



**2022 INTERNATIONAL HEALTH POLICY STUDY OF PRIMARY CARE PHYSICIANS  
TRANSLATION MASTER**

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

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**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

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## 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:

- **International Health Policy Survey 2022 – Erhebung bei den Hausärztinnen und -ärzten in der Schweiz** – 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](mailto: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**. 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](#).

**SWITZERLAND FOOTER (Q500=9)**

Falls Sie technische Probleme mit dem Fragebogen haben können Sie uns per Email unter **INSERT EMAIL ADDRESS** oder telefonisch unter **INSERT PHONE NUMBER** erreichen. Falls Sie mehr über den International Health Policy Survey erfahren möchten klicken Sie bitte hier: [www.bag.admin.ch/cwf](http://www.bag.admin.ch/cwf).

- 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 "Ihre Antworten zu diesen Fragen sind sehr wichtig für uns. Könnten Sie sich bitte kurz die Zeit nehmen, um die untenstehende Frage zu beantworten?"**

- **CLOSED FIELD MESSAGE:** (PN: THIS MESSAGE SHOULD BE DISPLAYED FOR ALL COUNTRIES' VERSIONS OF THE PROGRAM THAT HAVE BEEN CLOSED) – "Die Befragung ist abgeschlossen. Besten Dank für Ihr Verständnis."

**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 2012, 2015]*

**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 2015]*

**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 2015]*

*(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 5<sup>th</sup>, 2019" would show up as "190105"

*[IHP 2012, 2015]*

**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 2009, 2012, 2015]*

**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 2009, 2012, 2015]*

**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 2009, 2012, 2015]*

**BASE: France (Q500=3)**

Q509.PRELOAD - POSTCODE

[ALPHANUMERIC; MAX 5 CHARACTERS]

|\_|\_|\_|\_|

*[IHP 2009, 2012, 2015]*

**BASE: UK (Q500=10)**

Q513. JOB TITLE - FROM SCREENER

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

[IHP 2009, 2012, 2015]

**BASE: US (Q500=11)**

Q520.PRELOAD - SPECIALTY

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

[IHP 2009, 2012, 2015]

**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 2009, 2012, 2015]*

**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

*(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

*[Revised IHP 2009, 2012, 2015 - new code 3 for missing sample-data]*

**BASE: CANADA (Q500=2)**

Q530.PRELOAD - SAMPLE FILE SPECIALTY

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

*[IHP 2009, 2012, 2015]*

**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

*[Revised IHP 2009, 2012, 2015 - no alphabetical set of codes; just numeric codes]*

**BASE: CANADA (Q500=2)**

Q532.PRELOAD - SAMPLE FILE GENDER

- 1 MALE
- 2 FEMALE

*[New 2019]*

**BASE: CANADA (Q500=2)**

Q533.PRELOAD CANADA SAMPLE TYPE

- 1 Wave 1
- 2 Wave 2
- 3 Census

*[New 2019]*

**BASE: CANADA (Q500=2)**

Q535.CANADIAN HARD-COPY QRE TYPE

- 1 French Main
- 2 English Main

*[New 2019]*

**BASE: CANADA (Q500=2)**

Q536.PRELOAD CANADIAN EMAIL ADDRESS AVAILABILITY

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

*[IHP 2009, 2012, 2015]*

**BASE: GERMANY (Q500=4)**

Q540.PRAXIS-STEMPEL FROM QUESTIONNAIRE- SPECIALTY



- 1 GP/Internist
- 2 Pediatrician

*[IHP 2009, 2012, 2015]*

**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

*[New 2019]*

**BASE: GERMANY (Q500=4)**

Q542.PRELOAD GERMANY EMAIL ADDRESS

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

*[IHP 2009, 2012, 2015]*

**BASE: SWEDEN (Q500=8)**

Q546.PRELOAD - SAMPLE FILE PUBLIC/PRIVATE

- 1 Public practice
- 2 Private practice

*[Revised IHP 2009, 2012, 2015 – combined Stockholm and Gotland at code 1 and removed code 8.]*

