

**WISHIN Public Perceptions Questionnaire – Draft 5.16.12**

**SAMPLE QUOTAS:**

Region in Wisconsin:	Gender:
N=35 Northern	N=200 Female
N=86 Northeastern	N=200 Male
N=146 Southeastern	
N=78 Southern	Age:
N=55 Western	N=184 age 18-44
	N=145 age 45-64
	N=71 age 65+
Pilot Geographies:	
N=75 Dane County	
N=75 Milwaukee Metro Area	
N=45 Fond du Lac County (will try to get more, but unlikely)	

**SCREENER:**

Thank you for taking part in this survey about attitudes in Wisconsin.

- A. Are you... CHECK QUOTAS
  - a. Male
  - b. Female
  
- B. Are you currently a resident of the State of Wisconsin?
  - c. Yes
  - d. No → DISCONTINUE
  
- C. Are you the person primarily responsible for the health care decisions in your household?
  - a. Yes
  - b. Share responsibility equally with someone else
  - c. No → DISCONTINUE
  
- D. We are talking to people with a mix of backgrounds. Do you, or any member of your household, work in any of the following types of jobs?
  - a. A marketing or marketing research firm or department
  - b. An advertising or public relations firm or department
  - c. A physician or nurse
  - d. A hospital, medical clinic or health insurance company
  - e. A health care information technology firm or department (e.g., those that develop, install or maintain electronic health record systems)
  - f. None of these

MUST SAY "NONE OF THESE" TO CONTINUE  
DISCONTINUE IF SELECT ANY OTHER RESPONSE
  
- E. What is your current age? CHECK QUOTAS
  - a. Under 18 → DISCONTINUE
  - b. 18 to 24
  - c. 25 to 34
  - d. 35 to 44

- e. 45 to 54
- f. 55 to 64
- g. 65 to 74
- h. 75 or older

F. In which county do you live? CHECK QUOTAS

DROP DOWN LIST OF ALL COUNTIES IN WISCONSIN, IN ALPHABETICAL ORDER

**MAIN QUESTIONNAIRE:**

1) Do you have clinic or medical group that you typically go to for your basic health care needs

- a. Yes
- b. No → SKIP TO Q4

2) Which clinic or medical group do you go to for basic health care needs?

- a. Affinity Health Care
- b. Aspirus
- c. Aurora Clinic/Medical Group
- d. Bellin Health System
- e. Columbia St. Mary's
- f. Dean Clinic
- g. Froedtert Health
- h. Marshfield Clinic
- i. Mayo Clinic Health System
- j. Oakleaf Medical Network
- k. ProHealth Solutions
- l. ThedaCare
- m. UW Health or UW Clinics
- n. Wheaton Franciscan Healthcare
- o. Other, please specify: \_\_\_\_\_

3) Thinking about the clinic you go to for basic health care needs, using a 10 point scale where a 10 is completely satisfied and a 1 is not at all satisfied, how satisfied are you with the care you receive?

Not at all satisfied							Completely satisfied		
1	2	3	4	5	6	7	8	9	10

4) Have you or has anyone in your household been referred to a specialist for any reason in the past two years?

- a. Yes
- b. No → SKIP TO Q6

5) Which type of specialist(s) have you or someone else in your household been referred to in the past two years? (Select all that apply)

- a. Allergist
- b. Cardiologist

- c. Dermatologist
- d. ENT (Ear Nose and Throat Specialist)
- e. Gastroenterologist
- f. Mental Health Specialist
- g. Neurologist
- h. OB/GYN (Obstetrics Gynecology)
- i. Oncologist
- j. Ophthalmologist
- k. Orthopedic Specialist
- l. Sports Medicine Specialist
- m. Surgeon / General Surgery
- n. Urologist
- o. Other, please specify: \_\_\_\_\_
- p. Other, please specify: \_\_\_\_\_

6) Do you currently have health insurance?

- a. Yes
- b. No → SKIP TO Q8

7) Thinking about your current health insurance provider, using a 10 point scale where a 10 is completely satisfied and a 1 is not at all satisfied, how satisfied are you with the overall experience with this health insurance provider?

