʔeyi Ráídi hé Dene Ts'érágodæ gá ʔeghálayedaíke yeri kugha wela hé ʔeht'ái sú gonezq dene gha ʔeghálakeyeda goghárakeyída wolé góʔq.

South Slavey Azhoo dué t'áa kanahégedi kó, met'áodé?a zoh ghó dúle géghoedá

2004 Mek'eh Detę Zaa zhí, edihtł'é daxáde, amíi Kaóndii K'eh Dětth'ı Yıólı keh, eghálaedée t'áa kágógedi ezhi odı di Gots'ádi keh NWT zhíe medihtł'ée yáthela.

Azhoo t'áh edihtł'é gógho nozha la 512. 487 Soomba K'é gothaa kótah yágóla gots'é.

Di t'aa gots'ádi yıólı amíi ghó egedıtł'ée:

- Náidık'éozhoo Denezhu;
- Náidık'éozhoo Ts'élı;
- Goghanáendii Yıólı keh ;
- Kótah gonezı ts'undáa k'eh eghálaenda helı;
- Gots'ádi gha theda; gots'ę
- Gonezı Agót'ée k'eh Eghálaidée.

Azhoo t'áh edáts'edıındii:

Azhoo eghálaidée sęegenıde yıólı hėsıı -

Amíi yegho edágedındii la 89.3% met'áh goıııé tao, edáodacho met'áh goıııé dué

Edáodacho gots'áedii hėsıı -

Amíi yegho edágedındii la 88.8% met'áh goıııé tao, edáodacho met'áh goıııé dué

Azhıı godıchaa tai t'áh gots'ágendi ts'ę gogha nezı la:

- Ełets'ę gots'ęnde (t'aa eghálaidée sęegenıde chu) (26%)
- Edáodacho (amíi chu t'aa gonezı eghálagıde keh) (23%)
- Edáondii edédıdıı, ká yek'éogedezho hélı (19%)

Edáondii hénıde zoh di eghálaidée gonezı aget'ı holı :

- T'ats'ózé chuu ts'atáa agıt'e (41%)
- Edáondii edédıdıı, ká yek'éogedezho hélı (14%)
- Ełets'ę gots'ęnde (14%)
- Eghálaidée keh, ká ezhi hét'ıı (13%)

Eghálaidée keh edáodacho nahets'ágındii hėsıı, káa akahot'e hét'ıı, nahets'agendi hėsıı héghogeda gha. Gonezı nahets'ádi nahe gha nezı, hénıde nahets'ádadahndi, kaondii hénıde azhıı t'áh nahets'áidıı holıı.

Inuinaktun Okaotait Naitologat

Ovanı okiomı 2004, okoa Kavmat Anniaktolikiyıt Olasilikiotlo noitivaktot Inuit Ekayukhinıgıt Okaotait Tıtıgavıkhıat nunanı monakhıkavıknı ovalo olasilikiotlo afısıını tamainı Nunatıamı.

Hapkoa tamaita kaffıt tıtıgavıkhıat kaivaktot amıgıtıgıt 512. Haman elalık 487 okonanga inukavnıt ahıanı Yelonı.

Enıkhımayıt tıtıgat tıtıgavıkhımayıt inuknıt kaihımayıt okonanga

- daktınıt;
- monakhınıt;
- olasilıkıonıt;
- nunanı monakhınık havaktınıt;
- inuknık ekayuktıt inutkoanı; ovalo
- koviattakhıyınık havaktını.

Tamaita enıktot emalıyıt:

Tamaita Eghınıtıt Havaktıt -

89.3% okoa kıoyıt koviagıyıt nıaiak ehoagıyıt havaktıt

Tamaita Namakpıaktot Ekayukhıkıvıt -

88.8% okoa kıoyıt koviagıyıt nıaiak ehoagıyıt

Okoa pingahıt inıt ehoagıyıt okoat monakhıtıkot olasilikiotlo nunamingnı inuit:

- Okaktıgııknık (okoalo eghınıtıt havaktıt) (26%)
- Ayoıtıtlo (okoalo havaktıt ayoıtıt) (23%)
- Ekayuknagıpkıktot (19%).

