

2022 INTERNATIONAL HEALTH POLICY STUDY OF PRIMARY CARE PHYSICIANS

(P.N.- PLEASE PLACE TIMERS PER SECTION)

SUBJECTS FOR QUESTIONNAIRE:

SECTION 500: SAMPLE PRELOADS
SECTION 700: INTRODUCTIONS AND SCREENERS
SECTION A: ACCESS TO HEALTH CARE
SECTION B: USE OF TELEHEALTH
SECTION C: CARE MANAGEMENT FOR PATIENTS WITH CHRONIC CONDITIONS AND OTHER SPECIAL NEEDS
SECTION D: CARE COORDINATION WITH OTHER PROVIDERS
SECTION E: CARE COORDINATION WITH HOME CARE AND SOCIAL SERVICE PROVIDERS
SECTION F: OFFICE SYSTEMS AND USE OF INFORMATION TECHNOLOGY
SECTION G: PROVIDER EXPERIENCES WITH THEIR PRACTICE
SECTION H: PERSONAL AND PRACTICE CHANGES SINCE COVID
SECTION I: PERSPECTIVES ON THE HEALTH CARE SYSTEM
SECTION J: PRACTICE PROFILE AND DEMOGRAPHIC DATA
SECTION K: DEMOGRAPHICS AND PRACTICE PROFILE
SECTION L: SWITZERLAND-ONLY QUESTIONS
SECTION M: CANADA-ONLY QUESTIONS
SECTION N: US-ONLY QUESTIONS
SECTION O: NEW ZEALAND-ONLY QUESTIONS
SECTION P: RECONTACT QUESTIONS

GLOBAL PROGRAMMING INSTRUCTIONS

TEXT

- ANY TEXT RESPONSES COLLECTED SHOULD BE FORWARDED IN A MICROSOFT EXCEL SPREADSHEET MATCHED BY UNIQUE ID.

WEB VS. PHONE/MAIL

- PHONE ONLY INSTRUCTIONS ARE MARKED AS “PHONE ONLY” and WEB AND MAIL INSTRUCTIONS ARE MARKED AS “WEB/MAIL ONLY” or “MAIL ONLY”
- Some interviewer notes/instructions should be modified and be shown to all respondents for web. These will be denoted with “(WEB NOTE ONLY:...)” These notes should be placed below the question-text in italic font.

NON-RESPONSE CODES

- BLANKS ARE DENOTED BY A “9” AND CORRESPOND TO SKIPS TO A GIVEN QUESTION IN THE “WEB” MODE OR TO QUESTIONS LEFT BLANK IN THE “MAIL” MODE
- CODES IN THE “PHONE” MODE MARKED WITH A “V” STAND FOR “VOLUNTARY” AND SHOULD NOT BE READ TO RESPONDENTS

MULTIPLE - RESPONSE

- We will NET the ‘multi-punch’ code with “Not sure” for all cases where “Not Sure” is offered as an option as a separate variable.
- Implement a hierarchy for the few questions where a hierarchy may be warranted. On questions where a hierarchy is implemented, SSRS will create a separate variable in which the multiple-response options will be reassigned according to the hierarchy that is put in place.

PN – PLEASE CALCULATE THE RESPONDENT’S RESPONSE RATE. THIS WOULD BE CALCULATED BY TAKING: THE TOTAL NUMBER OF QUESTIONS ASKED – THE TOTAL NUMBER OF SKIPPED QUESTIONS (SHOULD HAVE BEEN CODED AS 9) OVER THE TOTAL NUMBER OF QUESTION ASKED.

GLOBAL WEB PROGRAMMING NOTES:

- **2022 International Health Policy Study of Primary Care Physicians** – the title of the survey should be displayed on every screen for MOBILE OPTIMIZATION only.
- Respondents should be allowed to skip every question, unless noted otherwise in programming notes
- Header on every page should contain the client official logo(s)
- The body of the page (question area) should be WHITE
- Footer – light grey background for all pages other than landing page – smaller text font – should contain the following information:

US FOOTER (Q500=11):

If you have any technical trouble with this survey, please contact us by emailing info@internationaldoctorstudy.org or call **Christian Kline** at **1-800-633-1986, Ext. 4428**. If you would like to know more about the Commonwealth Fund, click [here](#).

AUSTRALIA FOOTER (Q500=1):

If you have any technical trouble with this survey, please contact us by emailing **info@internationaldoctorstudy-au.org** or call **Marisa Cian** at **1300 878 955**. If you would like to know more about the Commonwealth Fund, click [here](#).

CANADA FOOTER (Q500=2):

If you have any technical trouble with this survey, please contact us by emailing **info@internationaldoctorstudy.ca** or call **Christian Kline** at **1-800-633-1986, Ext. 4428**. If you would like to know more about the Commonwealth Fund, click [here](#).

FRANCE FOOTER (Q500=3):

If you have any technical trouble with this survey, please contact us by emailing **info@etudeinternationaledesmedecins.fr** or call **06.81.24.68.14**. If you would like to know more about the Commonwealth Fund, click [here](#).

NEW ZEALAND FOOTER (Q500=6):

If you have any technical trouble with this survey, please contact us by emailing **info@internationaldoctorstudy.org.nz** or call **[TBD]**. If you would like to know more about the Commonwealth Fund, click [here](#).

UK FOOTER (Q500=10):

If you have any technical trouble with this survey, please contact us by emailing **info@internationaldoctorstudy.uk** or call **Olivia Grant, Kirsty Kinsella, or Leanne Griffiths** at **0121 355 7421**. If you would like to know more about the Commonwealth Fund, click [here](#).

- Question text should be in larger font than response options
- Question numbers will be removed before going live.
- Preferred fonts – Arial, Helvetica, or Verdana
- Grids:
 - Html tables should be programmed in a way that column widths are set as proportions of the screen size. This will allow content to adjust to different browser window sizes.
 - If possible, we would like grids NOT to display table lines
 - Columns should be of equal width
 - Rows should be shaded – starting with the first row
 - No vertical shading – i.e., columns
- **EM1: [ERROR MESSAGE]:** (PN: EM1 SHOULD BE PRESENTED AT THE RESPONDENT'S FIRST ATTEMPT TO SKIP A QUESTION. IF A RESPONDENT FAILS TO PROVIDE A RESPONSE TO ANY WEIGHTING TARGET VARIABLE QUESTION (i.e., Q1a, Q1b, Q44, AND Q45) – EM1 SHOULD BE PRESENTED.
- **EM1 “Your answers to these questions are very important to us. Can you please take a moment to respond to the question below?”**
- **CLOSED FIELD MESSAGE:** (PN: THIS MESSAGE SHOULD BE DISPLAYED FOR ALL COUNTRIES' VERSIONS OF THE PROGRAM THAT HAVE BEEN CLOSED) – “Thank you for your interest in this study, however we are no longer fielding interviews at this point.”

PN – WEB LINK LOGOS

- **The US, Australia, and NZ:** should use the IHP 2022 logo and the Commonwealth Fund’s logo (2). See logos here: <H:\U1096\DP\Logos for Web Program\Australia, NZ, US>.
- **Canada:** should use the IHP 2022, Commonwealth Fund, CIHI, and Quebec logos (4). See logos here: <H:\U1096\DP\Logos for Web Program\Canada>.
- **France:** should use the IHP 2022 logo (in French) and the Commonwealth Fund’s logo (2). See logos here: <H:\U1096\DP\Logos for Web Program\France>.
- **The UK:** should use the IHP 2022, Commonwealth Fund, and UK logos (3). See logos here: <H:\U1096\DP\Logos for Web Program\UK>.

SECTION 500: SAMPLE PRELOADS

(IHP 2019 Q500, IHP 2015 Q500, IHP 2012 Q500)

BASE: ALL RESPONDENTS

Q500.PRELOAD – COUNTRY

- 1 Australia
- 2 Canada
- 3 France
- 4 Germany
- 5 Netherlands
- 6 New Zealand
- 7 Norway
- 8 Sweden
- 9 Switzerland
- 10 United Kingdom
- 11 United States

(IHP 2019 Q500a, IHP 2015 Q500a)

BASE: ALL RESPONDENTS

Q500a. MODE OF COMPLETION
(Mode the interview was completed on per respondent)

- 1 Web
- 2 Mail
- 3 Phone
- 4 [SWITZERLAND (Q500=9) ONLY]: Web and Phone

(IHP 2019 Q500b, IHP 2015 Q500b Modified – for Germany and Norway, the date shown is the date the interview got imputed into the database)

BASE: ALL RESPONDENTS

Q500b. DATE OF COMPLETION
(Date interview was completed per respondent)

(TWO DIGIT YEAR, TWO DIGIT MONTH, TWO DIGIT DAY)
For example “January 5th, 2019” would show up as “190105”

(IHP Q500d, IHP Q500d, IHP 2012 Q3005)

BASE: CANADA OR SWITZERLAND (Q500=2, 9)

Q500d. LANGUAGE OF INTERVIEW (BASED ON SELF-REPORTED DATA)

- 1 English
- 2 French
- 3 Italian
- 4 German

(IHP 2019 Q501, IHP 2015 Q501, IHP 2012 Q501, IHP 2009 Q601)

BASE: UK (Q500=10)

Q501.PRELOAD – REGION FOR PHONE QUOTA [REGION 2]

- 1 England excluding London
- 2 London
- 3 Scotland
- 4 Wales
- 5 Northern Ireland

(IHP 2019 Q504, IHP 2015 Q504, IHP 2012 Q504 Modified, IHP 2009 Q604)

BASE: UK (Q500=10)

Q504.PRELOAD – PRACTICE SETTING

- 1 GP Practice (General Practice)
- 2 CCG (Clinical Commissioning group)
- 3 LHB (Local health board)
- 4 LCG (Local Commissioning Group)
- 5 NHS (National Health Service)

(IHP 2019 Q509, IHP 2015 Q509, IHP 2012 Q509, IHP 2009 Q609)

BASE: France (Q500=3)

Q509.PRELOAD – POSTCODE

[ALPHANUMERIC; MAX 5 CHARACTERS]

|_|_|_|_|

(IHP 2019 Q513, IHP 2015 Q513, IHP 2012 Q513 Modified – obtained through sample in 2012 and will now be asked as part of the screener, IHP 2009 Q613)

BASE: UK (Q500=10)

Q513. JOB TITLE – FROM SCREENER

- 1 GP Partner
- 2 GP Principal
- 3 Salaried GP
- 4 GP Locum

(IHP 2019 Q520, IHP 2015 Q520, IHP 2012 Q520 Modified, IHP 2009 Q1504)

BASE: US (Q500=11)

Q520.PRELOAD - SPECIALTY

- 1 Internal medicine physicians
- 2 Family medicine physicians
- 3 General practitioners
- 4 Internal medicine - Pediatric/Pediatricians

(IHP 2019 Q521, IHP 2015 Q521, IHP 2012 Q521, IHP 2009 Q1500)

BASE: US (Q500=11)

Q521.PRELOAD - STATE

- 01 Alabama
- 02 Alaska
- 03 Arizona
- 04 Arkansas
- 05 California
- 06 Colorado
- 07 Connecticut
- 08 Delaware
- 09 District of Columbia
- 10 Florida
- 11 Georgia
- 12 Hawaii
- 13 Idaho
- 14 Illinois
- 15 Indiana
- 16 Iowa
- 17 Kansas
- 18 Kentucky
- 19 Louisiana
- 20 Maine
- 21 Maryland
- 22 Massachusetts
- 23 Michigan
- 24 Minnesota
- 25 Mississippi
- 26 Missouri
- 27 Montana
- 28 Nebraska
- 29 Nevada
- 30 New Hampshire
- 31 New Jersey
- 32 New Mexico
- 33 New York
- 34 North Carolina
- 35 North Dakota
- 36 Ohio

- 37 Oklahoma
- 38 Oregon
- 39 Pennsylvania
- 40 Rhode Island
- 41 South Carolina
- 42 South Dakota
- 43 Tennessee
- 44 Texas
- 45 Utah
- 46 Vermont
- 47 Virginia
- 48 Washington
- 49 West Virginia
- 50 Wisconsin
- 51 Wyoming

(IHP 2019 Q522, IHP 2015 Q522, IHP 2012 Q522, IHP 2009 Q1501)

BASE: US (Q500=11)

Q522.PRELOAD - REGION

- 1 EAST
- 2 MIDWEST
- 3 SOUTH
- 4 WEST

(IHP 2019 Q523 Modified – updated list of codes to account for main sample only)

BASE: US (Q500=11)

Q523.PRELOAD – US SAMPLE TYPE

- 1 Main Wave 1
- 2 Main Wave 2
- 3 Main Wave 3

(IHP 2019 Q524 Modified – updated variable and breaks to designate experimental conditions of the US mail protocol(s))

BASE: US (Q500=11)

Q524.PRELOAD – US MAIL EXPERIMENT

- 1 \$10 pre-incentive with \$25 post-incentive
- 2 \$5 pre-incentive with \$40 post-incentive
- 3 \$5 pre-incentive with \$75 post-incentive
- 4 \$20 pre-incentive, no post-incentive

(IHP 2019 Q530, IHP 2015 Q530 Modified –new code 3 for missing sample-data, IHP 2012 Q530 Modified, IHP 2009 Q1509)

BASE: CANADA (Q500=2)

Q530.PRELOAD - SAMPLE FILE SPECIALTY

- 1 GP/FM
- 2 GP/FM Best Cut
- 3 Sample Information Not Available

(IHP 2019 Q531, IHP 2015 Q531, IHP 2012 Q531, IHP 2009 Q1507)

BASE: CANADA (Q500=2)

Q531.PRELOAD - SAMPLE FILE PROVINCE

- 1 Alberta
- 2 British Columbia
- 3 Manitoba
- 4 New Brunswick
- 5 Newfoundland
- 6 Northwest Territories
- 7 Nova Scotia
- 8 Nunavut
- 9 Ontario
- 10 Prince Edward Island
- 11 Quebec
- 12 Saskatchewan
- 13 Yukon Territory

(IHP 2019 Q532, IHP 2015 Q532 Modified –no alphabetical set of codes; just numeric codes, IHP 2012 Q532, IHP 2009 Q1508)

BASE: CANADA (Q500=2)

Q532.PRELOAD - SAMPLE FILE GENDER

- 1 MALE
- 2 FEMALE

(IHP 2019 Q533)

BASE: CANADA (Q500=2)

Q533.PRELOAD CANADA SAMPLE TYPE

- 1 Wave 1
- 2 Wave 2
- 3 Census

(IHP 2019 Q535 Modified – removed code 3 for territories)

BASE: CANADA (Q500=2)

Q535.CANADIAN HARD-COPY QRE TYPE

- 1 French Main
- 2 English Main

(IHP 2019 Q536)

BASE: CANADA (Q500=2)

Q536.PRELOAD CANADIAN EMAIL ADDRESS AVAILABILITY

- 1 Email address available from sample
- 2 Email address unavailable from sample

(IHP 2019 Q540, IHP 2015 Q540, IHP 2012 Q540, IHP 2009 Q1510)