Not at all satisfied										Completely satisfied		
1	2	3	4	5	6	7	8	9	10			

8) Have you or has anyone in your household gone to an Urgent Care or Immediate Care facility in the past two years?

- a. Yes
- b. No → SKIP TO Q10

9) Were the Urgent Care or Immediate Care facilities local or in a different community? (Select all that apply)

- a. A local Urgent Care or Immediate Care facility
- b. An Urgent Care or Immediate Care facility in another community (when traveling or out of town)

10) Have you or has anyone in your household been treated or evaluated at a hospital in the past two years? If yes, was that in the emergency room, as an inpatient (stay overnight) or as an outpatient? (Select all that apply)

- a. Yes – in the ER or emergency room
- b. Yes – as an inpatient
- c. Yes – as an outpatient
- d. No → SKIP TO Q14

11) Were the hospitals you've been to in the past two years local or in different community? (Select all that apply)

- a. The hospital in my community
- b. A hospital in a different community (when traveling or out of town)

- 12) IF SELECTED BOTH a AND b IN Q9, ASK:  
Which type of hospital provided services to you or someone else in your household most recently?
- a. The hospital in my community
  - b. A hospital in a different community (when traveling or out of town)
- 13) Thinking about the most recent time a hospital provided services to you or someone else in your household, other than during the admissions process, did the hospital use electronic health records (where they entered information on the computer) or did they use paper health records (where they wrote down the information in a paper file)?
- a. Electronic health records
  - b. Paper health records
  - c. Both paper and electronic health records
  - d. Not sure
- 14) IF HAS A CLINIC IN Q1, ASK:  
Thinking about the clinic you go to for your basic health care needs, does that clinic use electronic health records (where they are entering information on the computer) or do they use paper health records (where they are writing down the information in a paper file)?
- a. Electronic health records
  - b. Paper health records
  - c. Both paper and electronic health records
  - d. Not sure
- 15) IF BOTH CLINIC AND HOSPITAL HAVE EHR (RESPONSE a OR c IN Q13 AND Q14), ASK: To what extent do you believe your electronic health records are shared or are accessible to both your clinic and the hospital you were at most recently?
- a. Your electronic health records are shared
  - b. Parts of your electronic health records are shared, but not everything
  - c. Your electronic health records are not shared
  - d. Not sure
- 16) To what extent, if at all, do you support clinics and hospitals using electronic health records (where information is entered into a computer) to keep track of patient information, diagnoses and treatments?
- a. Strongly support electronic health records
  - b. Somewhat support the use electronic health records
  - c. Slightly support the use of electronic health records
  - d. Do not at all support the use of electronic health records
- 17) Why do you say that?
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- 18) If your hospital or clinic had an electronic health record for you, as a patient, which of the following types of information would you want to have included in that record? (Please select all that apply)
- a. Primary care physician diagnosis/notes

- b. Clinic specialist diagnosis/notes
- c. Hospital specialist diagnosis/notes
- d. Surgical procedures
- e. Nonsurgical procedures
- f. Referral records
- g. Clinic lab test results
- h. Hospital lab test results
- i. Patient medical history
- j. Patient vital statistics (height, weight, age, etc.)
- k. Prescriptions written
- l. Prescriptions filled
- m. Physical therapy care records
- n. Ophthalmology care records
- o. Mental health care records
- p. Dental care records
- q. Other, please specify: \_\_\_\_\_
- r. Other, please specify: \_\_\_\_\_
- s. None of these

19) If your hospital or clinic had an electronic health record for you, as a patient, who would you want to have access to your health record? (Please select all that apply)

Scale: Have full access, Have access to some information but not all, Do not have access to electronic health information

- a. Your primary care physician
- b. Other physicians or specialists you have seen or are scheduled to see
- c. Medical staff at your clinic
- d. Hospital or ER physicians at your local hospital when you are there for treatment
- e. Hospital or ER physicians at a hospital in another community when you are there for treatment
- f. Hospital medical staff when you are there for treatment
- g. Urgent care physicians
- h. Your health insurance provider
- i. Your pharmacist
- j. Other, please specify: \_\_\_\_\_
- k. Other, please specify: \_\_\_\_\_
- l. None of these

20) Below you will see a description of a new service that is going to be offered to hospitals and clinics throughout the state of Wisconsin. The new service is called the Health Information Exchange (HIE). Please read the description then answer the questions that follow.