Okoa ehoakhıyagıakıktot monakhıtıkot olasilıkıoıto nunamını:

- Takoyumınaktot (41%)
- Ekayuknagıpkıktot (14%)
- Okakatıgıomınaktot (14%)
- Ehoaktot Monakhıtıkot Havakıvıt (13%).

Okoa Monakhıtıkot Olasilikiot Havakıvıt aolahımaknıaktot ehoaktokot aolavklonı ovalo kenıkhıavaknıaktot kıoyaoyunık ema ehoakhıgangıgıtı monakhıt havakıvıt aolatıtlogıt nunanı.

Inuvialuktun Naigliliqtat Uqausingit

Ukiaksami October 2004ngurman, Angalatchiyit Anniarvikun Inuinnun Ikayurviksaanunlu makpiraanik tuyuqtuat tamainnun anniarvingnun nunaptingni ittuat apiqsuruklugit qanuq isummammagaita.

Tamatkilugit utiqtiyuat 512tun makpiraanik. Tamatkuat inuuniarviit 487tun ilagilugit Yellowknifemin silataaniittuat.

Kiuyuut makpiraakun apiqsuqsimayait ukuat savaangit iluaqpata:

- taaktiit;
- munaqsiyit;
- inuinnun ikayuqtit
- inuuniarvingni ikayuqtit anniarniqkun;
- aimavingni ikayuqtit; suliptauq
- ikayuqtuat inuuniarusikun.

Ukuat kiuggutait ataaniittut:

Savaktingit Talurnaitpangmata -

89.3% nakuugiyaat ilaittuaq aasiin nakuugivialukkaat

Ikayummaarikkumik Ikayuqsiuqtuanun -

88.8% nakuugiyaat ilaittuaq aasiin nakuugivialukkaat

Pingasuuyuat inuit inuuniarvingni nakuugiyangit angalatchiviksaikun anniarvingnilu Inuinnun Ikayurviksaanunlu:

- Uqaqatigiikkumik (ilagilugulu savaktingit talurnaimmata) (26%)
- Nakurniqsaugumik (savaktingit ilisimagumik savaamingnik) (23%)
- Qilamik Ikayuqpakumik (19%)

Ukuat sivulliutilugit tutqiksauyaksait inuuniarvingni anniarvingnilu Inuinnun Ikayurviksaanunlu:

- Pitchiriaqtuanik Ikayurviksaruaqsaqtut (41%)
- Qilamik Ikayuqpakumik (14%)
- Uqaqatigiikkumik (14%)
- Iluaqpata Allanguqpallarnagit Ikayuutiviksait (13%)

Ukuat Angalatchiyit Anniarvikunlu Inuinnun Ikayuutiviksainunlu suli nautchiurniarait savaangit ilurriniaqlugu inunginnun suliptauq apiqsupsaarniarait qanuq isumagamammagaita.

Introduction

The evaluation of consumer satisfaction is an item in the Minister's Action Plan for the Health and Social Services System 2002-2005. In addition to measuring client satisfaction to meet this commitment, the *2004-05 Community Health and Social Services Client Feedback* also offers a means for clients to comment on any aspect of programs, services and their delivery. In this way, it serves to measure the overall effectiveness of services and to guide future developments. Efforts to seek and act upon client feedback is an indication of a system that is accountable and responsive to its clientele.

Goals

In addition to measuring client satisfaction and receiving feedback on services, there are a number of other intended goals:

- to test the appropriateness of the procedures and the ability to achieve useful results;
- to obtain a larger sample size than the *Canadian Community Health Survey (CCHS)*;
- to include community-level service providers from both health and social services; and
- to create the capacity to report annually on client satisfaction at the Authority level.

Results

Across the NWT, 512 forms were returned. This included 487 from communities outside Yellowknife so we achieved our goal to exceed the CCHS sample size of 449.

Completed forms represented clients who had received services from:

- doctors;
- nurses;
- social workers;
- community health representatives;
- home care workers; and
- wellness workers.