**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 RACGP’s sample)*

**BASE: AUSTRALIA (Q500=1)**

Q555.PRELOAD - AUSTRALIAN SAMPLE MATCHED BETWEEN SOURCES

- 1 MDA only
- 2 MDA matched to RACGP

*[IHP 2009, 2012, 2015]*

**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

*[Revised IHP 2009, 2012, 2015 - new set of codes for NSW strata]*

**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 2015]*

**BASE: NEW ZEALAND (Q500=6)**

Q558.PRELOAD SAMPLE FILE REGION

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

*[New 2019]*

**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 2009, 2012, 2015]*

**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 2012, 2015]*

**BASE: SWITZERLAND (Q500=9)**

Q570.LINGUISTIC REGIONS – PRELOAD

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

*[IHP 2012, 2015]*

**BASE: SWITZERLAND (Q500=9)**

Q571.COMMUNITY TYPE – PRELOAD

- 1 City/large town
- 2 Suburbs of a city/large town

- 3 Small town
- 4 Village or rural location

[IHP 2012, 2015]

**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 2012, 2015]

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

Q573.COMPUTE FOR AGE from PRELOAD.

[PN: RANGE 18 -108]

[Revised IHP 2012, 2015 – new code 9]

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

Q574.PRELOAD - SAMPLE FILE GENDER

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

[IHP 2012, 2015]

**BASE: SWITZERLAND (Q500=9)**

Q575.PRELOAD - SAMPLE FILE SPECIALTY

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

*[New 2019]*

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

QRCODE. QRCODE FOR MAIL COMPLETES

[PN: 4 alphanumeric digits]

*[New 2019]*

**BASE: ALL RESPONDENTS**

WEIGHT. WEIGHTS FOR ALL COUNTRIES

[PN: ALLOW 10 DIGITS FOR THIS VARIABLE.]

**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)*

**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>]]

Please click ‘NEXT’ to continue.]

*(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](http://www.ssrs.com/privacy-policy) or email us at [info@ssrs.com](mailto: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

999 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](http://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](http://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 €XX, 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](http://www.ssrs.com/privacy-policy) or email us at [info@ssrs.com](mailto: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](http://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. **International Health Policy Survey 2022 – Erhebung bei den Hausärztinnen und -ärzten in der Schweiz** [BOLD AND CENTERED ON THE SCREEN]

Willkommen und vielen Dank für Ihre Teilnahme an dieser durch die **Verbindung der Schweizer Ärztinnen und Ärzte (FMH)** und das **Bundesamt für Gesundheit (BAG)** durchgeführten Erhebung. Diese erlaubt den politischen Entscheidungsträgern ein besseres Verständnis der Standpunkte und Erfahrungen der Hausärzte in Bezug auf die Betreuung ihrer Patienten. Ihre Antworten sind sehr wichtig, damit wir besser verstehen, wie die Hausärzte das Schweizer Gesundheitssystem sehen.

Das Ausfüllen des Fragebogens sollte etwa 15 Minuten dauern. Ihre Teilnahme ist freiwillig. **[WEB ONLY :** Falls nötig können Sie den Fragebogen unterbrechen und später fertig ausfüllen, indem Sie die Seite schliessen. Um das Ausfüllen fortzusetzen, können Sie sich auf der Internetseite [www.demoscope-survey.ch/ihp22](http://www.demoscope-survey.ch/ihp22) mit Ihren Zugangsdaten erneut einloggen. Nach 10-minütiger Inaktivität müssen Sie sich allenfalls erneut einloggen.]

**Vielen Dank für Ihre Mithilfe bei dieser wichtigen Erhebung.**

Bitte klicken Sie auf ‘Weiter’, um weiterzufahren.

*(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](http://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, 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. **Wie würden Sie gesamthaft die Leistung des Gesundheitssystems in der Schweiz beurteilen:**

PHONE ONLY: Würden Sie sagen, diese ist... (ANTWORTEN VORLESEN)?