The Health Information Exchange (HIE) is a new service being implemented in the state of Wisconsin that allows hospitals and clinics to quickly and securely share a patient's health care records. In the past, this information was often faxed or emailed between hospitals and clinics. With HIE, it is transferred electronically even if the hospital and

clinic are in different cities or use different electronic health records systems. HIE allows the doctor who is treating you to quickly access your health history, avoiding unnecessary tests, reducing medical errors and speeding up diagnosis and treatment.

21) Based on the description you just read, what do you like about the HIE service?

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22) What do you dislike or what concerns do you have with the HIE service?

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23) Based on the description you just read, to what extent would you support or not support your clinic and hospital using HIE? (Click here to see the description of HIE)

Scale: Strongly support, Somewhat support, Slightly Support, Do not support

- a. My hospital using HIE
- b. My clinic using HIE

24) Why do you say that?

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25) If your clinic or hospital used HIE, how likely do you think it is that each of the following would happen? (Click here to see the description of HIE) (RANDOMIZE LIST)

Scale: Very likely, Somewhat likely, Not too likely, Not at all likely

- a. An unauthorized person would get access to your medical records
- b. Your own doctors would do a better job of coordinating your care
- c. The overall quality of medical care in the state would be improved
- d. The quality of care you and your family receive would be improved
- e. Fewer people would get unnecessary medical care
- f. Fewer people would get sick or die as a result of medical errors
- g. Insurance companies would misuse the information
- h. Government agencies would misuse the information
- i. More patients would sue their doctor

26) To what extent do you personally agree or disagree with each of these statements regarding HIE? (Click here to see the description of HIE)

Scale: Strongly Agree, Somewhat Agree, Somewhat Disagree, Strongly Disagree

- a. My clinic and hospital are already exchanging health care information, so HIE is nothing new
- b. HIE would take the pressure off of me so I don't have to remember the details of my past medical care

27) If the following statements were true about HIE, would they make you feel better or worse about HIE? (Click here to see the description of HIE)

Scale: Feel much better, feel somewhat better, feel somewhat worse, feel much worse

- a. The development of HIE is being funded by \_\_\_\_\_
- b. HIE has the support of the Wisconsin Hospital Association and the Wisconsin Medical Society
- c. HIE has the support of \_\_\_\_ clinics across the state
- d. HIE has the support of \_\_\_\_ hospitals across the state
- e. HIE has the support of \_\_\_\_ health insurance providers across the state
- f. Access to HIE is carefully controlled and monitored by \_\_\_\_\_
- g. Access to HIE is limited to \_\_\_\_\_
- h. You can limit who accesses your health care information
- i. With HIE, your electronic health records will go with you when you switch clinics or move to a new city

28) Now thinking about health care in general, below are some statements that may or may not reflect how you feel about health care. As you read each one, please indicate how much you agree or disagree that each statement is true for you. (RANDOMIZE ORDER)

Scale: Strongly Agree, Somewhat Agree, Somewhat Disagree, Strongly Disagree

- a. Health care is not something I spend much time thinking about or worrying about at this time in my life
- b. I'm very knowledgeable about health and wellness issues
- c. Dealing with health care issues can easily overwhelm me
- d. I'm worried that the health care I receive will be worse in the future than it is now
- e. There are good hospitals and not-good hospitals in this area, so I need to make sure I go to a good one when I need it
- f. If at all possible, I will avoid or put off going to the doctor for myself
- g. When it comes to a doctor's recommendations, I do what I think makes sense and ignore the rest
- h. I will wait for an appointment with my doctor, even if another doctor could see me sooner
- i. I frequently feel intimidated when talking to a doctor

29) Overall, how would you describe your current health?