BASE: GERMANY (Q500=4)

Q540.PRAXIS-STEMPEL FROM QUESTIONNAIRE- SPECIALTY

- 1 GP/Internist
- 2 Pediatrician

(IHP 2019 Q541, IHP 2015 Q541, IHP 2012 Q541, IHP 2009 Q1519)

BASE: GERMANY (Q500=4)

Q541.PRAXIS-STEMPEL FROM QUESTIONNAIRE - REGION

- 1 Schleswig-Holstein
- 2 Hamburg
- 3 Niedersachsen
- 4 Bremen
- 5 Nordrhein-Westfalen
- 6 Rheinland Pfalz
- 7 Saarland
- 8 Hessen
- 9 Baden Wuerttemberg
- 10 Bayern
- 11 Berlin
- 12 Mecklenburg Vorpommern
- 13 Brandenburg
- 14 Sachsen-Anhalt
- 15 Thüringen
- 16 Sachsen

(IHP 2019 Q542)

BASE: GERMANY (Q500=4)

Q542.PRELOAD GERMANY EMAIL ADDRESS

- 1 Email address obtained from sample
- 2 Email address missing from sample

(IHP 2019 Q546, IHP 2015 Q546, IHP 2012 Q546, IHP 2009 Q1512)

BASE: SWEDEN (Q500=8)

Q546.PRELOAD - SAMPLE FILE PUBLIC/PRIVATE

- 1 Public practice
- 2 Private practice

(IHP 2019 Q547, IHP 2015 Q547 Modified – combined Stockholm and Gotland at code 1 and removed code 8, IHP 2012 Q547, IHP 2009 Q1513)

BASE: SWEDEN (Q500=8)

Q547.PRELOAD - SAMPLE FILE REGION

- 1 Stockholm and Gotland
- 2 Uppsala
- 3 Södermanland
- 4 Östergötland
- 5 Jönköping
- 6 Kronoberg
- 7 Kalmar
- 9 Blekinge
- 10 Skåne
- 11 Halland
- 12 Västra Götaland
- 13 Värmland
- 14 Örebro
- 15 Västmanland
- 16 Dalarna
- 17 Gävleborg
- 18 Västernorrland
- 19 Jämtland
- 20 Västerbotten
- 21 Norrbotten

(IHP 2019 Q555 Modified – updated to be a flag for matching MDA's sample against TKW's database)

BASE: AUSTRALIA (Q500=1)

Q555.PRELOAD - AUSTRALIAN SAMPLE MATCHED BETWEEN SOURCES

- 1 MDA only
- 2 MDA matched to TKW database

(IHP 2019 Q556, IHP 2015 Q556, IHP 2012 Q556, IHP 2009 Q1515)

BASE: AUSTRALIA (Q500=1)

Q556.PRELOAD - SAMPLE FILE URBANICITY

- 1 MC - Major Cities
- 2 IR - Inner Regional
- 3 OR - Outer Regional
- 4 R - Remote
- 5 VR - Very Remote

(IHP 2019 Q557, IHP 2015 Q557 Modified –new set of codes for NSW strata, IHP 2012 Q557, IHP 2009 Q1525)

BASE: AUSTRALIA (Q500=1)

Q557.PRELOAD SAMPLE FILE REGION FROM POST CODE

- 1 New South Wales (NSW)
- 2 Australian Capital Territory (ACT)
- 3 Victoria (VIC)
- 4 Queensland (QLD)
- 5 South Australia (SA)
- 6 Western Australia (WA)
- 7 Tasmania (TAS)
- 8 Northern Territory (NT)

(IHP 2019 Q558, IHP 2015 Q558)

BASE: NEW ZEALAND (Q500=6)

Q558.PRELOAD SAMPLE FILE REGION

- 1 Northern/Auckland
- 2 Central North Island
- 3 Lower North Island
- 4 South Island

(IHP 2019 Q563)

BASE: NETH (Q500=5)

Q563.PRELOAD - DUTCH REGION

- 01 Drenthe
- 02 Flevoland
- 03 Friesland
- 04 Gelderland
- 05 Groningen
- 06 Limburg
- 07 Noord-Brabant
- 08 Noord-Holland
- 09 Overijssel
- 10 Utrecht
- 11 Zeeland
- 12 Zuid-Holland

(IHP 2019 Q565, IHP 2015 Q565, IHP 2012 Q565, IHP 2009 Q1524)

BASE: FRANCE (Q500=3)

Q565.PRELOAD - SAMPLE FILE TOWN SIZE

- 1 Rural
- 2 Less than 20,000 inhabitants
- 3 20,000 to less than 100,000 inhabitants
- 4 More than 100,000 inhabitants
- 5 Paris and surrounding suburbs

(IHP 2019 Q570, IHP 2015 Q570, IHP 2012 Q570)

BASE: SWITZERLAND (Q500=9)

Q570.LINGUISTIC REGIONS - PRELOAD

- 1 German
- 2 French
- 3 Italian
- 4 Rhaeto-Romansch

(IHP 2019 Q571 Modified – updated codes to align with latest definition of urbanicity in Switzerland, IHP 2015 Q571, IHP 2012 Q571)

BASE: SWITZERLAND (Q500=9)

Q571.COMMUNITY TYPE - PRELOAD

- 1 Urban
- 2 Intermediate (dense peri-urban area and rural centers)
- 3 Rural

(IHP 2019 Q572, IHP 2015 Q572, IHP 2012 Q572)

BASE: SWITZERLAND (Q500=9)

Q572.CANTONS - PRELOAD

- 01 ZH Zürich
- 02 BE Bern
- 03 LU Luzern
- 04 UR Uri
- 05 SZ Schwyz
- 06 OW Obwalden
- 07 NW Nidwalden
- 08 GL Glarus
- 09 ZG Zug
- 10 FR Fribourg
- 11 SO Solothurn
- 12 BS Basel-Stadt
- 13 BL Basel-Landschaft
- 14 SH Schaffhausen
- 15 AR Appenzell Ausserrhoden
- 16 AI Appenzell Innerrhoden
- 17 SG St. Gallen
- 18 GR Graubünden
- 19 AG Aargau
- 20 TG Thurgau
- 21 TI Ticino
- 22 VD Vaud
- 23 VS Valais
- 24 NE Neuchatel
- 25 GE Geneva
- 26 JU Jura

(IHP 2019 Q573 Modified – removed Sweden from base, IHP 2015 Q573, IHP 2012 Q573 Modified – Sweden added to base and updated range)

BASE: SWITZERLAND (Q500=8 or 9)

Q573.COMPUTE FOR AGE from PRELOAD.

[PN: RANGE 18 -108]

(IHP 2019 Q574, IHP 2015 Q574 Modified –new code 9, IHP 2012 Q574 Modified – Sweden added to base)

BASE: SWEDEN OR SWITZERLAND (Q500=8 or 9)

Q574.PRELOAD - SAMPLE FILE GENDER

- 1 Male
- 2 Female
- 9 Information Missing From Sample

(IHP 2019 Q575, IHP 2015 Q575, IHP 2012 Q575)

BASE: SWITZERLAND (Q500=9)

Q575.PRELOAD - SAMPLE FILE SPECIALTY

- 1 Allgemeine Innere Medizin
- 2 Praktischer Arzt
- 3 Pädiatrie

(IHP 2019 QRCODE)

BASE: US, CAN (Q500=02,11) AND MAIL (Q500a=2)

QRCODE. QRCODE FOR MAIL COMPLETES

[PN: 4 alphanumeric digits]

SECTION 700: INTRODUCTIONS AND SCREENERS

(IHP 2019 SCREEN 1)

BASE: UK PHONE RESPONDENTS (Q500=10 AND Q500a=3)

[SCREEN 1]

(INTERVIEWER NOTE: Click “next” to begin the recruitment screener)

(IHP 2019 INTID Modified – added programming note to account for modal logic)

BASE: UK RESPONDENTS WHO ARE SCREENED BY PHONE (Q500=10)

[PN: FOR BACK-END PROCESSING, IF INTID IS BLANK OR SYSTEM-MISSING, THIS IS ACCEPTABLE AND INDICATES A SELF-SCREENED WEB RECORD.]

INTID. Please enter your unique interviewer ID.

_____ [PN: RANGE AD01-AD15]

(IHP 2019 S1 Modified – updated Web text)

BASE: UK RESPONDENTS (Q500=10)

S1.

[PHONE ONLY: “Hello, I’m _____ calling from [INSERT CALL CENTER NAME], a professional research firm. We are conducting an international survey of GPs in partnership with The Health Foundation and The Commonwealth Fund and would like to invite you to participate in this interview that should take about 15 minutes. For your participation, we will pay you £30 GBP, if you qualify. Your answers will be completely confidential and used for research purposes only.

Thank you for agreeing to participate in this important study. Please note this call may be monitored by my supervisor.

(IF NECESSARY: The Commonwealth Fund, located in the US, is a private foundation that aims to promote a high performing health care system that achieves better access, improved quality, and greater efficiency, particularly for society’s most vulnerable.)

Now, to get started...”]

[WEB ONLY:

2022 International Health Policy Study of Primary Care Physicians [BOLD AND CENTERED ON THE SCREEN]

Welcome and thank you for taking part in this survey, being conducted by the Health Foundation and the Commonwealth Fund, a U.S. health care foundation. This survey provides policymakers with a better understanding of the views and experiences of primary care doctors in caring for their patients. Your response is very important to help us better understand how primary care doctors view the health care system in the UK.

This survey should take about 15 minutes of your time. For your participation, we will pay you £30 GBP, if you qualify. Your answers will be completely confidential and used for research purposes only.

If necessary, you have the option to pause the survey and finish it later by clicking “Finish later.” To resume taking the survey, return to the link that was provided to you via email. Click the link to take you to the page where you left off. You will also need to log in again after thirty minutes of inactivity.

Thank you for your help with this important study.

Please click ‘NEXT’ to continue. For more information about the study, click here. [PN: LINK THE “click here” TEXT TO THE FAQ PAGE CONTENT LOCATED IN <H:\U1096\DP\FAQ for Web Program>]

(IHP 2021 SC5 Modified – added code 2 for Web, IHP 2020 SC5)

BASE: UK RESPONDENTS (Q500=10)

S1a. Your phone number has been randomly selected for this survey, which is voluntary and can be stopped at any time. The survey should take around 15 to 20 minutes to complete.

Your personal information and any opinions you share will be treated in confidence, used for research purposes only and combined with other people's responses so you will not be identified. The data will be sent to SSRS in the United States for processing.

If you agree to participate, you are entitled to all rights included in the General Data Protection Regulation, such as the right to access your information. For more information, you can visit our website at www.ssrs.com/privacy-policy or email us at info@ssrs.com.

Do you agree to participate in the survey?

1 Yes

2 WEB ONLY: No

999 PHONE ONLY: (V) Decline to answer; WEB/MAIL ONLY: Blank THANK & TERM.
Record as RQS1a.

(IHP 2019 S1, IHP 2015 S1 Modified – included on Web, added text for self-screening on Web)

BASE: UK RESPONDENTS (Q500=10)

S1b. What is your specialty?

1 General Practitioner

2 Other

998 PHONE ONLY: (DO NOT READ) Not Sure

999 PHONE ONLY: (V) Decline to answer; WEB/MAIL ONLY: Blank

[PN: IF S1b=2,998,999, TERMINATE. DO NOT ALLOW SKIPPING.]

(IHP 2019 S2, IHP 2015 S2 Modified – included on Web, revised text to be Web and Phone)

BASE: UK GENERAL PRACTITIONERS (S1b=1)

S2. Which of the following best describes your current job title?

PHONE ONLY: "(INTERVIEWER NOTE: READ LIST)"

1 GP Partner

2 GP Principal

3 Salaried GP

4 GP Locum

999 PHONE ONLY: (V) Decline to answer; WEB/MAIL ONLY: Blank

[PN: IF S2=999, TERMINATE. DO NOT ALLOW SKIPPING.]

(IHP 2019 S3, IHP 2015 S3 Modified – included on Web, revised text to be Web and Phone)

BASE: QUALIFYING UK GENERAL PRACTITIONERS (S2=1-4)

S3. What proportion of your time is spent in direct patient care?

PHONE ONLY: “(INTERVIEWER NOTE: If respondent is not sure, ask for best estimate; read list if necessary)”

- 1 Less than 50%
- 2 50% or more
- 9 PHONE ONLY: (V) Decline to answer; WEB/MAIL ONLY: Blank

[PN: IF S3=1,999, TERMINATE. DO NOT ALLOW SKIPPING.]

(IHP 2019 S4, IHP 2015 Modified – included on Web, added programming note to auto-populate S5 for Web)

BASE: QUALIFYING UK GENERAL PRACTITIONERS SPENDING AT LEAST 50% OF TIME IN DIRECT PATIENT CARE (S3=2)

S4. What region of the UK do you currently practice medicine in?

- 1 England excluding London
- 2 London
- 3 Scotland
- 4 Wales
- 5 Northern Ireland
- 999 PHONE ONLY: (V) Decline to answer; WEB/MAIL ONLY: Blank

[PN: IF S4=999, TERMINATE. DO NOT ALLOW SKIPPING.]

(IHP 2019 S5 Modified – added code 4 to streamline programming logic for screening process and updated code 3, IHP 2015 Modified – removed response-option 4 for fax)

BASE: QUALIFYING UK RESPONDENTS (S4=1-5)

[PN: IF SELF-SCREENED WEB (Q500a=1 AND INTID=BLANK OR SYSMIS), AUTO-POPULATE S5=4 AND CONTINUE TO Q1.]

S5. Thank you so much. We can take about 15 minutes now to complete the survey over the phone or I can send you an email with a web link to complete the survey.

- 1 Phone Now
- 2 Phone Later
- 3 Email with web link (Online), screened on Phone
- 4 Self-screened Web
- 999 PHONE ONLY: (DO NOT READ) Decline to answer/not interested in completing survey

[PN: IF QS5=999, TERMINATE. DO NOT ALLOW SKIPPING.]

(IHP 2019 S6, IHP 2015 Modified – removed option for fax and revised interviewer notes)

BASE: UK PHONE RESPONDENTS (Q500a=3 AND S5=1-3)

S6. IF S5=1: (INTERVIEWER NOTE: If respondent wants to complete by PHONE now, click “Next” to continue to the survey.)

IF S5=2: (INTERVIEWER NOTE: If respondent wants to complete by PHONE later, schedule a time for an appointment and collect/confirm a contact phone number. Once all of the information is collected, click “Next” and then click “Finish Later” on the INTRO screen to exit from the program.)

IF S5=3: (INTERVIEWER NOTE: If respondent wants to complete by WEB, collect email address and send respondent an email with the web link (**PN: ENTER (WEB LINK)**) and additional information (e.g., endorsement letters) to respondent’s email address. Once all of the information is collected, click “Next” and then click “Finish Later” on the INTRO screen to exit from the program.)