Overall results are as follows:

Overall Friendliness of Staff -

89.3% of respondents were satisfied or very satisfied;

Overall Quality of Services -

88.8% of respondents were satisfied or very satisfied;

Top three aspects that people like about the health and social services in their community:

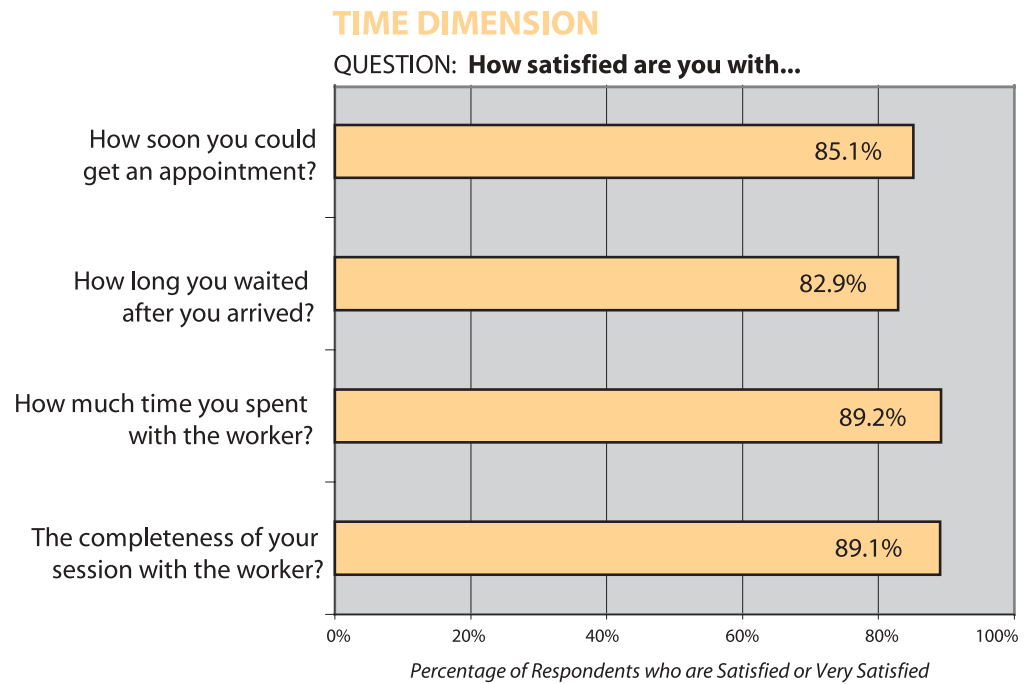
- Communication (including friendliness of staff) (26%)
- Quality (includes staff competence) (23%)
- Responsiveness (19%).

Top areas for improvement to the health and social services in their community:

- Accessibility (41%)
- Responsiveness (14%)
- Communication (14%)
- Continuity of Service Provider (13%).