1 Sehr gut

2 Gut

3 Akzeptabel

4 Schlecht

5 Sehr schlecht

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

998 PHONE ONLY: (V) Weiss nicht

999 PHONE ONLY: (V) Antwort verweigert; 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. **Wie zufrieden sind Sie allgemein mit Ihrer ärztlichen Tätigkeit?**

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

1 Äusserst zufrieden

2 Sehr zufrieden

3 Mässig zufrieden

4 Gerinfügig zufrieden

5 Überhaupt nicht zufrieden

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

998 PHONE ONLY: (V) Weiss nicht

999 PHONE ONLY: (V) Antwort verweigert; 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. **Denken Sie, dass sich seit dem Beginn der Covid-19 Pandemie im März 2020 die Qualität der medizinischen Versorgung Ihrer Patienten durch das Gesundheitssystem insgesamt verbessert hat, verschlechtert hat oder ungefähr gleich geblieben ist?**

1 Verbessert

2 Verschlechtert

3 Ungefähr gleich

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

998 PHONE ONLY: (V) Weiss nicht

999 PHONE ONLY: (V) Antwort verweigert; WEB/MAIL ONLY: Blank

**PN: SHOW TO ALL:** “Falls Sie an mehreren Orten arbeiten, beziehen Sie bitte Ihre Antworten auf die folgenden Fragen im gesamten Fragebogen auf Ihre Haupt-Praxis (z.B. dort wo Sie am meisten Zeit mit Patienten verbringen).”

**SECTION A: ACCESS TO CARE**

(IHP 2019 Q5 Modified – new item d, 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. **Unterstützen Sie und/oder Personal, welches mit Ihnen in Ihrer Praxis arbeitet, Patienten in der folgenden Weise:**

PHONE ONLY: (IF RESPONDENT SAYS “ Oui,” ASK: “Diriez-vous fréquemment, occasionnellement ou non?)

PHONE ONLY: How about (READ ITEM)?

1 Ja, oft

2 Ja, gelegentlich

3 Nie

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

998 PHONE ONLY: (V) Weiss nicht

999 PHONE ONLY: (V) Antwort verweigert; WEB/MAIL ONLY: Blank

a. Sie machen Hausbesuche

b. Sie koordinieren die Versorgung mit den Sozialdiensten oder anderen Pflegediensten (Spitex).

c. Sie machen Konsultationen per Video-Übertragung

(IHP 2019 Q6 Modified – removed code 5 for Norway)

**BASE: ALL RESPONDENTS**

5. **Wie häufig ermöglicht Ihre Praxis Termine nach 18 Uhr unter der Woche (d.h. Montag bis Freitag)?**

WEB/MAIL ONLY: (Anmerkung: Geben Sie bitte sowohl persönliche als auch telemedizinische Termine an.)

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

PHONE ONLY: (READ LIST)

1 Nie

2 Ein Tag in der Woche

3 2 bis 3 Tage in der Woche

4 4 oder mehr Tage in der Woche

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

998 PHONE ONLY: (V) Weiss nicht

999 PHONE ONLY: (V) Antwort verweigert; WEB/MAIL ONLY: Blank

(IHP 2019 Q7 Modified – removed code 5 for Norway)

**BASE: ALL RESPONDENTS**

6. Wie häufig ermöglicht Ihre Praxis Termine am Wochenende (d.h. samstags oder sonntags)?

WEB/MAIL ONLY: (Anmerkung: Geben Sie bitte sowohl persönliche als auch telemedizinische Termine an.)

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

PHONE ONLY: (READ LIST)

1 Nie

2 Ein Tag pro Monat

3 2 bis 3 Tage pro Monat

4 4 oder mehr Tage pro Monat

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

998 PHONE ONLY: (V) Weiss nicht

999 PHONE ONLY: (V) Antwort verweigert; WEB/MAIL ONLY: Blank

(IHP 2019 Q8, 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. Ohne die Notaufnahme eines Spitals mitzuzählen, haben Sie in Ihrer Praxis eine Regelung, intern oder mit einer anderen Praxis, die es den Patienten erlaubt, auch ausserhalb der normalen Sprechstunden einen Arzt oder eine Arztgehilfin aufzusuchen?