(IHP 2019 Modified – updated survey name and instructions for returning to individualized web link, IHP 2015 Modified – updated base for Web or scheduled Phone, revised survey title, and revised text of second paragraph)

BASE: UK RESPONDENTS SCREENED ON THE PHONE AND BEGIN SURVEY LATER (S5=2,3)

UKINTRO. **2022 International Health Policy Study of Primary Care Physicians** [BOLD AND CENTERED ON THE SCREEN]

Welcome and thank you for taking part in this survey, being conducted by the Health Foundation and the Commonwealth Fund, a U.S. health care foundation. This survey provides policymakers with a better understanding of the views and experiences of primary care doctors in caring for their patients. Your response is very important to help us better understand how primary care doctors view the health care system in the UK.

This survey should take about 15 minutes of your time. **[WEB ONLY:** If necessary, you have the option to pause the survey and finish it later by clicking “Finish later.” To resume taking the survey, return to the link that was provided to you via email. Click the link to take you to the page where you left off. You will also need to log in again after thirty minutes of inactivity.]

Thank you for your help with this important study.

[WEB ONLY: Please click ‘NEXT’ to continue. For more information about the study, click here. [PN: LINK THE “click here” TEXT TO THE FAQ PAGE CONTENT LOCATED IN <H:\U1096\DP\FAQ for Web Program>]]

(IHP 2019 S7, IHP 2015 Modified – included on Web, revised text to be Web and Phone)

BASE: UK TERMINATES (S1=2,8,9 OR S2=9 OR S3=1,9 OR S4=9 OR S5=9)

S7. PHONE ONLY: Thank you for your time.

SELF-SCREENED WEB: Unfortunately, you do not qualify for this study. Thank you for your time.

(IHP 2019)

BASE: WEB AUSTRALIA, CANADA, FRANCE, NZ, US RESPONDENTS (Q500=1,2,3,6,11 AND Q500a=1)

LANDING PAGE. Thank you for your help with this important study.

To get started, please enter your unique passcode that you received by mail or email here: <<PASSCODE>>

Survey Instructions (linked to 'please click here' in the landing page's footer):

Survey Instructions

NAVIGATING:

Do not use the browser's back button or browser menus while taking the survey. To move from page to page, use the navigation buttons at the bottom of each screen. On the bottom of each page, there are 3 buttons to help move you through the survey:

"BACK" to go back to an earlier question.

"NEXT" to go to the next question.

"FINISH LATER" to temporarily stop taking the survey.

ANSWERING QUESTIONS:

Please answer EACH question by selecting the item or category that best describes your response.

To select responses in questions with buttons, click on the button beside your response. If a question asks for a text response, click in the box and begin typing.

FINISH LATER:

When you wish to resume, return to the link you were provided, and it will take you to the last question you answered.

(IHP 2019 CANFR1, IHP 2015 Modified – revised code 2 to be in French)

BASE: CANADA RESPONDENTS (Q500=2)

CANFR1. Would you prefer to take this survey in:

- 1 English
- 2 Français

[PN: IF RESPONDENT SKIPS, AUTO-PUNCH CANFR1=1 TO DISPLAY ENGLISH.]

(IHP 2019 Modified – updated survey name, removed state-specific partner language, and updated instructions for returning to individualized web link, Revised IHP 2015 – revised survey title and text of first paragraph)

BASE: AUSTRALIA RESPONDENTS (Q500=1)

AUSINTRO. **2022 International Health Policy Study of Primary Care Physicians** [BOLD AND CENTERED ON THE SCREEN]

Welcome and thank you for taking part in this survey, being conducted by the Commonwealth Fund, a U.S. health care foundation, with support from The Royal Australian College of General Practitioners. This survey provides policymakers with a better understanding of the views and experiences of primary care doctors in caring for their patients. Your response is very important to help us better understand how primary care doctors view the health care system in Australia.

This survey should take about 15 minutes of your time. If necessary, you have the option to pause the survey and finish it later by clicking “Finish later.” To resume taking the survey, return to the link that was provided to you via email. Click the link to take you to the page where you left off. You will also need to log in again after thirty minutes of inactivity.

Thank you for your help with this important study.

Please click ‘NEXT’ to continue. For more information about the study, click here. [PN: LINK THE “click here” TEXT TO THE FAQ PAGE CONTENT LOCATED IN <H:\U1096\DP\FAQ for Web Program>]

(IHP 2019 Modified – updated survey name, IHP 2015 Modified – revised survey title with current year and revised text of first paragraph)

BASE: CANADA NON-QUEBEC RESPONDENTS (Q500=2 AND Q531=1-10, 12-13)

CANINTRO. **2022 International Health Policy Study of Primary Care Physicians** [BOLD AND CENTERED ON THE SCREEN]

Welcome and thank you for taking part in this survey, being conducted by the Canadian Institute for Health Information (CIHI), other national health organizations, and the Commonwealth Fund, a U.S. health care foundation. This survey provides policymakers with a better understanding of the views and experiences of primary care doctors in caring for their patients. Your response is very important to help us better understand how primary care doctors view the health care system in Canada.

This survey should take about 15 minutes of your time. **[WEB ONLY:** If necessary, you have the option to pause the survey and finish it later by clicking “Finish later.” To resume taking the survey, go to the survey home page at www.internationaldoctorstudy.ca, log in again with your passcode, and click the link to take you to the page where you left off. You will also need to log in again after thirty minutes of inactivity.]

Thank you for your help with this important study.

Please click ‘NEXT’ to continue. For more information about the study, click here. [PN: LINK THE “click here” TEXT TO THE FAQ PAGE CONTENT LOCATED IN <H:\U1096\DP\FAQ for Web Program>]

(IHP 2019 Modified – updated survey name, IHP 2015 Modified – revised survey title with current year and change of sponsor)

BASE: QUEBEC RESPONDENTS (Q531=11)

QUEBINTRO. **2022 International Health Policy Study of Primary Care Physicians** [BOLD AND CENTERED ON THE SCREEN]

Welcome and thank you for taking part in this survey, being conducted by Commissaire à la Santé et au bien-être (CSBE), other national health organizations, and the Commonwealth Fund, a U.S. health care foundation. This survey provides policymakers with a better understanding of the views and experiences of primary care doctors in caring for their patients. Your response is very important to help us better understand how primary care doctors view the health care system in Canada.

This survey should take about 15 minutes of your time. **[WEB ONLY:** If necessary, you have the option to pause the survey and finish it later by clicking “Finish later.” To resume taking the survey, go to the survey home page at www.internationaldoctorstudy.ca, log in again with your passcode, and click the link to take you to the page where you left off. You will also need to log in again after thirty minutes of inactivity.]

Thank you for your help with this important study.

Please click ‘NEXT’ to continue. For more information about the study, click here. [PN: LINK THE “click here” TEXT TO THE FAQ PAGE CONTENT LOCATED IN <H:\U1096\DP\FAQ for Web Program>]]

(IHP 2019 Modified – updated text to match the framing of the UK’s Phone introduction, IHP 2015 Modified - revised text to include 2015 as the last year for data-collection and revised text to include both PHONE ONLY and WEB ONLY text)

BASE: FRANCE RESPONDENTS (Q500=3)

FRANINTRO.

[PHONE ONLY: “Hello, I’m _____ calling from [INSERT CALL CENTER NAME], a professional research firm. We are conducting an international survey of primary care doctors in partnership with la Haute Autorité de santé (HAS), la Caisse Nationale de l’Assurance Maladie des Travailleurs Salariés (CNAMTS), and The Commonwealth Fund, and would like to invite you to participate in this interview that should take about 15 minutes. For your participation, we will pay you €30, if you qualify. Your answers will be completely confidential and used for research purposes only.

Thank you for agreeing to participate in this important study. Please note this call may be monitored by my supervisor.

(IF NECESSARY: The Commonwealth Fund, located in the US, is a private foundation that aims to promote a high performing health care system that achieves better access, improved quality, and greater efficiency, particularly for society’s most vulnerable.)

Now, to get started...”]

**[WEB ONLY:
2022 International Health Policy Study of Primary Care Physicians [BOLD AND CENTERED ON
THE SCREEN]**

Welcome and thank you for taking part in this survey, being conducted by la Haute Autorité de santé (HAS), la Caisse Nationale de l'Assurance Maladie des Travailleurs Salariés (CNAMTS), and the Commonwealth Fund, a U.S. health care foundation. This survey provides policymakers with a better understanding of the views and experiences of primary care doctors in caring for their patients. Your response is very important to help us better understand how primary care doctors view the health care system in France.

This survey should take about 15 minutes of your time. For your participation, we will pay you €30, if you qualify. Your answers will be completely confidential and used for research purposes only.

If necessary, you have the option to pause the survey and finish it later by clicking "Finish later." To resume taking the survey, return to the link that was provided to you via email. Click the link to take you to the page where you left off. You will also need to log in again after thirty minutes of inactivity.

Thank you for your help with this important study.

Please click 'NEXT' to continue. For more information about the study, click here. [PN: LINK THE "click here" TEXT TO THE FAQ PAGE CONTENT LOCATED IN <H:\U1096\DP\FAQ for Web Program>]]

(IHP 2021 SC5 Modified – added code 2 for Web, IHP 2020 SC5)

BASE: FRANCE RESPONDENTS (Q500=3)

FR1. Your phone number has been randomly selected for this survey, which is voluntary and can be stopped at any time. The survey should take around 15 to 20 minutes to complete.

Your personal information and any opinions you share will be treated in confidence, used for research purposes only and combined with other people's responses so you will not be identified. The data will be sent to SSRS in the United States for processing.

If you agree to participate, you are entitled to all rights included in the General Data Protection Regulation, such as the right to access your information. For more information, you can visit our website at www.ssrs.com/privacy-policy or email us at info@ssrs.com.

Do you agree to participate in the survey?

1 Yes

2 WEB ONLY: No

999 PHONE ONLY: (V) Decline to answer; WEB/MAIL ONLY: Blank THANK & TERM.
Record as RFR1.

(IHP 2022 New)

BASE: FRANCE RESPONDENTS (Q500=3)

FR2. What is your specialty?

- 1 General Practitioner
 - 2 Other
- 998 PHONE ONLY: (DO NOT READ) Not Sure
999 PHONE ONLY: (V) Decline to answer; WEB/MAIL ONLY: Blank

[PN: IF FR2=2,998,999, TERMINATE. DO NOT ALLOW SKIPPING.]

(IHP 2022 New)

BASE: FRANCE RESPONDENTS (Q500=3)

FR3. As a general practitioner, are you involved with direct patient care, or not?

- 1 Yes, involved in direct patient care
 - 2 No, not involved in direct patient care
- 999 PHONE ONLY: (V) Decline to answer; WEB/MAIL ONLY: Blank

[PN: IF FR3=2,999, TERMINATE. DO NOT ALLOW SKIPPING.]

(IHP 2022 New)

BASE: QUALIFYING FRANCE RESPONDENTS (FR3=1)

[PN: IF SELF-SCREENED WEB (Q500a=1 AND FR3=1), AUTO-POPULATE FR4=4 AND CONTINUE TO Q1.]

FR4. Thank you so much. We can take about 15 minutes now to complete the survey over the phone or I can send you an email with a web link to complete the survey at a time that is convenient for you.

- 1 Phone Now
 - 2 Phone Later
 - 3 Email with web link (Online), screened on Phone
 - 4 Self-screened Web
- 999 PHONE ONLY: (DO NOT READ) Decline to answer/not interested in completing survey

[PN: IF FR4=999, TERMINATE. DO NOT ALLOW SKIPPING.]

(IHP 2022 New)

BASE: FRANCE PHONE RESPONDENTS (Q500a=3 AND FR4=1-3)

FR5. IF FR4=1: (INTERVIEWER NOTE: If respondent wants to complete by PHONE now, click “Next” to continue to the survey.)

IF FR4=2: (INTERVIEWER NOTE: If respondent wants to complete by PHONE later, schedule a time for an appointment and collect/confirm a contact phone number. Once all of the information is collected, click “Next” and then click “Finish Later” on the INTRO screen to exit from the program.)

IF FR4=3: (INTERVIEWER NOTE: If respondent wants to complete by WEB, collect email address and send respondent an email with the web link (**PN: ENTER (WEB LINK)**) and additional information (e.g., endorsement letters) to respondent’s email address. Once all of the information is collected, click “Next” and then click “Finish Later” on the INTRO screen to exit from the program.)

(IHP 2022 New)

BASE: FRANCE RESPONDENTS SCREENED ON THE PHONE AND BEGIN SURVEY LATER (FR4=2.3)

FRANINTRO_1. **2022 International Health Policy Study of Primary Care Physicians** [BOLD AND CENTERED ON THE SCREEN]

Welcome and thank you for taking part in this survey, being conducted by la Haute Autorité de santé (HAS), la Caisse Nationale de l’Assurance Maladie des Travailleurs Salariés (CNAMTS), and the Commonwealth Fund, a U.S. health care foundation. This survey provides policymakers with a better understanding of the views and experiences of primary care doctors in caring for their patients. Your response is very important to help us better understand how primary care doctors view the health care system in France.

This survey should take about 15 minutes of your time. **[WEB ONLY:** If necessary, you have the option to pause the survey and finish it later by clicking “Finish later.” To resume taking the survey, return to the link that was provided to you via email. Click the link to take you to the page where you left off. You will also need to log in again after thirty minutes of inactivity.]

Thank you for your help with this important study.

[WEB ONLY: Please click ‘NEXT’ to continue. For more information about the study, click here. [PN: LINK THE “click here” TEXT TO THE FAQ PAGE CONTENT LOCATED IN <H:\U1096\DP\FAQ for Web Program>]]

(IHP 2022 New)

BASE: FRANCE TERMINATES (FR1=2,999 OR FR2=2,998,999 OR FR3=2,999 OR FR4=999)

FR6. PHONE ONLY: Thank you for your time.

SELF-SCREENED WEB: Unfortunately, you do not qualify for this study. Thank you for your time.

(IHP 2019 Modified – updated survey name and instructions for returning to individualized web link, IHP 2015 Modified – revised survey title)

BASE: NZ RESPONDENTS (Q500=6)

NZINTRO. 2022 International Health Policy Study of Primary Care Physicians [BOLD AND CENTERED ON THE SCREEN]

Welcome and thank you for taking part in this survey, being conducted by the Commonwealth Fund, a U.S. health care foundation, with support from The Royal New Zealand College of General Practitioners. This survey provides policymakers with a better understanding of the views and experiences of primary care doctors in caring for their patients. Your response is very important to help us better understand how primary care doctors view the health care system in New Zealand.

This survey should take about 15 minutes of your time. If necessary, you have the option to pause the survey and finish it later by clicking “Finish later.” To resume taking the survey, return to the link that was provided to you via email. Click the link to take you to the page where you left off. You will also need to log in again after thirty minutes of inactivity.

Thank you for your help with this important study.