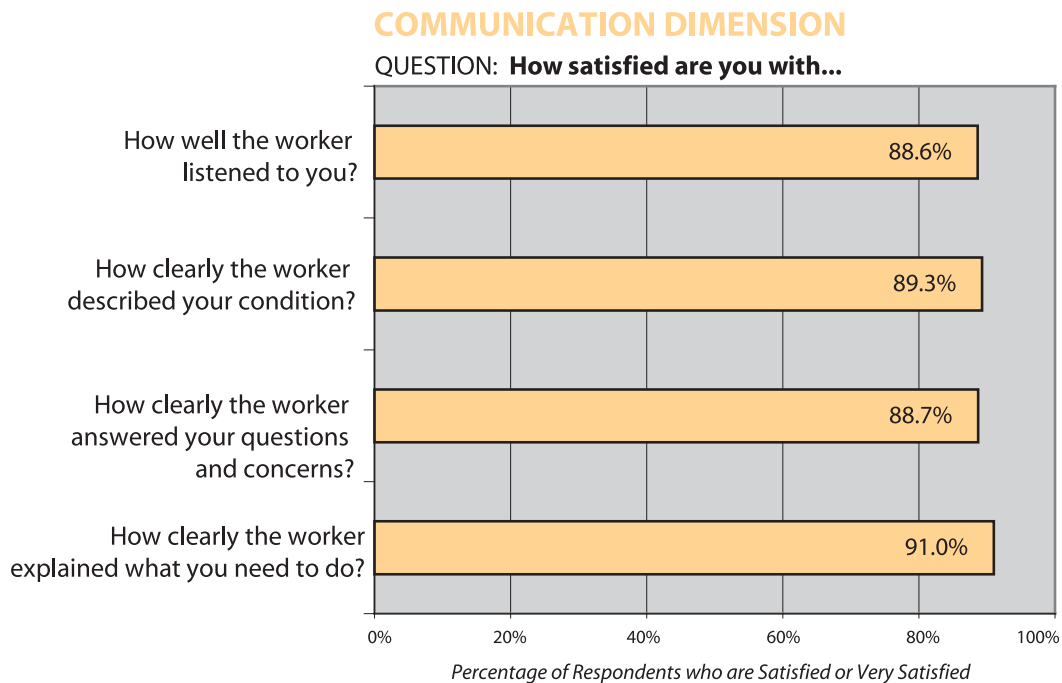
HSS System-wide Results - Timeliness

Access to services can, in part, be measured by client's perception of and satisfaction with waiting times and time spent with the worker. Four of the survey questions measure the client's satisfaction with different aspects of time. These results represent all the combined responses across the NWT.



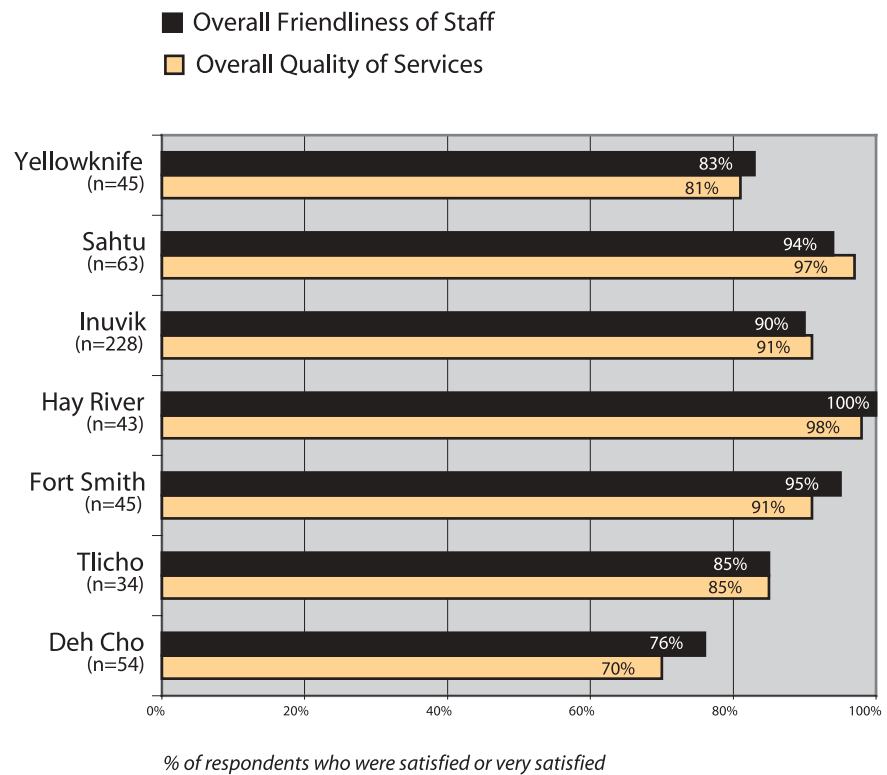
HSS System-wide Results - Communication

The direct interaction between the service provider and the client is important for ensuring the best possible diagnosis and the client's compliance with instructions. Four of the survey questions measure the quality of the communication between service provider and client. These results represent all the combined responses across the NWT.



Comparison of HSSA-level Results - Overall Quality of Services and Friendliness of Staff

These two questions measure overall friendliness of staff and overall quality of services. This is a good measure of overall satisfaction with health and social services. By extension, it can be seen as the level of confidence and comfort that the public has with the system.



'n' is the number of feedback forms completed and returned from that Health and Social Services Authority

These measures are higher than similar satisfaction surveys, including, a 2003 Alberta health care survey (74%), the 2003 Canadian Community Health Survey (85%), and a review of over 50 health care surveys (77.5%).

HSS System-wide Results - Open Questions:

What do you like about the health and social services in your community?

How can we improve the health and social services in your community?

Two open questions allow clients to provide feedback on any aspect of programs, services and their delivery. Clients told us what they like about health and social services in their communities and gave suggestions for improvement.

The responses were reviewed and used to develop a coding system that reflected the points of view of the client. Finally, the results were grouped into the following eight categories reflecting generally accepted health care and performance principles.