1 Ja, die Patienten können nur persönlich betreut werden

2 Ja, die Patienten können nur telemedizinisch betreut werden

3 Ja, die Patienten können sowohl persönlich als auch telemedizinisch betreut werden

2 Nein

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

998 PHONE ONLY: (V) Weiss nicht

999 PHONE ONLY: (V) Antwort verweigert; WEB/MAIL ONLY: Blank

**SECTION B: USE OF TELEHEALTH**

**PN: SHOW TO ALL:** Die nächsten Fragen beziehen sich auf Telemedizin, d. h. die Bereitstellung klinischer Versorgung und anderer gesundheitsbezogener Dienstleistungen für Patienten per Video oder Telefon statt eines persönlichen Besuchs.

(IHP 2022 New)

**BASE: ALL RESPONDENTS**

[PN: SET UP AS GRID FOR WEB]

[PN: ALLOW RANGE 0-100]

[PN: DECIMALS SHOULD BE ALLOWED]

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

8. Wie viel Prozent Ihrer Patiententermine werden in einer typischen Woche derzeit jeweils in folgender Form betreut:  
[IF NZ OR UK, (Q500=6,10), DISPLAY: "consultations"; IF ELSE, (Q500=1-5, 7-9,11), DISPLAY: "visits"]

WEB ONLY: (Anmerkung: Ihre bestmögliche Schätzung ist in Ordnung. Es sollte sich eine Summe von etwa 100 % ergeben.)

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

Prozentsatz der Patiententermine ...

- |   |  |       |   |
|---|--|-------|---|
| 1 | mit persönlichem Erscheinen                                    | _____ | % |
| 2 | telefonisch (in direktem Gespräch oder mit vorbereitetem Text) | _____ | % |
| 3 | per Video  | _____ | % |

998 PHONE ONLY: (V) Weiss nicht

999 PHONE ONLY: (V) Antwort verweigert; WEB/MAIL ONLY: Blank

(IHP 2022 New)

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

9. Wie zufrieden sind Sie (falls überhaupt) insgesamt mit dem Einsatz der Telemedizin?

- |   |                  |
|---|------------------|
| 1 | Sehr zufrieden   |
| 2 | Eher zufrieden   |
| 3 | Eher unzufrieden |
| 4 | Sehr unzufrieden |

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. Wie einfach bzw. schwierig war es bisher, eine telemedizinische Plattform in Ihrer Praxis einzuführen?

PHONE ONLY: (READ LIST)

- 1 Sehr einfach
- 2 Eher einfach
- 3 Eher schwierig
- 4 Sehr schwierig

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

998 PHONE ONLY: (V) Weiss nicht

999 PHONE ONLY: (V) Antwort verweigert; 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. Würden Sie sagen, Telemedizin hat:

[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 Ja, in hohem Masse
- 2 Ja, in gewissem Masse
- 3 Nein

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

998 PHONE ONLY: (V) Weiss nicht

999 PHONE ONLY: (V) Antwort verweigert; WEB/MAIL ONLY: Blank

- a. Die zeitgerechte Versorgung Ihrer Patienten verbessert?
- b. Es Ihrer Praxis ermöglicht, potenzielle finanzielle Einbussen während der COVID-19-Pandemie auszugleichen?
- c. Es Ihnen ermöglicht, die psychischen und verhaltensbezogenen gesundheitlichen Bedürfnisse Ihrer Patienten effektiv einzuschätzen?
- d. Dazu geführt, dass Sie mehr Labor- oder Bildgebungsuntersuchungen angefordert haben?
- e. Dazu geführt, dass Sie mehr Antibiotika verschrieben haben?