Please click ‘NEXT’ to continue. For more information about the study, click here. [PN: LINK THE “click here” TEXT TO THE FAQ PAGE CONTENT LOCATED IN <H:\U1096\DP\FAQ for Web Program>]]

(IHP 2019 Modified – updated survey name, IHP 2015 Modified – revised survey title with current year)

BASE: Sweden RESPONDENTS (Q500=8)

SWEDINTRO. 2022 International Health Policy Study of Primary Care Physicians [BOLD AND CENTERED ON THE SCREEN]

Welcome and thank you for taking part in this survey, being conducted by the Swedish Agency for Health and Care Services Analysis and an American health care foundation. This survey provides policymakers with a better understanding of the views and experiences of primary care doctors in caring for their patients. Your response is very important to help us better understand how primary care doctors view the health care system in Sweden. The information you provide are protected according to The Freedom of the Press Act (1949:105) and the Public Access to Information and Secrecy Act (2009: 400).

This survey should take about 15 minutes of your time. **[WEB ONLY:** If necessary, you have the option to pause the survey and finish it later by clicking “Finish later.” To resume taking the survey, go to the survey home page at **(ADD WEBSITE NAME - WE SUGGEST USING www.internationaldoctorstudy.se)**, log in again with your passcode, and click the link to take you to the page where you left off. You will also need to log in again after thirty minutes of inactivity.]

Thank you for your help with this important study.

Please click ‘NEXT’ to continue.

(IHP 2019 Modified – updated survey name, IHP 2015 Modified – revised survey title with current year)

BASE: Switzerland RESPONDENTS (Q500=9)

SWITZINTRO. **2022 International Health Policy Study of Primary Care Physicians** [BOLD AND CENTERED ON THE SCREEN]

Welcome and thank you for taking part in this survey, being conducted by the Federal Office of Public Health. This survey provides policymakers with a better understanding of the views and experiences of primary care doctors in caring for their patients. Your response is very important to help us better understand how primary care doctors view the health care system in Switzerland.

This survey should take about 15 minutes of your time. **[WEB ONLY:** If necessary, you have the option to pause the survey and finish it later by clicking “Finish later.” To resume taking the survey, go to the survey home page at **(ADD WEBSITE NAME - WE SUGGEST USING www.internationaldoctorstudy.ch)**, log in again with your passcode, and click the link to take you to the page where you left off. You will also need to log in again after thirty minutes of inactivity.]

Thank you for your help with this important study.

Please click ‘NEXT’ to continue.

(IHP 2019 Modified – updated survey name, IHP 2015 Modified – revised survey title with current year)

BASE: US RESPONDENTS (Q500=11)

USINTRO. **2022 International Health Policy Study of Primary Care Physicians** [BOLD AND CENTERED ON THE SCREEN]

Welcome and thank you for taking part in this survey, being conducted by the Commonwealth Fund. This survey provides policymakers with a better understanding of the views and experiences of primary care doctors in caring for their patients. Your response is very important to help us better understand how primary care doctors view the health care system in the U.S.

This survey should take about 15 minutes of your time. **[WEB ONLY:** If necessary, you have the option to pause the survey and finish it later by clicking “Finish later.” To resume taking the survey, go to the survey home page at www.internationaldoctorstudy.org, log in again with your passcode, and click the link to take you to the page where you left off. You will also need to log in again after thirty minutes of inactivity.]

Thank you for your help with this important study.

Please click ‘NEXT’ to continue. For more information about the study, click here. [PN: LINK THE “click here” TEXT TO THE FAQ PAGE CONTENT LOCATED IN <H:\U1096\DP\FAQ for Web Program>]

(IHP 2019 AUSNZSCREEN Modified – added code 9)

BASE: AUSTRALIA AND NEW ZEALAND RESPONDENTS (Q500=1,6)

AUSNZSCREEN. As a general practitioner, are you involved with direct patient care, or not?

- 1 Yes, involved in direct patient care
- 2 No, not involved in direct patient care
- 999 PHONE ONLY: (V) Decline to answer; WEB/MAIL ONLY: Blank

[PN: IF AUSNZSCREEN=2,9, TERMINATE. DO NOT ALLOW SKIPPING.]

(IHP 2019 Q1a, IHP 2015 Modified – only contains WEB/MAIL set of codes rather than both a web-exclusive set and a WEB/MAIL set, sample-data used when self-report data is missing)

BASE: AUSTRALIA RESPONDENTS (Q500=1)

1a. Please select your state:

- 01 New South Wales (NSW)
- 02 Australian Capital Territory (ACT)
- 03 Victoria (VIC)
- 04 Queensland (QLD)
- 05 South Australia (SA)
- 06 Western Australia (WA)
- 07 Tasmania (TAS)
- 08 Northern Territory (NT)
- 996 MAIL ONLY (AS PART OF BACK-END PROCEDURES ONLY): Multiple-response code
- 999 WEB/MAIL ONLY: Blank

[PN: IF WEB AND Q1a=999, SHOW EM1. IF RESPONDENT SKIPS AGAIN, ALLOW SKIP.]

(IHP 2019 Q1b Modified – updated list of codes to fully broken-out DHBs instead of 4-break region, IHP 2015)

BASE: NZ RESPONDENTS (Q500=6)

1b. In which of these regions are you located?

- 1 Auckland
- 2 Bay of Plenty
- 3 Capital & Coast
- 4 Counties Manukau
- 5 Hawkes Bay
- 6 Hutt Valley
- 7 Lakes
- 8 Mid Central
- 9 Northland
- 10 Tairāwhiti
- 11 Taranaki
- 12 Waikato
- 13 Wairarapa
- 14 Waitematā
- 15 Whanganui
- 16 Canterbury
- 17 Nelson-Marlborough
- 18 South Canterbury
- 19 Southern
- 20 West Coast

996 MAIL ONLY (AS PART OF BACK-END PROCEDURES ONLY): Multiple-response code

999 WEB/MAIL ONLY: Blank

[PN: IF WEB AND Q1b=999, SHOW EM1. IF RESPONDENT SKIPS AGAIN, ALLOW SKIP.]

(IHP 2019 GER1)

BASE: GERMANY RESPONDENTS (Q500=4)

GER1. What is your main activity in your practice?

- 1 Specialist in general medicine
- 2 Specialist in internal medicine with primary care
- 3 Specialist in paediatrics and juvenile medicine
- 4 Practitioner
- 5 Another area of activity
- 6 Not sure

996 MAIL ONLY (AS PART OF BACK-END PROCEDURES ONLY): Multiple-response code

999 WEB/MAIL ONLY: Blank

(IHP 2019 Q1, IHP 2015 Q1 Modified – updated question-text and 5 pt. bipolar scale, IHP 2012 Q805 Modified – slightly updated question-text, IHP 2009 Q700)

BASE: ALL RESPONDENTS

1. How would you rate the overall performance of the healthcare system in [INSERT COUNTRY]:

PHONE ONLY: Would you say it is... (READ LIST)?

- 1 Very good
- 2 Good
- 3 Acceptable
- 4 Poor
- 5 Very Poor

996 MAIL ONLY (AS PART OF BACK-END PROCEDURES ONLY): Multiple-response code

998 PHONE ONLY: (V) Not sure

999 PHONE ONLY: (V) Decline to answer; WEB/MAIL ONLY: Blank

IF WEB AND Q1=999, SHOW EM1, IF RESPONDENT SKIPS AGAIN ALLOW SKIP.

(IHP 2019 Q2, IHP 2015 Q2 Modified – updated 5 pt. unipolar scale, IHP 2012 Q810, IHP 2009 Q705)

BASE: ALL RESPONDENTS

2. Overall, how satisfied are you with [IF AUS, NZ, UK (Q500=1,6, 10 DISPLAY: “practising” IF ELSE, (Q500=2-5, 7-9, 11), DISPLAY: “practicing”] medicine?

PHONE ONLY: Would you say... (READ LIST)?

- 1 Extremely satisfied
- 2 Very satisfied
- 3 Moderately satisfied
- 4 Slightly satisfied
- 5 Not at all satisfied

996 MAIL ONLY (AS PART OF BACK-END PROCEDURES ONLY): Multiple-response code

998 PHONE ONLY: (V) Not sure

999 PHONE ONLY: (V) Decline to answer; WEB/MAIL ONLY: Blank

(IHP 2019 Q3 Modified – updated frame of reference to ask about time since the COVID-19 pandemic, IHP 2015 Q3, IHP 2012 Q815, IHP 2009 Q710)

BASE: ALL RESPONDENTS

3. In general, do you think the quality of medical care your patients receive throughout the health care system has improved, has become worse, or is it about the same since March 2020 when the COVID-19 pandemic began?

- 1 Improved
- 2 Worse
- 3 About the same

996 MAIL ONLY (AS PART OF BACK-END PROCEDURES ONLY): Multiple-response code

998 PHONE ONLY: (V) Not sure

999 PHONE ONLY: (V) Decline to answer; WEB/MAIL ONLY: Blank

PN: SHOW TO ALL: “If you practice in multiple settings, please consider your main practice setting (i.e., where you spend the most time with patients) when answering the rest of this survey.”

SECTION A: ACCESS TO CARE

(IHP 2019 Q5, IHP 2015 Q9 Modified – updated question-text, 2015 item d is now item b and new item c, IHP 2012 Q1010 Modified – updated question-text, new item b (item 5 is now item c, and item 3 is now item d)

BASE: ALL RESPONDENTS

[PN: SET UP AS GRID FOR WEB]

4. Do you or any other health care professionals that work with you in your practice provide care in the following ways [PHONE ONLY: “(READ FIRST ITEM)”]; WEB/MAIL ONLY: “:”]

PHONE ONLY: (IF RESPONDENT SAYS “Yes,” ASK: “Would you say frequently or occasionally?)

PHONE ONLY: How about (READ ITEM)?

- 1 Yes, frequently
- 2 Yes, occasionally
- 3 Never

996 MAIL ONLY (AS PART OF BACK-END PROCEDURES ONLY): Multiple-response code

998 PHONE ONLY: (V) Not sure

999 PHONE ONLY: (V) Decline to answer; WEB/MAIL ONLY: Blank

- a. Make home visits
- b. Coordinate care with social services or other community providers
- c. Use video consultations

(IHP 2019 Q6 Modified – added note to include in-person and telehealth appts, removed code 5 for Norway)

BASE: ALL RESPONDENTS

5. How often does your practice offer [IF UK, (Q500=10), DISPLAY: “your registered patients”] appointments after 6pm during the week (i.e., Monday through Friday)?

WEB/MAIL ONLY: *(Note: Please include both in-person and telehealth appointments.)*

PHONE ONLY: (IF NECESSARY: Please include both in-person and telehealth appointments)

PHONE ONLY: (READ LIST)

- 1 Never
- 2 One day per week
- 3 2 to 3 days per week
- 4 4 or more days per week

996 MAIL ONLY (AS PART OF BACK-END PROCEDURES ONLY): Multiple-response code

998 PHONE ONLY: (V) Not sure

999 PHONE ONLY: (V) Decline to answer; WEB/MAIL ONLY: Blank

(IHP 2019 Q7 Modified – added note to include in-person and telehealth appts, removed code 5 for Norway)

BASE: ALL RESPONDENTS

6. How often does your practice offer [IF UK, (Q500=10), DISPLAY: “your registered patients”] appointments during the weekend (i.e., Saturday or Sunday)?

WEB/MAIL ONLY: *(Note: Please include both in-person and telehealth appointments.)*

PHONE ONLY: (IF NECESSARY: Please include both in-person and telehealth appointments)

PHONE ONLY: (READ LIST)

1 Never

2 One day per month

3 2 to 3 days per month

4 4 or more days per month

996 MAIL ONLY (AS PART OF BACK-END PROCEDURES ONLY): Multiple-response code

998 PHONE ONLY: (V) Not sure

999 PHONE ONLY: (V) Decline to answer; WEB/MAIL ONLY: Blank

(IHP 2019 Q8 Modified – updated response-options to be broken out by appt type, IHP 2015 Q8 Modified – updated question-text to emphasize in-person visits and include specific translated examples per country, IHP 2012 Q915 Modified -- Same as in 2012 for US, UK, Switzerland, and France; modified for all other countries - Sweden pipe in new in 2015, All other country pipe in new in 2015 except for Switzerland and France, IHP 2009 Q815)

BASE: ALL RESPONDENTS

7. Not including hospital emergency departments, does your practice have an arrangement, either within or with another practice, where patients can be seen by a doctor or nurse when the practice is closed (e.g., [IF NOR, (Q500=7), DISPLAY: “municipal emergency service”; IF NETH, (Q500=5), DISPLAY: “huisartsenposten”; IF FRA, (Q500=3), DISPLAY: “Maison Medicale de garde”; IF ELSE, (Q500=1, 2, 4, 6, 8-11), DISPLAY: “after-hours”])?

1 Yes, patients can only be seen in-person

2 Yes, patients can only be seen via telehealth

3 Yes, patients can be seen both in-person and via telehealth

4 No

996 MAIL ONLY (AS PART OF BACK-END PROCEDURES ONLY): Multiple-response code

998 PHONE ONLY: (V) Not sure

999 PHONE ONLY: (V) Decline to answer; WEB/MAIL ONLY: Blank

SECTION B: USE OF TELEHEALTH

PN: SHOW TO ALL: “The next few questions are about telehealth – providing clinical care and other health related services to patients by video or telephone, instead of having an in-person visit.”

(IHP 2022 New)

BASE: ALL RESPONDENTS

[PN: SET UP AS GRID FOR WEB]

[PN: ALLOW RANGE 0-100]

[PN: DECIMALS SHOULD BE ALLOWED]

[PN: AUTO-PUNCH 0s IN SKIPPED FIELDS, IF AT LEAST ONE FIELD IS ANSWERED 0-100]

[PN: If a respondent enters a non-numeric value please show the following error message (“Please enter a numeric value.”)]

- 8. Currently, in a typical week, about what percent of your patient [IF NZ OR UK, (Q500=6,10), DISPLAY: “consultations”; IF ELSE, (Q500=1-5, 7-9,11), DISPLAY: “visits”] are conducted:

WEB/MAIL ONLY: (Note: Your best estimate is fine. Total should add to about 100%.)

PHONE ONLY: (IF NECESSARY: Your best estimate is fine. Total should add to about 100%)

	Percent of Patient Visits
1 In-person	_____ %
2 By telephone (voice or text)	_____ %
3 By video	_____ %
998 PHONE ONLY: (V) Not sure	
999 PHONE ONLY: (V) Decline to answer; WEB/MAIL ONLY: Blank	

(IHP 2022 New)

BASE: RESPONDENTS WHO CURRENTLY USE TELEHEALTH (Q8 2>0% OR Q8 3>0%)

- 9. Overall, how satisfied, if at all, are you with practicing telehealth?

- 1 Very satisfied
- 2 Somewhat satisfied
- 3 Somewhat dissatisfied
- 4 Very dissatisfied
- 996 MAIL ONLY (AS PART OF BACK-END PROCEDURES ONLY): Multiple-response code
- 998 PHONE ONLY: (V) Not sure
- 999 PHONE ONLY: (V) Decline to answer; WEB/MAIL ONLY: Blank

(IHP 2022 New)

BASE: RESPONDENTS WHO CURRENTLY USE TELEHEALTH (Q8 2>0% OR Q8 3>0%)

- 10. How easy or difficult has it been to implement a telehealth platform in your practice?