- Accessibility
- Communication
- Quality
- Responsiveness
- Continuity
- Effectiveness
- Client Focus
- Efficiency

Accessibility

Comments about accessibility include:

- general ease in accessing services;
- staff supply;
- facilities - location, condition;
- availability of services;
- hours of operation and frequency of community visits; and
- equitable access.

Accessibility was a major topic that covered 41% of all suggestions for improvement. Nearly half of these express a desire for increased access to staff, especially doctors and nurses, but also, to a lesser extent, dentists and workers in home care, child protection, mental health and addictions. In communities without resident doctors, respondents want doctors to visit the communities more often and to stay longer. Still, 11% of respondents identify accessibility as what they like about the health and social services.

Communication

Comments about communication include:

- attitude of the service provider;
- information and explanation;
- transparency and trust;
- privacy and confidentiality; and
- language of service.

Communication represents the highest number (26%) of all comments regarding what respondents like about the health and social services in their community. A large number of comments (88) praise the friendliness or caring of service providers. Conversely, there are fewer comments (20) suggesting that some staff could be more courteous.

Quality

Comments about quality cover:

- total quality;
- services;
- staff; and
- facilities.

While 8% of suggestions for improvement identify some aspect of quality, nearly 25% of comments identify quality as the aspect they like about health and social services in their community. Staff competence is particularly noteworthy as it represents 12% of what respondents like about services.

Responsiveness

Comments about responsiveness include:

- waiting times;
- willingness to help;
- caring and empathy;
- adaptability;
- a complaints process; and
- recognition of community needs.

The greatest disagreement amongst all responses is in regard to waiting times. Twenty respondents feel that waiting times are too long while twenty-four respondents feel that service is prompt. In regards to a demonstration of caring or willingness to help, 41 respondents find these to be present while 8 respondents find these lacking.

Continuity

Comments about continuity are defined in three ways:

- informational continuity (use of information from prior visits);
- relational continuity (seeing the same provider over time); and
- integrated clinical management (referrals to other providers).

Continuity, especially the desire to see the same provider over time, represents 13% of all suggestions for improvement.

Effectiveness

Comments about effectiveness cover:

- health effectiveness (improving or maintaining overall health); and
- service effectiveness (managing the client's condition through prevention/promotion, diagnosis, treatment, functioning, and support).

Generally, respondents felt that services are helpful; they include it amongst the top four aspects they like about health and social services.

Client Focus

Comments about client focus include:

- respect for autonomy of, and decision-making by, the client,
- consideration of client's circumstances,
- collaboration with family; and
- awareness of culture and community.

There are too few comments on this topic to form any conclusions.

Efficiency

Comments about efficiency include streamlined processes and cost or time effectiveness. There are too few comments on this topic to form any conclusions.

METHODOLOGY:

The Department of Health and Social Services developed the HSS Client Feedback in consultation with the Chairs and Chief Executive Officers (CEOs) of the Health and Social Services Authorities (HSSAs). Field-testing was conducted in Fort Simpson in February 2004 to ensure that the form and procedures would give adequate results. Revisions were made. During the month of October 2004, feedback forms and return boxes were placed in community health and social services reception areas. An active offer for French services was included on the form while translations in official languages were available. Clients completed and placed surveys in sealed boxes. At the end of October, the boxes were returned, unopened, to the Department for analysis to ensure confidentiality.

DATA ANALYSIS:

Department staff received the surveys, entered the information into an access database and analyzed the results. The satisfaction ratings were calculated as a percentage of total responses to that question. Responses to the two open questions were analyzed inductively, that is, topics emerged from the responses. These topics were aligned with health care and performance audit criteria to form the codes presented in the final report. The overall results were reviewed by Departmental Directors and the CEOs of each HSSA in March 2005.

CONCLUSION:

Our primary community care approach to delivering integrated services is to provide the right services by the most appropriate provider in the best setting at the right time and in the most efficient and economical manner. It is important to know from our clients how we are doing in this regard.

Client feedback allows us to...

- continue successful programs and delivery methods,
- recognize staff and system achievements, and
- direct our efforts to areas that need improvement.

The Health and Social Services System will continue to measure satisfaction and seek feedback in an effort to provide the best possible services with existing resources.

CONTACT:

For more information about this or any other publication of the GNWT Department of Health and Social Services, please contact:

Manager, Communications
Telephone: (867) 920-8927