- a. Poor
- b. Fair
- c. Good
- d. Very Good
- e. Excellent

30) In the past year, since about May of 2011, how many times have you personally visited a doctor or had an appointment for yourself? Please include regular check-ups and visits with specialists, if you had any.

- a. None
- b. Once
- c. 2-3 times
- d. 4-5 times
- e. 6-10 times
- f. 11-15 times
- g. More than 15 times

- 31) In the past year, since about May of 2011, how many times have you gone to a doctor's appointment with another member of your household? This could be an appointment for a child or going with another adult to their appointment. Please include regular check-ups and visits with specialists.
- a. None
  - b. Once
  - c. 2-3 times
  - d. 4-5 times
  - e. 6-10 times
  - f. 11-15 times
  - g. More than 15 times

- 32) Thinking about the other people in your household, would you say someone else in your household is in poor health or suffers from serious health issues?
- a. No
  - b. Yes

- 33) Next you will see some statements that may or may not describe how you feel about life and the world around you. As you read each one, please indicate how much you agree or disagree that each statement is true for you? (RANDOMIZE STATEMENTS)

SCALE: Strongly Agree, Somewhat Agree, Somewhat Disagree, Strongly Disagree

- a) Other people's opinions really matter to me and often impact my decisions
- b) I often find myself second guessing my decisions
- c) I like the challenge of doing something I've never done before
- d) I make a lot of worthwhile sacrifices to live a healthy life
- e) Life is too short, so I eat what I like and exercise when I feel like it
- f) I always try to live in the moment rather than worry about the future
- g) I like my life to be pretty much the same from week to week
- h) Technology helps make my life more organized
- i) I am very optimistic about life and the world around me
- j) I am overwhelmed by the stress from all my responsibilities

- 34) Which of the following do you have or do on a regular basis? (Select all that apply) (RANDOMIZE LIST)

- a. Exercise at least three times a week
- b. Have a Facebook page and check it regularly
- c. Use a Smartphone or iPhone to access the Internet or use Apps
- d. Read the newspaper every week
- e. Usually buy the less expensive version of an item
- f. None of the above

- 35) In the past 3 months, about how many times would you say you've looked for or read health care information online?

- a) None
- b) Once or twice
- c) Three to five times
- d) Six to ten times
- e) More than ten times



- 36) Thinking about the next 5 years, do you think the health care you receive will improve, stay the same or get worse?
- Improve
  - Stay the same
  - Worsen
- 37) What is your marital status?
- Married
  - Single
  - Widowed
  - Divorced or Separated
- 38) Including yourself, how many people live in your household?
- One person → SKIP TO Q41
  - Two people
  - Three to four people
  - Five or more people
- 39) How many children under 18, if any, do you have living at home?
- None → SKIP TO Q41
  - One
  - Two
  - Three or more
- 40) And into which of the following groups do your children's ages fall? (Please select all that apply)
- Less than 5 years old
  - 5 to 11 years old
  - 12 to 14 years old
  - 15 to 17 years old
- 41) What is your current employment status?
- Employed full time (30+ hours/week)
  - Employed part-time (< 30 hours/week)
  - Not employed, looking for work
  - Not employed, not looking for work
- 42) What is the highest level of education you completed?
- Some high school
  - Completed high school
  - Some college or technical school
  - College or technical school degree
  - Post graduate degree
- 43) Would you consider your home to be in a rural, suburban or urban area?
- Rural
  - Suburban
  - Urban
- 44) Which of the following describes your ethnicity? (Please select all that apply.)

- a. White/Caucasian
- b. Black/African-American
- c. Hispanic/Latino descent
- d. Asian/Pacific Islander
- e. Native American
- f. Other

45) In which category is your yearly household income?

- a. Under \$ 30,000
- b. \$30,000 - \$39,999
- c. \$40,000 - \$49,999
- d. \$50,000 - \$74,999
- e. \$75,000 - \$99,999
- f. \$100,000 - \$149,999
- g. \$150,000 or more

THANK RESPONDENT AND END SURVEY