PHONE ONLY: (READ LIST)

- 1 Very easy
- 2 Somewhat easy
- 3 Somewhat difficult
- 4 Very difficult
- 996 MAIL ONLY (AS PART OF BACK-END PROCEDURES ONLY): Multiple-response code
- 998 PHONE ONLY: (V) Not sure
- 999 PHONE ONLY: (V) Decline to answer; WEB/MAIL ONLY: Blank

(IHP 2022 New)

BASE: RESPONDENTS WHO CURRENTLY USE TELEHEALTH (Q8 2>0% OR Q8 3>0%)

[PN: SET UP AS GRID FOR WEB]

11. Would you say telehealth has:

[PHONE ONLY: (READ FIRST ITEM)]

[PHONE ONLY: IF YES, ASK: "Is that to a great extent or to some extent?"]

[PHONE ONLY: Would you say (READ ITEM)?]

1 Yes, to a great extent

2 Yes, to some extent

3 No

996 MAIL ONLY (AS PART OF BACK-END PROCEDURES ONLY): Multiple-response code

998 PHONE ONLY: (V) Not sure

999 PHONE ONLY: (V) Decline to answer; WEB/MAIL ONLY: Blank

- a. Improved the timeliness of care for your patients
- b. Allowed your practice to offset potential financial losses during the COVID-19 pandemic
- c. Allowed you to assess mental and behavioral health needs effectively
- d. Increased your ordering of laboratory or imaging tests
- e. Increased your antibiotic prescribing

(IHP 2022 New)

BASE: ALL RESPONDENTS

[PN: SET UP AS GRID FOR WEB]

12. In general, how much of a challenge, if at all, are the following aspects of telehealth?

[PHONE ONLY: "Would you say (READ FIRST ITEM) is a major challenge, a minor challenge, or not a challenge?"]

[PHONE ONLY: "How about (READ ITEM)?"]

1 Major challenge

2 Minor challenge

3 Not a challenge

6 Not applicable

996 MAIL ONLY (AS PART OF BACK-END PROCEDURES ONLY): Multiple-response code

998 PHONE ONLY: (V) Not sure

999 PHONE ONLY: (V) Decline to answer; WEB/MAIL ONLY: Blank

- b. Low or no reimbursement
- e. Increased expenses of implementation and/or maintaining a telehealth platform

SECTION C: CARE MANAGEMENT FOR PATIENTS WITH CHRONIC CONDITIONS AND OTHER SPECIAL NEEDS

PN: SHOW TO ALL:

(WEB/PHONE): “The next questions are about care management for patients with chronic conditions and other special needs, in general.”

(PAPER SURVEY): “The next questions are about the care provided to patients in general, both via telehealth and in-person.”

(IHP 2019 Q9 Modified – item a added examples, item c updated phrasing, 2019 item f is now item g, IHP 2015 Q11 Modified -- revised question-text, shortened list of revised items, new response-option 4, IHP 2012 Modified – new items C, E, F; Question text and Item D IHP 2006, IHP 2009 Modified -- main question text modified since 2006 to be asked at the practice level and to read “following patients” instead of “following types of patients”; for items A and B main question text and the item-specific wording are modified; for item D only main question text is modified and item wording is the same as in IHP 2006; item H is unknown if NEW or from IHP 2006; per Vårdanalys, translations of items E and F do not include residential care, nursing homes, institutional care or home for the elderly. Only health care, personal care and services given in their own home)

BASE: ALL RESPONDENTS

[PN: SET UP AS GRID FOR WEB]

[PN: ITEM g IS FOR CANADA ONLY]

13. How prepared is your practice, with respect to having sufficient skills and experience, to manage care for patients with [PHONE ONLY: “(READ FIRST ITEM)”]; WEB/MAIL ONLY: “:”]

PHONE ONLY: (READ LIST OF RESPONSE-OPTIONS)

PHONE ONLY: How about (READ ITEM)?

1 Well prepared

2 Somewhat prepared

3 Not prepared

4 Do not have these patients

996 MAIL ONLY (AS PART OF BACK-END PROCEDURES ONLY): Multiple-response code

998 PHONE ONLY: (V) Not sure

999 PHONE ONLY: (V) Decline to answer; WEB/MAIL ONLY: Blank

- a. Chronic conditions (e.g., diabetes, COPD, heart failure)
- b. Mental illness (e.g., anxiety, mild or moderate depression)
- c. Substance-use related issues (e.g., drug, opioid, alcohol use)
- d. Palliative care needs
- e. Dementia
- g. [FOR CAN RESPONDENTS ONLY, (Q500=2), DISPLAY: “Patients requesting medical assistance in dying”]

(IHP 2019 Q10 Modified – updated question-text for NZ terminology and add emphasis on chronic conditions, added note to clarify that the question is multi-punch, IHP 2015 Modified – new PHONE ONLY Interviewer Note, response-options 1 and 2 reference "personnel," Revised IHP 2012 Q1030 – both question text and response options are different; Q1020 '12)

BASE: ALL RESPONDENTS

[PN: ALLOW ONLY CODES 1 AND 2 TO BE SELECTED AS A MULTI-PUNCH]

14. Does your practice use personnel, [IF NZ (Q500=6), DISPLAY: "such as nurses or health care assistants"; IF ELSE (Q500=1-5,7-11), DISPLAY: "such as nurses or case managers"], to monitor and manage care for patients with chronic conditions that need regular follow-up care?

WEB/MAIL ONLY: *(Note: Select all that apply.)*

PHONE ONLY: (IF RESPONDENT SAYS "Yes" PROBE WITH "Do you use personnel who are within your practice or outside your practice?")

PHONE ONLY: (IF RESPONDENT SAYS "Both within and outside of practice," CODE WITH BOTH "within practice" AND "outside of practice" OPTIONS.)

- 1 Yes, use personnel within practice
- 2 Yes, use personnel outside of practice
- 3 No

996 MAIL ONLY (AS PART OF BACK-END PROCEDURES ONLY): Multiple-response code

998 PHONE ONLY: (V) Not sure

999 PHONE ONLY: (V) Decline to answer; WEB/MAIL ONLY: Blank

(IHP 2019 Q11 Modified – updated item e to include examples, IHP 2015 Q9b/Q13/Q14 Modified – compiled items b, c, and d from separate questions with revised text and implemented 5 pt. unipolar scale, IHP 2012 Q1025/Q1010 Modified – updated question-text is modified and new note about “Does not include prescriptions,” IHP 2009 Q825)

BASE: ALL RESPONDENTS

[PN: SET UP AS GRID FOR WEB]

15. For patients with chronic conditions, how often do you or other health care professionals in your practice provide care in the following ways [PHONE ONLY: “(READ FIRST ITEM)”]; WEB/MAIL ONLY: “:”]

PHONE ONLY: (READ LIST OF RESPONSE-OPTIONS)

PHONE ONLY: How about (READ ITEM)?

- 1 Usually (75-100% of the time)
- 2 Often (50-74% of the time)
- 3 Sometimes (25-49% of the time)
- 4 Rarely (1-24% of the time)
- 5 Never

996 MAIL ONLY (AS PART OF BACK-END PROCEDURES ONLY): Multiple-response code

998 PHONE ONLY: (V) Not sure

999 PHONE ONLY: (V) Decline to answer; WEB/MAIL ONLY: Blank

- a. Develop treatment plans with patients they can carry out in their daily life
- b. Provide patients written instructions about how to manage their own care at home (e.g., instructions on what to do to control symptoms)
- c. Record patients’ self-management goals in their medical record
- d. Contact patients between visits to monitor their condition
- e. Use remote monitoring or connected medical devices to monitor patients where clinically appropriate (e.g., monitoring blood pressure, glucose levels, or weight)

(IHP 2019 Q12, IHP 2015 Q22 Revised - question-text and response-option 3, new response-option 4)

BASE: ALL RESPONDENTS

16. Do you have end of life conversations with your patients about their preferences, wishes and goals of their care, in the event they become very ill, injured, or cannot make decisions for themselves?

PHONE ONLY: (READ LIST)

- 1 Yes, routinely
- 2 Yes, occasionally
- 3 No, not at all
- 4 Does not apply

996 MAIL ONLY (AS PART OF BACK-END PROCEDURES ONLY): Multiple-response code

998 PHONE ONLY: (V) Not sure

999 PHONE ONLY: (V) Decline to answer; WEB/MAIL ONLY: Blank

SECTION D: CARE COORDINATION WITH OTHER PROVIDERS

(IHP 2019 Q14, IHP 2015 Q15 Modified – revised question-text, list of items, and 5 pt. bipolar scale, IHP 2012 Q1105 Modified – 1)UK and Sweden have country specific pipe-ins in the question text, 2) the second sentence of question text “Would you say always, often, sometimes, rarely or never?” is not included in IHP 2015, 3) for items A and B Sweden has modified their pipe-in to read “doctors in specialist health care” for IHP 2015, 4) items A and B pipe in for Australia, Canada, Germany, Netherlands, Norway, NZ, US has been added in 2015; Haute Autorité de Santé, de l’Assurance Maladie preceded with minor changes at this question so that it better matches the English version without affecting the meaning, IHP 2009 Q915)

BASE: ALL RESPONDENTS

[PN: SET UP AS GRID FOR WEB]

17. When your patients have been referred to a specialist, how often do you [PHONE ONLY: “(READ FIRST ITEM)”]; WEB/MAIL ONLY: “:”]

PHONE ONLY: (READ LIST OF RESPONSE-OPTIONS)

PHONE ONLY: How about (READ ITEM)?

- 1 Usually (75-100% of the time)
- 2 Often (50-74% of the time)
- 3 Sometimes (25-49% of the time)
- 4 Rarely (1-24% of the time)
- 5 Never

996 MAIL ONLY (AS PART OF BACK-END PROCEDURES ONLY): Multiple-response code

998 PHONE ONLY: (V) Not sure

999 PHONE ONLY: (V) Decline to answer; WEB/MAIL ONLY: Blank

- a. Send the patient history and the reason for the consultation to the specialist
- b. Receive from the specialist information about changes made to the patient medication or care plan
- c. Receive a report with the results of the specialist visit within 1 week of service

(IHP 2019 Q15 Modified – updated item a to include examples, IHP 2015 Q16 – revised question-text, new item a and revised items b and c, and revised 5 pt. bipolar scale, IHP 2012 Q1110 Modified – the following text was not in 2012 “are admitted to the”, and this second question “Would you say always, often, sometimes, rarely or never?” is not included after the word “following?” in IHP 2015, and Haute Autorité de Santé, de l’Assurance Maladie preceded with minor changes at the items so that they better match the English version without affecting the meaning)

BASE: ALL RESPONDENTS

[PN: SET UP AS GRID FOR WEB]

18. How often do you receive notifications that your patients have been [PHONE ONLY: “(READ FIRST ITEM)”]; WEB/MAIL ONLY: “:”]

PHONE ONLY: (READ LIST OF RESPONSE-OPTIONS)

PHONE ONLY: How about (READ ITEM)?

- 1 Usually (75-100% of the time)
- 2 Often (50-74% of the time)
- 3 Sometimes (25-49% of the time)
- 4 Rarely (1-24% of the time)
- 5 Never

996 MAIL ONLY (AS PART OF BACK-END PROCEDURES ONLY): Multiple-response code

998 PHONE ONLY: (V) Not sure

999 PHONE ONLY: (V) Decline to answer; WEB/MAIL ONLY: Blank

- a. Seen for after-hours care (i.e., arrangement where patients can see a provider when the practice is closed without going to the emergency room)
- b. Seen in an emergency department
- c. Admitted to a hospital

(IHP 2019 Q16 Modified – added emphasis to hospital discharge phrasing, IHP 2015 Q17 Modified – revised question-text and updated text in response-options, IHP 2012 Q1115 – in some hard copy version “Less than 24 hours” used to read “<,” and that “More than 30 days” used to read “>”, IHP 2009 Q920 – in some hard copy version “Less than 24 hours” used to read “<,” and that “More than 30 days” used to read “>”)

BASE: ALL RESPONDENTS

19. After your patients have been discharged from a hospital, how long does it take, on average, before you receive the information you need to continue managing the patient, including recommended follow-up care?

PHONE ONLY: (READ LIST)

- 1 Less than 24 hours
 - 2 24 to less than 48 hours
 - 3 2-4 days
 - 4 5-14 days
 - 5 15-30 days
 - 6 More than 30 days
 - 7 Rarely or never receive this type of information
- 996 MAIL ONLY (AS PART OF BACK-END PROCEDURES ONLY): Multiple-response code
998 PHONE ONLY: (V) Not sure
999 PHONE ONLY: (V) Decline to answer; WEB/MAIL ONLY: Blank

(IHP 2019 SWI-1, IHP 2015 Q18 Modified – asked only of Switzerland respondents with revised question-text, IHP 2012 Q1120 Modified – 1) WEB/PHONE ONLY LEAD IN added for 2015, 2) response options are different (only response options 1 through 3 match IHP 2009/2012), 3) in IHP 2009/2012 this was a multiple response question whereas it is a single response question in IHP 2015, 4) in IHP 2015 “usually” is now being bolded, 5) code ‘07’ “Directly from the patient journal” got added for Sweden only, IHP 2009 Q2125)

BASE: SWITZERLAND RESPONDENTS THAT RECEIVE HOSPITAL DISCHARGE INFO (Q500=4.9 AND Q19=1-6))

[PN: DISPLAY AFTER Q19]

- GSWI-1. How do you usually receive this information? (Select only one)

- 1 Fax
 - 2 Mail
 - 3 Email
 - 4 On-line (e.g., web portal/file transfer site)
 - 5 Brought by patient
 - 6 Other
- 998 PHONE ONLY: (V) Not sure
999 PHONE ONLY: (V) Decline to answer; WEB ONLY: Blank

SECTION E: CARE COORDINATION WITH HOME CARE AND SOCIAL SERVICE PROVIDERS

(IHP 2019 Q17, IHP 2015 Q20 Modified – revised question-text, revised list of items, and revised scale to be 5 pt. bipolar with "Does not apply" response-option)

BASE: ALL RESPONDENTS

[PN: SET UP AS GRID FOR WEB]

20. For your patients who receive home-based nursing care, how often [PHONE ONLY: "(READ FIRST ITEM)"; WEB/MAIL ONLY: ":"]

PHONE ONLY: (READ LIST OF RESPONSE-OPTIONS)

PHONE ONLY: How often (READ ITEM)?

- 1 Usually (75-100% of the time)
- 2 Often (50-74% of the time)
- 3 Sometimes (25-49% of the time)
- 4 Rarely (1-24% of the time)
- 5 Never
- 6 Does not apply

996 MAIL ONLY (AS PART OF BACK-END PROCEDURES ONLY): Multiple-response code

998 PHONE ONLY: (V) Not sure

999 PHONE ONLY: (V) Decline to answer; WEB/MAIL ONLY: Blank

- a. Do you communicate with home-based nursing care providers about your patients' needs and the services to be provided?
- b. Are you advised by the home-based nursing care providers of a relevant change in your patients' condition or health status?

