Q1. How frequently do you receive Home Support?		
Once a week or less	16%	
4 - 6 days a week	7%	
2 - 3 days a week	19%	
Daily	58%	

Q2. How many visits do you typically receive per day?	
One visit per day	47%
Two visits per day	28%
Three visits per day	14%
Four or more visits per day	12%

Q3. Please indicate how often the following statements reflect your experience.						
	Always	Most of the time	Sometimes	Rarely	Never	I don't know/not sure
Home Support visits are scheduled at a time that is convenient for me	28%	51%	13%	4%	2%	1%
There is enough time for my Community Health Workers to provide the care in my care plan	45%	37%	11%	4%	2%	2%
The Home Support services I receive are meeting my needs	42%	39%	12%	3%	2%	1%

Q4. Are there services you would like to receive that you are	not receiving?
Yes	31%
No	69%

Q5. Do you have a paper or electronic copy of your Home Support care plan?	
Yes	48%
No	52%



Q6. How involved were you or your family member in developin	ng your Home Support care plan?	
Extremely involved	17%	
Very involved	36%	
Somewhat involved	24%	
Slightly involved	11%	
Not involved at all	12%	
Q7. In a typical week, how many different Community Health W	Vorkers provide service to you?	
1	18%	
2	16%	
3	11%	
4	10%	
5 or more	36%	
I don't know/not sure	10%	
Q8. Do you generally have the same Community Health Worker	rs providing your service?	
Yes	45%	
No	55%	
09. Do your Community Health Workers arrive on time?		

Q9. Do your Community Health Workers arrive on time?		
Always	18%	
Most of the time/usually	62%	
Sometimes	13%	
Rarely	3%	
Never	1%	
I don't know/not sure	3%	



Q10. If your Community Health Worker completes all tasks on your Home Support care plan early, what do they generally do? (Please mark all that apply.)		
Leave	60%	
Spend time socializing with you or your family	35%	
Perform additional tasks in the home	17%	
Wait in home until end of visit without doing extra tasks or socializing	7%	
Not applicable – they never finish early	10%	

Q11. Do your Community Health Workers:						
	Always	Most of the	Sometimes	Rarely	Never	l don't
		time				know/not sure
Communicate with you in a way you can understand?	49%	40%	9%	1%	1%	1%
Take time to have a friendly conversation with you?	32%	35%	24%	6%	2%	0%
Ask you if there is anything they can do before they leave?	35%	28%	20%	9%	6%	1%
Treat you with respect?	69%	25%	4%	1%	0%	0%
Treat your loved ones, such as your spouse or children, with respect?	67%	20%	3%	1%	1%	9%
Keep your personal information confidential?	52%	9%	2%	0%	1%	37%

Q12. Do you consider your Community Health Workers to be your friends?		
Yes, all of them	27%	
Yes, some of them	53%	
No, none of them	19%	

Q13. Do you think your Community Health Workers have the skills and training they need?		
All of the skills → skip to question 15	43%	
Most of the skills	33%	
Some of the skills	14%	
None of the skills	0%	
I don't know/not sure	9%	



Q15. Please rate the overall quality of the care you receive from your Community Health Workers:		
Excellent	24%	
Very good	43%	
Good	25%	
Fair	8%	
Poor	1%	

Q17. How do you usually communicate with the Home Support office?		
Telephone	91%	
Text message	0%	
E-mail	1%	
Other	7%	

Q18. When contacting the Home Support office:						
	Always	Most of the	Sometimes	Rarely	Never	l don't
	Always	time	Julieumes	Raiely	ivevei	know/not sure
Are you able to reach someone in a timely manner when you need to?	19%	43%	20%	10%	4%	4%
Are they helpful?	36%	38%	17%	4%	1%	3%
If you leave a message or send an email, does someone get back to you quickly?	22%	35%	19%	11%	6%	7%
Are you able to make changes to your schedule?	26%	30%	17%	8%	6%	12%

Q19. If your Community Health Worker is going to arrive more than 30 minutes late, do you receive a message letting you know?	
Yes, always	18%
Yes, sometimes	34%
No	33%
Not applicable	15%



Yes, always	26%
Yes, usually	27%
Yes, occasionally	10%
Yes, rarely	6%
No	13%
Not applicable	18%
Q21. If canceled, is your visit rescheduled?	
Yes, it is usually rescheduled	35%
It is usually not rescheduled	21%
No, it is never rescheduled	23%
I have never had a visit canceled	20%
Q22. Please rate the overall quality of the care you receive from the	Home Support program:
Excellent	22%
Very good	39%
Good	26%
Fair	10%
Poor	3%
Q23. Do you know who to contact if you have a concern or complair	nt about your Home Support services or a member of your Home Support team?
Yes	74%

26%



No

Q24. In the last 12 months, did you ever report a concern or complaint to your health authority about your Home Support services or a member of your Home Support team?		
Yes	26%	
I wanted to report, but was worried it might impact my care or Home Support services→ skip to		
question 27	6%	
$No \rightarrow \text{skip to question 27}$	67%	