(IHP 2022 New)

**BASE: ALL RESPONDENTS**

[PN: SET UP AS GRID FOR WEB]

12. Eine wie grosse Herausforderung (falls überhaupt) stellen die folgenden Aspekte der Telemedizin dar?

[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 Eine grosse Herausforderung
- 2 Eine geringe Herausforderung
- 3 Keine Herausforderung
- 6 Nicht anwendbar

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

998 PHONE ONLY: (V) Weiss nicht

999 PHONE ONLY: (V) Antwort verweigert; WEB/MAIL ONLY: Blank

- b. Geringe oder gar keine Kostenerstattung
- e. Erhöhte Kosten für die Einführung und/oder Instandhaltung einer Telemedizin-Plattform

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

### **PN: SHOW TO ALL:**

**(WEB/PHONE):** Die nächsten Fragen beziehen sich auf das Pflegemanagement bei Patienten mit chronischen Erkrankungen und anderen besonderen Bedürfnissen im Allgemeinen.

**(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 with new item f, 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. **Wie gut ist Ihre Praxis in Bezug auf ausreichende Kompetenzen und Erfahrung vorbereitet auf die Behandlung von Patienten mit:**

PHONE ONLY: (READ LIST OF RESPONSE-OPTIONS)  
PHONE ONLY: How about (READ ITEM)?

- 1 Gut vorbereitet
- 2 Einigermassen vorbereitet
- 3 Nicht vorbereitet
- 4 Solche Patienten habe ich nicht

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

998 PHONE ONLY: (V) Weiss nicht

999 PHONE ONLY: (V) Antwort verweigert; WEB/MAIL ONLY: Blank

- a. Chronischen Erkrankungen (z. B. Diabetes, COPD, Herzinsuffizienz)
- b. psychischen Problemen (z.B. Angstzustände, schwache oder mittlere Depressionen)
- c. Problemen im Zusammenhang mit der Einnahme gewisser Substanzen (z. B. Drogen, Opiate, Alkoholkonsum)
- d. Bedarf nach einer palliativen Behandlung
- e. Demenz
- g. [FOR CAN RESPONDENTS ONLY, (Q500=2), DISPLAY: "Patients requesting medical assistance in dying"]

(IHP 2019 Q10, 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. Arbeitet Ihre Praxis mit Personal wie Pflegefachpersonal oder Casemanagern, die die Behandlung von Patienten mit chronischen Erkrankungen, die regelmässige Nachbehandlungen brauchen, überwachen und koordinieren?

WEB/MAIL ONLY: (Anmerkung: Bitte alle zutreffenden Punkte wählen.)

PHONE ONLY: (SI LE RÉPONDANT DIT "Oui" RELANCER ""Est-ce que vous avez recours à du personnel au sein de votre cabinet ou hors de votre cabinet?"')

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

1 Ja, Personal innerhalb der Praxis

2 Ja, Personal ausserhalb der Praxis

3 Nein

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

998 PHONE ONLY: (V) Weiss nicht

999 PHONE ONLY: (V) Antwort verweigert; 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. **Wie häufig leisten Sie oder anderes Personal in Ihrer Praxis für Patienten mit chronischen Erkrankungen die folgenden Behandlungsarten:**

PHONE ONLY: (READ LIST OF RESPONSE-OPTIONS)

PHONE ONLY: How about (READ ITEM)?

1 Meistens (75-100% der Fälle)

2 Häufig (50-74% der Fälle)

3 Manchmal (25-49% der Fälle)

4 Selten (1-24% der Fälle)

5 Nie

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

998 PHONE ONLY: (V) Weiss nicht

999 PHONE ONLY: (V) Antwort verweigert; WEB/MAIL ONLY: Blank

- a. Mit Patienten Behandlungspläne zusammenstellen, die sie im Alltag umsetzen können
- b. Den Patienten schriftliche Anleitungen zur Verfügung stellen, wie sie sich zu Hause selbst behandeln können (z.B. Anleitungen zur Linderung von Symptomen)
- c. Vermerken der Ziele zum Selbstmanagement der Patienten in ihrem Patientendossier
- d. Kontaktieren von Patienten zwischen den Arztterminen, um ihren Zustand zu überwachen
- e. Verwendung von Monitoring auf Distanz oder mit dem Internet verbundenen medizinischen Geräten, um Patienten zu überwachen, dort wo dies medizinisch angebracht ist (z. B. Monitoring von Blutdruck, Blutzuckerspiegel oder Gewicht)

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

**BASE: ALL RESPONDENTS**

16. Führen Sie Gespräche mit Ihren Patienten zur "Zukunftsplanung" der Behandlungen, die sie wollen oder nicht wollen für den Fall, dass sie sehr krank werden, verletzt sind, oder nicht mehr selber entscheiden können?