(IHP 2019 Q18 Modified -- item e removed)

BASE: ALL RESPONDENTS

[PN: SET UP AS GRID FOR WEB]

21. How often, if ever, do you or other personnel that work with you in your practice screen or assess your patients for the following social needs? [PHONE ONLY: "(READ FIRST ITEM)"]

PHONE ONLY: (READ LIST OF RESPONSE-OPTIONS)

PHONE ONLY: How about (READ ITEM)?

- 1 Usually (75-100% of the time)
- 2 Often (50-74% of the time)
- 3 Sometimes (25-49% of the time)
- 4 Rarely (1-24% of the time)
- 5 Never

996 MAIL ONLY (AS PART OF BACK-END PROCEDURES ONLY): Multiple-response code

998 PHONE ONLY: (V) Not sure

999 PHONE ONLY: (V) Decline to answer; WEB/MAIL ONLY: Blank

- a. Problems with housing (e.g., eviction, homelessness, etc.)
- b. Financial security (e.g., employment [IF SWITZ, (Q500=9), DISPLAY: ", unemployment benefits, social assistance, etc."])
- c. Food insecurity (e.g., hunger and nutrition)
- d. Transportation needs (e.g., to appointments, work, grocery store, or other locations needed for daily living)
- f. Domestic violence
- g. Social isolation or loneliness (e.g., no close relationships or no one to contact in the community for help)

(IHP 2019 Q19 Modified – updated question-text to ask about current experiences and include Australia terminology, updated item a, code 4 included for Sweden and Switzerland)

BASE: ALL RESPONDENTS

[PN: SET UP AS GRID FOR WEB]

22. What challenges, if any, do you or other personnel in your practice currently experience when coordinating your patients' care with [IF AUS (Q500=1, DISPLAY: "community or social services"; IF ELSE (Q500=2-11), DISPLAY: "social services")?]

PHONE ONLY: Would you say (READ FIRST ITEM) is a major challenge, a minor challenge, or not a challenge?

PHONE ONLY: How about (READ ITEM)?

- 1 Major challenge
- 2 Minor challenge
- 3 Not a challenge
- 4 [FOR SWITZ AND SWED RESPONDENTS ONLY, (Q500=9), DISPLAY: "Do not coordinate with social services"]

996 MAIL ONLY (AS PART OF BACK-END PROCEDURES ONLY): Multiple-response code

998 PHONE ONLY: (V) Not sure

999 PHONE ONLY: (V) Decline to answer; WEB/MAIL ONLY: Blank

- a. Lack of information about social service organizations in the community
- b. Lack of a referral system or mechanism to make referrals
- c. Inadequate staffing to make referrals and coordinate care with social service organizations
- d. Too much paperwork regarding the coordination with social services
- e. Lack of follow-up from social service organizations about which services patients received or need

SECTION F: OFFICE SYSTEMS AND USE OF INFORMATION TECHNOLOGY

(IHP 2019 Q20, IHP 2015 Q24 Modified – France conducted the study via panel and asked this question to the panelists only during the pretest rather than the main fielding period, IHP 2012 Q1205 Modified – While the survey was already in field, on 10/12/15 the Haute Autorité de Santé, de l'Assurance Maladie proceeded with a translation change at Q24 to match the English version more accurately and to improve respondent comprehension, IHP 2009 Q1000)

BASE: ALL RESPONDENTS

23. WEB/MAIL ONLY: Do you use electronic patient medical records in your practice (not including billing systems)?

PHONE ONLY: Do you use electronic patient medical records in your practice, not including billing systems?

- 1 Yes
- 2 No

996 MAIL ONLY (AS PART OF BACK-END PROCEDURES ONLY): Multiple-response code

998 PHONE ONLY: (V) Not sure

999 PHONE ONLY: (V) Decline to answer; WEB/MAIL ONLY: Blank

(IHP 2019 CAN-1)

BASE: CANADA RESPONDENTS (Q500=2)

[PN: DISPLAY AFTER Q23 IN WEB]

CAN-1. Do you have electronic access to any regional (e.g., hospital/hospital network), provincial or territorial information systems where you can access patient information that is from outside your practice?

1 Yes

2 No

996 MAIL ONLY (AS PART OF BACK-END PROCEDURES ONLY): Multiple-response code

999 WEB/MAIL ONLY: Blank

(IHP 2019 Q22 Modified – updated question-text to read “health care providers,” IHP 2015 Q27 Modified – extended WEB/MAIL ONLY note to include “...or regular email,” shortened PHONE ONLY note to read, “...or regular mail.” instead of “...as a method for this electronic exchange of information,” and new item c, IHP 2012 Q1220 Modified - 1) “Note” was added to the instruction in the question in 2015, 2) Phone only instruction added in 2015, 3) item B added the word “results” to the end of the item in 2015; Additionally per Vårdanalys, they found when reviewing previous translations the word ANY was left out of the Swedish question in earlier translations. They will correct this in this version.)

BASE: ALL RESPONDENTS

[PN: SET UP AS GRID FOR WEB]

24. Can you electronically exchange the following with any health care providers outside your practice [PHONE ONLY: “, not including fax or regular email”]? [PHONE ONLY: (READ FIRST ITEM)]

WEB/MAIL ONLY: *(Note: Do not include fax or regular email.)*

PHONE ONLY: How about (READ ITEM)?

1 Yes

2 No

996 MAIL ONLY (AS PART OF BACK-END PROCEDURES ONLY): Multiple-response code

998 WEB/MAIL ONLY: Not sure / PHONE ONLY: (V) Not sure

999 PHONE ONLY: (V) Decline to answer; WEB/MAIL ONLY: Blank

- a. Patient clinical summaries
- b. Laboratory and diagnostic test results
- c. Lists of all medications taken by an individual patient

(IHP 2019 Q23 Modified – updated item b, IHP 2015 Q28 Modified – revised question-text to include "...your patients..." and include WEB/MAIL ONLY and PHONE ONLY lead-ins, revised item a, and new items b, c, d, e)

BASE: ALL RESPONDENTS

[PN: SET UP AS GRID FOR WEB]

25. WEB/MAIL ONLY: Please indicate whether your practice offers your patients the option to:

PHONE ONLY: Does your practice offer your patients the option to (READ FIRST ITEM)?

PHONE ONLY: How about (READ ITEM)?

1 Yes

2 No

996 MAIL ONLY (AS PART OF BACK-END PROCEDURES ONLY): Multiple-response code

998 WEB/MAIL ONLY: Not sure / PHONE ONLY: (V) Not sure

999 PHONE ONLY: (V) Decline to answer; WEB/MAIL ONLY: Blank

- a. Communicate with your practice via email or a secure website about a medical question or concern
- b. Schedule appointments online *(Note: Do not include email)*
- c. Request [IF CAN, (Q500=2), DISPLAY: "renewals" IF ELSE, (Q500=1, 3-11), DISPLAY: "refills"] for prescriptions online *(Note: Do not include email)*
- d. View test results online
- e. View patient visit summaries online

(IHP 2019 SWI-2 Modified – added code 6)

BASE: SWITZ RESPONDENTS (Q500=9)

[PN: DISPLAY AFTER Q25]

SWI-2. Are you planning to join the national "Electronic Patient Record" (sharing information with other health professionals) in your practice...

1 Yes, within this year

2 Yes, within the next one to two years

3 Yes, within the next two to three years

4 Yes, but will take three or more years

5 No I'm not planning to join the national "Electronic Patient Record"

6 I already use the Swiss-wide electronic patient dossier (EPR) and am part of a regular community

998 PHONE ONLY: (V) Not sure

999 PHONE ONLY: (V) Decline to answer; WEB ONLY: Blank

SECTION G: PROVIDER EXPERIENCES WITH THEIR PRACTICE

PN: SHOW TO ALL: “The next few questions are about your current experiences in your practice compared to before the COVID-19 pandemic began.”

(IHP 2019 UK1 Modified – updated frame of reference, expanded base to be asked of all countries)

BASE: ALL RESPONDENTS

33. Compared to before the COVID-19 pandemic, would you say your workload has:

- 1 Increased a lot
- 2 Increased somewhat
- 3 Stayed about the same
- 4 Decreased somewhat
- 5 Decreased a lot

996 MAIL ONLY (AS PART OF BACK-END PROCEDURES ONLY): Multiple-response code

998 PHONE ONLY: (V) Not sure

999 PHONE ONLY: (V) Decline to answer; WEB/MAIL ONLY: Blank

(IHP 2022 New)

BASE: ALL RESPONDENTS

34. Compared to before the COVID-19 pandemic, would you say your practice revenue has:

- 1 Increased a lot
- 2 Increased somewhat
- 3 Stayed about the same
- 4 Decreased somewhat
- 5 Decreased a lot

7 MAIL ONLY (AS PART OF BACK-END PROCEDURES ONLY): Multiple-response code

998 WEB/MAIL ONLY: Not sure / PHONE ONLY: (V) Not sure

999 PHONE ONLY: (V) Decline to answer; WEB/MAIL ONLY: Blank

(IHP 2019 UK2 Modified – updated question-text and frame of reference, expanded base to be asked of all countries)

BASE: ALL RESPONDENTS

35. Compared to before the COVID-19 pandemic, would you say that overall, the quality of care you are currently able to provide to your patients has:

- 1 Improved a lot
- 2 Improved somewhat
- 3 Stayed about the same
- 4 Worsened somewhat
- 5 Worsened a lot

996 MAIL ONLY (AS PART OF BACK-END PROCEDURES ONLY): Multiple-response code

998 PHONE ONLY: (V) Not sure

999 PHONE ONLY: (V) Decline to answer; WEB/MAIL ONLY: Blank

(IHP 2019 Q24, IHP 2015 Q31 Modified – revised question-text, revised list of items with new items c and e, revised 4 pt. scale, IHP 2012 Q1305 Modified – 1) Item D in 2015 is modified from Item 4 in 2012 and PHONE only adaptations at item A to read “such as”; Additionally per Vårdanalys, Same as for question 30. And item B has also been slightly changed to match terminology used in health care; Haute Autorité de Santé, de l’Assurance Maladie preceded with minor changes at the items so that they better match the English version without affecting the meaning; The response options seem to have been scrambled in 2012 as per the following note in the 2012 French questionnaire “Enquêteur : citer, une seule réponse possible, rotation aléatoire des sous questions”; The text for item ‘c’ was missing in the French version of the 2012 instrument; Item A IHP 2012, 2009, 2006; Item D IS NEW in 2015, IHP 2009 Q1100)

BASE: ALL RESPONDENTS

[PN: SET UP AS GRID FOR WEB]

26. How often, if at all, does your practice review data on the following aspects of your patients’ care? [PHONE ONLY: “(READ FIRST ITEM)”]

PHONE ONLY: (READ LIST OF RESPONSE-OPTIONS)

PHONE ONLY: How about (READ ITEM)?

- 1 Quarterly
- 2 Yearly
- 3 Less frequently
- 4 Never

996 MAIL ONLY (AS PART OF BACK-END PROCEDURES ONLY): Multiple-response code

998 PHONE ONLY: (V) Not sure

999 PHONE ONLY: (V) Decline to answer; WEB/MAIL ONLY: Blank

- a. Clinical outcomes [WEB/MAIL ONLY: “(e.g., percent of diabetics or asthmatics with good control)”]; PHONE ONLY: “such as percent of diabetics or asthmatics with good control”]
- b. Patients’ hospital admissions or emergency department use
- c. Prescribing practice (e.g., use of generic drugs, antibiotics, or opioids)
- d. Surveys of patient satisfaction and experiences with care
- e. Surveys of Patient Reported Outcome Measures (PROMs)

(IHP 2019 Q25 Modified – new items d, e, and f, IHP 2015 Q34 Modified – revised question-text to end with a colon rather than a question-mark, revised item c to read, "...such as health insurers" rather than "...such as health insurance plans", IHP 2012 Q1325 Modified –1) second line of question text was removed in 2015 Web/Phone and UK pipe in at item A added; Additionally per Vårdanalys, they will include "health care insurance" at items A and B, however they mentioned "The way item a is put it is not clear whether the question refers to the public SICK LEAVE insurance (which causes doctors administrative work certifying that the patient is or is not able to work) and/or they should think of only (private) HEALTH CARE insurances (about 700 000 Swedes have a private HEALTH CARE insurance). The main part of health care is tax funded and not insurance based - everyone is entitled to health care based on their medical needs. Minor changes done to translation but the problem persists - this will probably affect how respondents answer"; Haute Autorité de Santé, de l'Assurance Maladie proceeded with minor changes at the question-text and to item C so that they better match the English version without affecting the meaning; Item C IS NEW in 2015, IHP 2009 Q1120)

BASE: ALL RESPONDENTS

[PN: SET UP AS GRID FOR WEB]

[PN: DO NOT ASK ITEM B IN SWEDEN (IF Q500=8)]

27. How much of a problem, if at all, is the amount of time you or your staff spend [PHONE ONLY: "(READ FIRST ITEM)"; WEB/MAIL ONLY: ":"]

PHONE ONLY: Is this a (READ LIST OF RESPONSE-OPTIONS)?

PHONE ONLY: How about (READ ITEM)?

1 Major problem

2 Minor problem

3 Not a problem

4 WEB/MAIL ONLY: Not applicable / PHONE ONLY: (V) Not applicable

996 MAIL ONLY (AS PART OF BACK-END PROCEDURES ONLY): Multiple-response code

998 PHONE ONLY: (V) Not sure

999 PHONE ONLY: (V) Decline to answer; WEB/MAIL ONLY: Blank

- a. On administrative issues related to insurance or claiming payments
- b. Getting patients needed medications or treatments because of coverage restrictions
- c. Reporting clinical or quality of care data to government or other external entities such as health insurers
- d. On patient care or patient visit documentation, including physician notes and updates to electronic health records
- e. Coordinating referrals with specialists (e.g., non responses to referrals, follow-up on rejections)
- f. Complying with the changing COVID-19 care protocols and regulations

(IHP 2019 Q26, IHP 2015 Q43 Modified – revised question-text to read, "How stressful, if at all..." and insert "general practitioner" for Australia)

BASE: ALL RESPONDENTS

28. How stressful, if at all, is your job as a [IF AUS, NZ, or UK (Q500=1, 6, 10) DISPLAY: "general practitioner"; IF ELSE, (Q500=2-5, 7-9, 11), DISPLAY: "primary care physician"]:

PHONE ONLY: (READ LIST)

- 1 Extremely stressful
- 2 Very stressful
- 3 Somewhat stressful
- 4 Not too stressful
- 5 Not at all stressful

996 MAIL ONLY (AS PART OF BACK-END PROCEDURES ONLY): Multiple-response code

998 PHONE ONLY: (V) Not sure

999 PHONE ONLY: (V) Decline to answer; WEB/MAIL ONLY: Blank

(IHP 2019 Q27 Modified – new items d and e, IHP 2015 Q44 Modified – revised list of items with removed 2015 item b; 2015 item c becoming item b with revised text to read, "...can spend..." instead of "...have to spend..."; new item c; revised scale to be 5 pt. unipolar; NETH used 2015 scale, IHP 2012 Q2050 Modified – 1) question text is different, 2) Item D was added for 2015, 3) Item A removed Switzerland pipe-in, 4) item B updated pipe-in for all countries except UK, France, and Switzerland and now uses the word "of" instead of "from", and data collected for item D may benefit from being assessed in conjunction with data at Q24 – about whether the respondent uses electronic patient medical records in its practice or not)

BASE: ALL RESPONDENTS

[PN: SET UP AS GRID FOR WEB]

29. Please indicate how satisfied you are with the following aspects of your medical practice.
[PHONE ONLY: "(READ FIRST ITEM)"]

PHONE ONLY: (READ LIST OF RESPONSE-OPTIONS)

PHONE ONLY: How about (READ ITEM)?