Q25. Was your concern or complaint resolved to your satisfaction?		
	Yes	57%
	No	43%

Q26. If not, did you make a formal complaint to the Patient Care Quality Office in your health authority	?
Yes	21%
No	79%

Q27. Regardless of whether you have made a concern or complaint, do you feel comfortable reporting a concern about your Home Support services?	
Yes	77%
No	23%

Q29. Have you ever asked for a particular Community Health Worker to not be sent to your home again?	
Yes, and they have never come back	19%
Yes, but they were still sent again	9%
No	66%
Prefer not to answer	6%

Q30. Do you think Home Support program staff have ever treated you unfairly due to your nationality, ethnic origin, age, gender, sexual orientation, religion, socioeconomic status, or disability?

· ·	
No	95%
Yes	5%



Q31. Did your health authority contact you about how the Home Support program is handling COVID-19 and what you should expect?	
Yes	43%
$No \rightarrow $ skip to question 33	57%

Q32. Are you satisfied with the information that you received from your Home Support program regarding the impact of COVID-19 on the Home Support program?		
Yes	96%	
No	4%	

Q33. At any point during the COVID-19 pandemic, did you ask to reduce or put o	on hold your Home Support services?
Yes, I put my services on hold and they are still on hold	2%
Yes, I requested fewer visits	3%
Yes, I put my services on hold but have since resumed	6%
No	89%

Q34. At any point during the pandemic, have your Home Support services been impacted?	
Yes	27%
$No \rightarrow skip to question 37$	73%

Q35. If yes to above, how were your services impacted? (Please mark all that apply.)	
I received less service (not at my request)	53%
My service level was decreased at my request	8%
I put my services on hold	10%
There were more consistent workers (same number of visits, fewer different workers)	7%
There were fewer consistent workers (same number of visits, more different workers)	43%
I was impacted in a different way (explain below)	18%



Q36. If you experienced a reduction in your Home Support services during the	pandemic, did your family or another caregiver become more involved in helping to meet your care
needs?	
Yes	56%
No	29%
Not applicable (I did not experience a reduction in services)	15%

Q37. While in your home, do your Community Health Workers?						
	Always	Most of the	Sometimes	Rarely	Never	
	Aiways	time	Joinedines	Marery	IVEVEI	
Wear a mask	90%	8%	2%	0%	0%	
Wear gloves for personal care	86%	9%	3%	1%	1%	
Wash or sanitize hands when arriving	64%	17%	9%	5%	4%	

Q38.How worried are you about contracting COVID-19 from your Commur	nity Health Workers?	
Very worried	6%	
Somewhat worried	13%	
A little worried	23%	
Not at all worried	53%	
Prefer not to answer	4%	

Q39. How worried are you about contracting COVID-19 from people oth	er than your Community Health Workers?
Very worried	11%
Somewhat worried	22%
A little worried	29%
Not at all worried	27%
I do not interact with anyone else	8%
Prefer not to answer	4%



Q40. Do you pay for your public Home Support services?	
Yes	35%
No → skip to question 44	65%
Q41.Do you find the cost of your Home Support services is causir	ng you financial hardship or stress?
Yes	27%
No	73%
Q42. Are you aware of how to apply for a Temporary Rate Reduc	tion?
Yes	25%
No → skip to question 44	75%
Q43. Have you ever applied for a Temporary Rate Reduction?	
Yes, and I was successful	32%
Yes, but I was unsuccessful	8%
No	60%
Q44. Is English your first language?	
Yes	79%
No, my first language is:	21%
- Chinese (Mandarin or Cantonese)	25%
- German	12%
- Punjabi	11%
- Italian	6%
- Dutch	6%
- French	6%
- Other	34%



Q45. Did someone help you complete this survey?	
I did not get any help	46%
Home Support staff	1%
My spouse/partner	10%
Another family member	37%
Someone else	5%
- Friends and neighbours	46%
- Community Support (e.g. Community support worker, Social worker, Volunteers)	20%
- Power of attorney	3%
- Other	30%

Q46.Do you use any of the following? (Please mark all that apply.)		
Better at Home for housekeeping, meals and/or transportation	14%	
Housekeeping by a private housekeeper	34%	
HandyDART	32%	
Prepared meals delivered by a private company	17%	
Grocery delivery from the store	25%	
Medication delivery	65%	

Q47. Do you live in a	
Single detached home or duplex	37%
Condominium/townhouse/apartment	33%
Retirement/assisted living residence	24%
Other (including mobile home)	6%



Q48. Do you live alone?	
Yes	59%
No; [] people live with me	41%
- 1 person	66%
- 2-5 people	31%
- 6-10 people	2%
- Above 10 people or with family	1%

Q49. Aside from your Community Health Workers, is there anybody who routinely helps you with your personal care and other essential tasks, such as banking or shopping? (Please	
mark all that apply.)	
Spouse/partner	22%
Friend/neighbour	21%
Private home support	6%
Adult child	54%
Other family	27%