PHONE ONLY: (READ LIST)

- 1 Ja, regelmässig
- 2 Ja, gelegentlich
- 3 Nein, überhaupt nicht
- 4 Nicht zutreffend

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

998 PHONE ONLY: (V) Weiss nicht

999 PHONE ONLY: (V) Antwort verweigert; 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. Wenn Ihre Patienten an einen Spezialisten überwiesen wurden, wie häufig:

PHONE ONLY: (READ LIST OF RESPONSE-OPTIONS)

PHONE ONLY: How about (READ ITEM)?

- 1 Meistens (75-100% der Fälle)
- 2 Häufig (50-74% der Fälle)
- 3 Manchmal (25-49% der Fälle)
- 4 Selten (1-24% der Fälle)
- 5 Nie

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

998 PHONE ONLY: (V) Weiss nicht

999 PHONE ONLY: (V) Antwort verweigert; WEB/MAIL ONLY: Blank

- a. schicken Sie das Patientendossier und die Begründung für die Konsultation an den Spezialisten
- b. erhalten Sie Informationen vom Spezialisten über Änderungen, die bei den Medikamenten oder bei der Behandlung des Patienten gemacht wurden
- c. erhalten Sie innerhalb einer Arbeitswoche einen Bericht mit den Resultaten des Spezialisten

(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. **Wie häufig erhalten Sie Benachrichtigungen, dass Ihre Patienten:**

PHONE ONLY: (READ LIST OF RESPONSE-OPTIONS)

PHONE ONLY: How about (READ ITEM)?

1 Meistens (75-100% der Fälle)

2 Häufig (50-74% der Fälle)

3 Manchmal (25-49% der Fälle)

4 Selten (1-24% der Fälle)

5 Nie

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

998 PHONE ONLY: (V) Weiss nicht

999 PHONE ONLY: (V) Antwort verweigert; WEB/MAIL ONLY: Blank

a. eine Behandlung ausserhalb der normalen Sprechstunden erhalten haben (d. h. Patienten einen Arzt aufsuchen können, wenn die Praxis geschlossen ist, ohne sich in die Notaufnahme zu begeben)

b. in der Notfallaufnahme waren

c. in ein Spital eingeliefert wurden

(IHP 2019 Q16, 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. **Wie lange dauert es durchschnittlich nach der Entlassung Ihres Patienten aus dem Spital, bis Sie die Informationen erhalten, die Sie benötigen, um mit der Behandlung des Patienten – einschliesslich der empfohlenen Nachsorge – fortfahren zu können?**

PHONE ONLY: (READ LIST)

1 Weniger als 24 Stunden

2 24 bis weniger als 48 Stunden

3 2-4 Tage

4 5-14 Tage

5 15-30 Tage

6 Mehr als 30 Tage

7 Bekomme diese Informationen selten oder nie

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

998 PHONE ONLY: (V) Weiss nicht

999 PHONE ONLY: (V) Antwort verweigert; WEB/MAIL ONLY: Blank

(IHP 2019 SWI-1 Modified – added Germany to base, 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: GERMANY AND SWITZERLAND RESPONDENTS THAT RECEIVE HOSPITAL DISCHARGE INFO (Q500=4,9 AND Q19=1-6)**

[PN: DISPLAY AFTER Q19]

GSWI-1. **Wie erhalten Sie diese Informationen normalerweise? (Bitte nur eine Antwort auswählen)**

- 1 Fax
  - 2 Post
  - 3 Email
  - 4 Online (z.B., Internetportal/File Transfer)
  - 5 durch den Patient selber mitgebracht
  - 6 Andere
- 998 PHONE ONLY: (V) Weiss nicht  
999 PHONE ONLY: (V) Antwort verweigert; 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. **Für Ihre Patienten, die Pflege zu Hause brauchen, wie häufig:**

PHONE ONLY: (READ LIST OF RESPONSE-OPTIONS)  
PHONE ONLY: How often (READ ITEM)?