- 1 Extremely satisfied
- 2 Very satisfied
- 3 Moderately satisfied
- 4 Slightly satisfied
- 5 Not at all satisfied

996 MAIL ONLY (AS PART OF BACK-END PROCEDURES ONLY): Multiple-response code

998 PHONE ONLY: (V) Not sure

999 PHONE ONLY: (V) Decline to answer; WEB/MAIL ONLY: Blank

- a. Your income from medical practice
- b. The time you can spend per patient
- c. Your daily workload
- d. The time you spend on administrative work
- e. Your work-life balance

(IHP 2019 Q28 Modified – removed list of items and updated text to ask about no longer regularly seeing patients)

BASE: ALL RESPONDENTS

30. In the next one to three years, do you plan to stop seeing patients regularly (e.g., retiring or changing careers)?

1 Yes

2 No

996 MAIL ONLY (AS PART OF BACK-END PROCEDURES ONLY): Multiple-response code

998 Not sure

999 PHONE ONLY: (V) Decline to answer; WEB/MAIL ONLY: Blank

(IHP 2022 New)

BASE: ALL RESPONDENTS

31. Overall, based on your definition of burnout, how would you rate your current level of burnout?

PHONE ONLY: (READ LIST OF RESPONSE-OPTIONS)

1 I enjoy my work. I have no symptoms of burnout.

2 Occasionally I am under stress, and I don't always have as much energy as I once did, but I don't feel burned out.

3 I am definitely burning out and have one or more symptoms of burnout, such as physical and emotional exhaustion.

4 The symptoms of burnout that I'm experiencing won't go away. I think about frustration at work a lot.

5 I feel completely burned out and often wonder if I can go on. I am at the point where I may need some changes or may need to seek some sort of help.

996 MAIL ONLY (AS PART OF BACK-END PROCEDURES ONLY): Multiple-response code

998 PHONE ONLY: (V) Not sure

999 PHONE ONLY: (V) Decline to answer; WEB/MAIL ONLY: Blank

SECTION H: PERSONAL AND PRACTICE CHANGES SINCE COVID

(IHP 2022 New)

BASE: ALL RESPONDENTS

32. Since March 2020 when the COVID-19 pandemic began, have you:
[PHONE ONLY: "(READ FIRST ITEM)"]

PHONE ONLY: (READ LIST OF RESPONSE-OPTIONS)

1 Yes

2 No

996 MAIL ONLY (AS PART OF BACK-END PROCEDURES ONLY): Multiple-response code

998 PHONE ONLY: (V) Not sure

999 PHONE ONLY: (V) Decline to answer; WEB/MAIL ONLY: Blank

- a. Experienced emotional distress such as anxiety, great sadness, anger, or feelings of hopelessness
- b. Sought professional attention for a mental health problem

SECTION I: PERSPECTIVES ON THE HEALTH CARE SYSTEM

(IHP 2021 Q1700)

BASE: ALL RESPONDENTS

36. How often, if ever, do you think the health care system in [IF UK, US, NETH (Q500=5,10,11) DISPLAY: "the"] [INSERT COUNTRY FROM Q500] treats people unfairly based on their race or ethnic background?

[PHONE ONLY: READ LIST]

1 Very often

2 Often

3 Sometimes

4 Rarely

5 Never

996 MAIL ONLY (AS PART OF BACK-END PROCEDURES ONLY): Multiple-response code

998 WEB/MAIL ONLY: Not sure / PHONE ONLY: (V) Not sure

999 PHONE ONLY: (V) Decline to answer; WEB/MAIL ONLY: Blank

(IHP 2021 Q1705 Modified – combined items into one question, updated to ask about patients’ reports of experiences rather than direct experiences)

BASE: ALL RESPONDENTS

37. Has a patient ever told you that because of their racial or ethnic background they were treated unfairly or felt their health concerns were not taken seriously by a health care professional?

1 Yes

2 No

996 MAIL ONLY (AS PART OF BACK-END PROCEDURES ONLY): Multiple-response code

998 PHONE ONLY: (V) Not sure

999 PHONE ONLY: (V) Decline to answer; WEB/MAIL ONLY: Blank

SECTION J: PRACTICE PROFILE AND DEMOGRAPHIC DATA

(IHP 2019 Q31 Modified – added upper-end cap code 997 for Sweden, IHP 2015 Q35 Modified – revised WEB/MAIL ONLY and PHONE ONLY inserts, IHP 2012 Q2000 Modified – the aid text “(For example, 2 fulltime doctors = 2.00 FTE)” is new in IHP 2015, IHP 2009 Q1200)

BASE: ALL RESPONDENTS

[PN: DECIMALS SHOULD BE ALLOWED; ENTRY SHOULD BE OF LENGTH OF 7 INCLUDING THE DECIMAL POINT. (e.g., For 2 fulltime doctors, data to be reported as: 0002.00)]

[PN: ALLOW RANGE 0.1-999]

[PN: If a respondent enters a non-numeric value please show the following error message (“Please enter a numeric value.”)]

40. How many full-time equivalent (FTE) doctors, including yourself, are in your practice?

WEB/MAIL ONLY: *(For example, one doctor working 5 days a week and another doctor working 2 days a week = 1.4 FTE; 2 fulltime doctors = 2.0 FTE)*

PHONE ONLY: For example, one doctor working 5 days a week and another doctor working 2 days a week is equivalent to 1.4 FTE and 2 fulltime doctors is equivalent to 2.0 FTE.

(PHONE ONLY: PROBE IF NOT SURE OR DECLINE)

_____ FTE Doctors

997 BACK-END CODE FOR SWEDEN ONLY (DUE TO PRIVACY CONCERNS): 20 or more

995 MAIL ONLY (AS PART OF BACK-END PROCEDURES AS DESCRIBED IN THE EDITING AND CODING MEMO): Invalid

996 MAIL ONLY (AS PART OF BACK-END PROCEDURES ONLY): Multiple-response code

998 PHONE ONLY: (V) Not sure

999 PHONE ONLY: (V) Decline to answer; WEB/MAIL ONLY: Blank

(IHP 2019 Q32 Modified – added upper-end cap code 997 for Sweden,, IHP 2015 Q37 Modified – revised question-text to include a note about the calculation of total hours worked, revised range; France conducted the study via panel and asked this question to the panelists only during the pretest rather than the main fielding period, IHP 2012 Q2015 Modified – updated question-text, IHP 2009 Q1210)

BASE: ALL RESPONDENTS

[PN: DECIMALS SHOULD BE ALLOWED; ENTRY SHOULD BE OF LENGTH OF 7 INCLUDING THE DECIMAL POINT. (e.g., For 2 full hours, data to be reported as: 0002.00)]

[PN: ALLOW RANGE 0.1-168]

[PN: If a respondent enters a non-numeric value please show the following error message (“Please enter a numeric value.”)]

41. Thinking about your medical practice, estimate how many hours a week you typically work.

WEB/MAIL ONLY: *(Note: Include all hours you work across practices including hours worked at home and on-call.)*

PHONE ONLY: Include all hours you work across practices including hours worked at home and on-call.

(PHONE ONLY: PROBE IF NOT SURE OR DECLINE)

_____ Hours

997 BACK-END CODE FOR SWEDEN ONLY (DUE TO PRIVACY CONCERNS): 60 or more

995 MAIL ONLY (AS PART OF BACK-END PROCEDURES AS DESCRIBED IN

THE EDITING AND CODING MEMO): Invalid

996 MAIL ONLY (AS PART OF BACK-END PROCEDURES ONLY): Multiple-response code

998 PHONE ONLY: (V) Not sure

999 PHONE ONLY: (V) Decline to answer; WEB/MAIL ONLY: Blank

(IHP 2019 Q33 Modified – updated question-text to include NZ insert, added note to consider in-person and telehealth appts, different range of responses for Sweden)

BASE: ALL RESPONDENTS

[PN: DECIMALS SHOULD NOT BE ALLOWED]

[PN: ALLOW RANGE 0-999]

[PN: SWEDEN ONLY (Q500=8) ALLOW RANGE 0-100]

[PN: If a respondent enters a non-numeric value, please show the following error message (“Please enter a numeric value”).”]

42. On average, how many [IF NZ, (Q500=6), DISPLAY: “patient consultations do you do”; IF ELSE, (Q500=1-5, 7-11), DISPLAY: “patients do you see”] during a typical work week?

WEB/MAIL ONLY: *(Note: Please include both in-person and telehealth appointments.)*

PHONE ONLY: (IF NECESSARY: Please include both in-person and telehealth appointments)

[PHONE ONLY: PROBE IF NOT SURE OR DECLINE.]

_____ Patients

9995 MAIL ONLY (AS PART OF BACK-END PROCEDURES AS DESCRIBED IN THE EDITING AND CODING MEMO): Invalid

9996 MAIL ONLY (AS PART OF BACK-END PROCEDURES ONLY): Multiple-response code

9998 PHONE ONLY: (V) Not sure

9999 PHONE ONLY: (V) Decline to answer; WEB/MAIL ONLY: Blank

(IHP 2019 Q34 Modified – added note to consider in-person and telehealth appts, IHP 2015 Q39 Modified – revised question-text to emphasize one number-response and include “office” in “routine office visit,” revised range; France conducted the study via panel and asked this question to the panelists only during the pretest rather than the main fielding period)

BASE: ALL RESPONDENTS

[PN: DECIMALS SHOULD NOT BE ALLOWED]

[PN: ALLOW RANGE 1-999]

[PN: If a respondent enters a non-numeric value please show the following error message (“Please enter a numeric value”).”]

43. On average, how much time do you spend with a patient during a routine [IF UK (Q500=10), DISPLAY: “appointment”; IF ELSE (Q500=1-9, 11), DISPLAY: “visit”]?

WEB/MAIL ONLY: *(Note: Please include both in-person and telehealth appointments.)*

PHONE ONLY: (IF NECESSARY: Please include both in-person and telehealth appointments)

[PHONE ONLY: PROBE IF NOT SURE OR DECLINE.]

_____ Minutes

9996 MAIL ONLY (AS PART OF BACK-END PROCEDURES AS DESCRIBED IN THE EDITING AND CODING MEMO): Invalid

9997 MAIL ONLY (AS PART OF BACK-END PROCEDURES ONLY): Multiple-response code

9998 PHONE ONLY: (V) Not sure

9999 PHONE ONLY: (V) Decline to answer; WEB/MAIL ONLY: Blank

(IHP 2019 SWI-12, IHP 2015 Q38 Modified – asked only of Switzerland respondents with revised response-option 3, new response-option 4, and DNR response-options 8 and 9 for PHONE/WEB, IHP 2012 Q2020 Modified – question text is different, items B and C added for 2015, IHP 2009 Q1220)

BASE: SWITZ RESPONDENTS ONLY (Q500=9)

[PN: DISPLAY AFTER Q34]

[PN: AUTO-PUNCH 0s IN SKIPPED FIELDS, IF AT LEAST ONE FIELD IS ANSWERED 0-100]

SWI-12. In a typical week, about what percentage of time do you spend on the following:

WEB ONLY: *(Note: Does not need to add to 100%.)*

PHONE ONLY: (IF NECESSARY: Does not need to add to 100%)

[PHONE ONLY: PROBE IF NOT SURE OR DECLINE.]

	Percent of Time
1 Face-to-face contact with patients	_____ %
2 Other contact with patients (e.g., email or phone)	_____ %
3 Administrative tasks (e.g., medical records, meetings, quality reporting)	_____ %
4 Tasks related to insurance and/or claiming payments	_____ %
998 PHONE ONLY: (V) Not sure	
999 PHONE ONLY: (V) Decline to answer; WEB ONLY: Blank	

SECTION K: DEMOGRAPHICS AND PRACTICE PROFILE

(IHP 2019 Q35 Modified – Sweden and Switzerland populated from registry data, IHP 2015 Q39 Modified – France conducted the study via panel and asked this question to the panelists only during the pretest rather than the main fielding period, IHP 2012 Q2040, IHP 2009 Q1420 Modified, 2012, 2015 Q39)

BASE: ALL RESPONDENTS

[PN : SWEDEN AND SWITZERLAND POPULATED FROM SAMPLE/REGISTRY DATA.]

44. How old are you?

[PHONE ONLY: (READ LIST)]

1 Under 35

2 35-44

3 45-54

4 55-64

5 65 or older

996 MAIL ONLY (AS PART OF BACK-END PROCEDURES ONLY): Multiple-response code

998 PHONE ONLY: (V) Not sure

999 PHONE ONLY: (V) Decline to answer; WEB/MAIL ONLY: Blank

IF WEB AND Q44=999, SHOW EM1, IF RESPONDENT SKIPS AGAIN, ALLOW SKIP.

(IHP 2019 Q36 Modified – updated code 3 to include country-specific text the US, Canada, and Switzerland, added code 4 for the US, added Switzerland to base, Sweden populated from registry data, IHP 2015 Q40 Modified – revised question-text to contain a colon rather than an ellipse, new response-option 3; France conducted the study via panel and asked this question to the panelists only during the pretest rather than the main fielding period, IHP 2012 Q2045, IHP 2009 Q1245)

BASE: ALL RESPONDENTS

[PN: SWEDEN POPULATED FROM SAMPLE/REGISTRY DATA.]

45. Are you:

- 1 Male
 - 2 Female
 - 3 [FOR NON-US AND NON-CAN RESPONDENTS ONLY (Q500=1, 3-10), DISPLAY: “Gender diverse”; FOR US (Q500=11), DISPLAY: Non-binary/third gender; FOR CAN (Q500=2), DISPLAY: “Another gender”; FOR SWITZ (Q500=9), DISPLAY: “Other, such as: (specify: _____)”]
 - 4 [FOR US] Prefer not to answer
- 996 MAIL ONLY (AS PART OF BACK-END PROCEDURES ONLY): Multiple-response code
998 PHONE ONLY: (V) Not sure
999 PHONE ONLY: (V) Decline to answer; WEB/MAIL ONLY: Blank

IF WEB AND Q45=999, SHOW EM1, IF RESPONDENT SKIPS AGAIN, ALLOW SKIP.

(IHP 2019 Q37 Modified – updated list of response-options, Revised IHP 2006, 2009, 2012, 2015 Q41 - new response-option 5; France conducted the study via panel and asked this question to the panelists only during the pretest rather than the main fielding period)

BASE: ALL RESPONDENTS

46. Where is your practice located?

[PHONE ONLY: (READ LIST)]

- 1 City or urban area
 - 2 Suburb or small town
 - 3 Rural [FOR NON-NETH RESPONDENTS ONLY (Q500=1-4, 6-11), DISPLAY: “or remote”] area
- 996 MAIL ONLY (AS PART OF BACK-END PROCEDURES ONLY): Multiple-response code
998 PHONE ONLY: (V) Not sure
999 PHONE ONLY: (V) Decline to answer; WEB/MAIL ONLY: Blank

SECTION L: SWITZERLAND-ONLY QUESTIONS

(IHP 2019 SWI-4, IHP 2015 SWI-3)

BASE: SWITZ RESPONDENTS (Q500=9)

SWI-4. How often do you participate in quality control circles / quality improvement groups?

- 1 Weekly
 - 2 Several times a month
 - 3 Monthly
 - 4 Several times a year
 - 5 Never
- 998 PHONE ONLY: (V) Not sure
999 PHONE ONLY: (V) Decline to answer; WEB ONLY: Blank

(IHP 2019 SWI-5, IHP 2015 SWI-5)

BASE: SWITZ RESPONDENTS (Q500=9)

SWI-5. Are you accepting new patients?

- 1 Yes
 - 2 No
- 998 PHONE ONLY: (V) Not sure; WEB ONLY: Not sure
999 PHONE ONLY: (V) Decline to answer; WEB ONLY: Blank

(IHP 2019 SWI-6, IHP 2015 SWI-6)

BASE: SWITZ RESPONDENTS (Q500=9)

SWI-6. What is the **primary** setting of your practice site?
(Please select one.)

- 1 A private (solo) practice
 - 2 A physician group practice
 - 3 Ambulatory center or clinic affiliated with hospital
 - 4 Walk-in care center – sometimes called retail clinic
 - 7 Other (please specify)
- 998 PHONE ONLY: (V) Not sure
999 PHONE ONLY: (V) Decline to answer; WEB ONLY: Blank

(IHP 2019 SWI-7, IHP 2015 SWI-7)

BASE: SWITZ RESPONDENTS 60+ (Q500=9 AND Q573=60+)

SWI-7. Do you have a successor for your practice?

- 1 Yes
 - 2 No
- 998 PHONE ONLY: (V) Not sure; WEB ONLY: Not sure
999 PHONE ONLY: (V) Decline to answer; WEB ONLY: Blank

(IHP 2019 SWI-8, IHP 2015 SWI-8)

BASE: SWITZ RESPONDENTS 60-64 (Q500=9 AND Q573=60-64)

SWI-8. Will you stop working after becoming 65 years old?

- 1 Yes
- 2 No
- 998 PHONE ONLY: (V) Not sure; WEB ONLY: Not sure
- 999 PHONE ONLY: (V) Decline to answer; WEB ONLY: Blank

(IHP 2019 SWI-9, IHP 2015 SWI-9)

BASE: SWITZ RESPONDENTS (Q500=9)

SWI-9. In general, how often do your patients have difficulties understanding the information you give them such as: how to take a medication you prescribe or instructions about symptoms to watch for or when to seek further care?

- 1 Often
- 2 Sometimes
- 3 Rarely
- 4 Never
- 998 PHONE ONLY: (V) Not sure; WEB ONLY: Not sure
- 999 PHONE ONLY: (V) Decline to answer; WEB ONLY: Blank

(IHP 2019 SWI-10_NETH-1, IHP 2015 Q4 Modified – asked only of the Netherlands and Switzerland respondents with added interviewer note, IHP 2012 Q820 Modified – 1) Sweden updated pipe in in 2015 to read “doctors in specialist health care”, 2) the word “their” was removed IHP 2012 read “from all their providers” IHP 2015 reads “from all providers”, 3)the “Don’t know” response option was changed to “Not sure”)

BASE: NETHERLANDS AND SWITZERLAND RESPONDENTS (Q500=5,9)

SWI-10_NETH-1. Thinking about all the medical care your patients receive – not just from you, but from all providers, including specialists – what is your opinion about the amount of medical care they receive? Is it...?

(PHONE ONLY: READ LIST)

- 1 Much too little
- 2 Too little
- 3 Just about right
- 4 Too much
- 5 Much too much
- 996 MAIL ONLY (AS PART OF BACK-END PROCEDURES ONLY): Multiple-response code
- 998 PHONE ONLY: (V) Not sure; WEB/MAIL ONLY: Not sure
- 999 PHONE ONLY: (V) Decline to answer; WEB/MAIL ONLY: Blank

SECTION M: CANADA-ONLY QUESTIONS

(IHP 2019 CAN-2 Modified – removed language-insert based itinerancy in the territories)

BASE: CANADA RESPONDENTS (Q500=2)

CAN-2. Considering your roster and your work schedule, do you have the capacity to accept new patients in your main care setting?

- 1 Yes, have the capacity and accepting all patients who inquire
 - 2 Yes, have the capacity and accepting only patients who fit certain criteria
 - 3 Yes, have the capacity, but not accepting new patients
 - 4 No, do not have the capacity
- 996 MAIL ONLY (AS PART OF BACK-END PROCEDURES ONLY): Multiple-response code
999 WEB/MAIL ONLY: Blank

(IHP 2019 CAN-3, IHP 2015 Modified - revised question-text with removed parenthetical instruction and "primary" underlined)

BASE: CANADA RESPONDENTS (Q500=2)

CAN-3. What is the primary setting of your practice site?

- 1 A private solo practice
 - 2 A physician group practice
 - 3 Community clinic/health centre
 - 4 Hospital-based practice
 - 6 Other
- 996 MAIL ONLY (AS PART OF BACK-END PROCEDURES ONLY): Multiple-response code
999 WEB/MAIL ONLY: Blank

(IHP 2022 New)

BASE: CANADA RESPONDENTS (Q500=2)

CAN-4. How frequently do you use the lists created by Choosing Wisely Canada in your day to day clinical practice?

- 1 Very frequently
 - 2 Frequently
 - 3 Occasionally
 - 4 Rarely
 - 5 Never
- 996 MAIL ONLY (AS PART OF BACK-END PROCEDURES ONLY): Multiple-response code
999 WEB/MAIL ONLY: Blank

SECTION N: US-ONLY QUESTIONS

(IHP 2022 New)

BASE: US RESPONDENTS (Q500=11)

US-1. What is your race or ethnicity?

WEB/MAIL ONLY: *(Note: Select all that apply.)*

- 1 White
- 2 Hispanic, Latino(a), or Spanish origin
- 3 Black or African American
- 4 Asian
- 7 Other

996 MAIL ONLY (AS PART OF BACK-END PROCEDURES ONLY): Multiple-response code

999 WEB/MAIL ONLY: Blank

(IHP 2019 US3 Modified – updated question-text, new item a from 2019 US1 (item c), new item b, updated item-text d (2019 item b), IHP 2015 US5 Modified -- revised question-text and reverse-ordered, revised list of items, IHP 2012 Q1430 Modified -- both question text and response options are different)

BASE: US RESPONDENTS (Q500=11)

[PN: SET UP AS GRID FOR WEB]

US-3. Is your main practice:

- 1 Yes
- 2 No
- 3 Not sure

996 MAIL ONLY (AS PART OF BACK-END PROCEDURES ONLY): Multiple-response code

999 WEB/MAIL ONLY: Blank

- a. Part of a larger integrated provider system (e.g., Kaiser Permanente, Mayo Clinic, VA, etc.)
- b. Part of a community clinic or community health center (including a Federally Qualified Health Center)
- c. Recognized as a Patient-Centered Medical Home (PCMH) or Advanced Primary Care Practice (APCP)
- d. Affiliated with an Accountable Care Organization (ACO)

(IHP 2019 US2 Modified –updated and rearranged list of items, IHP 2015 US3 Modified – revised question-text, removed "based" from the end of item a, revised item c, and new items d and e, IHP 2012 Q1410 Modified – both question text and response options are different (A and C are the same as in IHP 2012))

BASE: US RESPONDENTS (Q500=11)

[PN: SET UP AS GRID FOR WEB]

US-2. Does your practice receive any revenue from the following:

- 1 Yes
- 2 No
- 3 Not sure

996 MAIL ONLY (AS PART OF BACK-END PROCEDURES ONLY): Multiple-response code

999 WEB/MAIL ONLY: Blank

- a. Fee-for-service payment with no link to quality
- b. Fee-for-service payment with link to quality (e.g. bonuses for performance)
- c. Shared savings models with upside and/or downside risk
- d. Capitation- or Population-based payment (e.g. per member or per month payment)

(IHP 2019 US4, CMWF-KFF Primary Care Provider Survey 2015)

BASE: US RESPONDENTS (Q500=11)

[PN: SET UP AS GRID FOR WEB]

[PN: ALLOW RANGE 0-100]

[PN: DECIMALS SHOULD BE ALLOWED]

[PN: AUTO-PUNCH 0s IN SKIPPED FIELDS, IF AT LEAST ONE FIELD IS ANSWERED 0-100]

[PN: If a respondent enters a non-numeric value please show the following error message ("Please enter a numeric value)."]

US-4. What percent of your patients fall into the following categories?

(Your best estimate is fine. Total should add to about 100%)

- | | Current Percentage |
|---------------------|--------------------|
| 1 Medicare | _____ % |
| 2 Medicaid | _____ % |
| 3 Private insurance | _____ % |
| 4 Uninsured | _____ % |

995 MAIL ONLY (AS PART OF BACK-END PROCEDURES AS DESCRIBED IN THE EDITING AND CODING MEMO): Invalid

996 MAIL ONLY (AS PART OF BACK-END PROCEDURES ONLY): Multiple-response code

999 WEB/MAIL ONLY: Blank

(IHP 2022 New)

BASE: US RESPONDENTS (Q500=11)

[PN: SET UP AS GRID FOR WEB]

US-5. Are you currently accepting any of the following types of new patients?

- 1 Yes
- 2 No
- 3 Not sure

996 MAIL ONLY (AS PART OF BACK-END PROCEDURES ONLY): Multiple-response code

999 WEB/MAIL ONLY: Blank

- a. New patients with Medicare
- b. New patients with Medicaid
- c. New patients with private insurance
- d. New patients who are uninsured

(IHP 2022 New)

BASE: US RESPONDENTS (Q500=11)

US-6. What is your NPI number?

Please note this information will only be used by researchers to review data in aggregate.
Providing this information is strictly voluntary.

1 NPI number: _____

999 WEB/MAIL ONLY: Blank

SECTION O: NZ-ONLY QUESTIONS

(IHP 2022 New)

BASE: NZ RESPONDENTS (Q500=6)

NZ-1. How confident, if at all, are you that the health reform in New Zealand is heading in the right direction?

- 1 Extremely confident
- 2 Very confident
- 3 Moderately confident
- 4 Slightly confident
- 5 Not at all confident

999 WEB ONLY: Blank

(IHP 2022 New)

BASE: NZ RESPONDENTS (Q500=6)

NZ-2. How optimistic, if at all, are you that the changes to the health system will improve the quality-of-care patients receive?

- 1 Extremely optimistic
- 2 Very optimistic
- 3 Moderately optimistic
- 4 Slightly optimistic
- 5 Not at all optimistic
- 999 WEB ONLY: Blank

SECTION P: RECONTACT QUESTIONS

(IHP 2022 New)

BASE: NON-SWEDEN RESPONDENTS (Q500=1-6,9-11)

QUAL. We may follow up with some survey participants to gather more in-depth information. Can we contact you again to ask a few more questions?

- 1 Yes
- 2 No
- 999 PHONE ONLY: (V) Decline to answer; WEB ONLY: Blank

(IHP 2022 New)

(ASK IF CANADA, FRANCE, NZ, OR US AND WANT TO BE RECONTACTED (Q500=2-6,9,11 AND QUAL=1))

QUAL2. Thank you. Please provide your name, email address and best phone number on which to reach you.

(PHONE ONLY: PROGRAM WILL ALLOW YOU TO LEAVE BLANKS.)

Name: _____
999 (DO NOT READ) REFUSED/WEB BLANK

Email address: _____
999 (DO NOT READ) REFUSED/WEB BLANK

Phone number: _____
999 (DO NOT READ) REFUSED/WEB BLANK

PROGRAM: ADD VALIDATION FOR EMAIL (@) AND PHONE NUMBER (10 digits).

(IHP 2019 Q3000, IHP 2015 Q3000 Modified – removed code 8, IHP 2012 Q3000, IHP 2009 Q1250)
BASE: CANADA, FRANCE, SWITZ, AND US RESPONDENTS (Q500=2, 3, 9, 11)

Q3000. We are nearly finished. Would you like us to send you a summary of the survey highlights via email?

- 1 Yes
 - 2 No
 - 3 (FOR US AND CAN RESPONDENTS ONLY (Q500=2, 11), AS PART OF BACK-END PROCEDURES ONLY: “Yes but did not provide an email address”)
- 996 MAIL ONLY (AS PART OF BACK-END PROCEDURES ONLY): Multiple-response code
999 WEB/MAIL ONLY: Blank

(IHP 2019 Q3001, IHP 2015 Q3001 Modified – revised text, IHP 2012 Q3001, IHP 2009 Q2127)
BASE: CANADA, FRANCE, SWITZ, AND US RESPONDENTS WHO WANT SUMMARY OF STUDY RESULTS (Q3000=1)

[PN: EMAIL ADDRESSES EXCLUDED FROM DATA FILE DUE TO CONFIDENTIALITY PURPOSES]

Q3001.

Email Address: _____

(IHP 2019 Q3001a)

BASE: CANADA, FRANCE, SWITZ, AND US RESPONDENTS WHO WANT SUMMARY OF STUDY RESULTS AND ENTERED EMAIL ADDRESS (Q500=2, 3, 9, 11 AND Q3000=1 AND Q3001 IS NOT BLANK)

Q3001a. Please verify that this is your correct email address.

[PN: DISPLAY ENTERED TEXT FROM Q3001.]

- 1 Yes
- 2 No [IF SELECTED, GO BACK TO Q3001.]

(IHP 2020 MONEY Modified – updated incentive amounts and mode of receipt)

BASE: U.S. WEB RESPONDENTS (Q500=11 AND Q500a=1 AND Q524=1-3)

INC1. As a thank you for completing the survey, we would like to offer you [IF Q524=1, DISPLAY: “\$25”; IF Q524=2, DISPLAY “\$40”; IF Q524=3, DISPLAY: “\$75”] in the form of an instant gift code provided by email. Would you like to receive this gift code?

- 1 Yes, I want to receive my instant gift code
 - 2 No, I do not want to receive my gift code
- 999 WEB ONLY: Blank

(IHP 2022 New)

BASE: U.S. WEB RESPONDENTS WHO WANT GIFT CODE (Q500=11 AND MONEY=1)

INC2. Please provide an email address, below, where we can send your gift code.

1 Email Address: _____
999 WEB ONLY: Blank

BASE: ALL RESPONDENTS

This is the end of the survey. Thank you, we greatly appreciate your time and cooperation!