- 1 Meistens (75-100% der Fälle)
  - 2 Häufig (50-74% der Fälle)
  - 3 Manchmal (25-49% der Fälle)
  - 4 Selten (1-24% der Fälle)
  - 5 Nie
  - 6 Nicht zutreffend
- 996 MAIL ONLY (AS PART OF BACK-END PROCEDURES ONLY): Multiple-response code  
998 PHONE ONLY: (V) Weiss nicht  
999 PHONE ONLY: (V) Antwort verweigert; WEB/MAIL ONLY: Blank

- a. **kommunizieren Sie mit dem Erbringer der Heimpflegeleistungen betreffend der Bedürfnisse Ihres Patienten und der Leistungen, die für ihn erbracht werden sollten?**
- b. **werden Sie durch den Erbringer der Heimpflegeleistungen über eine wichtige Änderung des Zustands Ihres Patienten oder seines Gesundheitsstatus informiert?**



(IHP 2019 Q18 Modified -- item e removed)

**BASE: ALL RESPONDENTS**

[PN: SET UP AS GRID FOR WEB]

21. Wie häufig, falls überhaupt, untersuchen oder beurteilen Sie oder anderes Personal aus Ihrer Praxis Ihre Patienten bezüglich den folgenden sozialen Bedürfnissen?

PHONE ONLY: (READ LIST OF RESPONSE-OPTIONS)

PHONE ONLY: How about (READ ITEM)?

1 Meistens (75-100% der Fälle)

2 Häufig (50-74% der Fälle)

3 Manchmal (25-49% der Fälle)

4 Selten (1-24% der Fälle)

5 Nie

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

998 PHONE ONLY: (V) Weiss nicht

999 PHONE ONLY: (V) Antwort verweigert; WEB/MAIL ONLY: Blank

- a. Probleme im Wohnbereich (z.B. Zwangsräumung, Obdachlosigkeit, etc.)
- b. Finanzielle Sicherheit (z.B. Erwerbstätigkeit)
- c. Ernährungsprobleme (z.B. Hunger und Ernährungsweise)
- d. Transportbedürfnisse (z.B. Arzttermine, Arbeit, Lebensmittelladen, oder andere Orte des Alltags)
- f. Häusliche Gewalt
- g. Soziale Isolation oder Einsamkeit (z.B. keine engen Beziehungen oder niemand im Umfeld, den man um Hilfe bitte könnte)

*(IHP 2019 Q19 Modified – updated item a, code 4 included for Sweden and Switzerland)*

**BASE: ALL RESPONDENTS**

[PN: SET UP AS GRID FOR WEB]

22. Mit welchen Herausforderungen sind Sie oder andere Mitarbeiter in Ihrer Praxis derzeit konfrontiert, wenn die Versorgung Ihrer Patienten mit den Sozialdiensten koordiniert wird?

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 Bedeutende Herausforderung

2 Geringe Herausforderung

3 Keine Herausforderung

4 [FOR SWITZ AND SWED RESPONDENTS ONLY, (Q500=9), DISPLAY: Keine Koordination mit Sozialdiensten]

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

998 PHONE ONLY: (V) Weiss nicht

999 PHONE ONLY: (V) Antwort verweigert; WEB/MAIL ONLY: Blank

- a. Mangelnde Informationen zu Organisationen der zuständigen Sozialdienste
- b. Fehlende Mechanismen oder fehlendes System, um Überweisungen zu tätigen
- c. Unzureichendes Personal in der Praxis, um Überweisungen zu tätigen und die Pflege mit den Institutionen der Sozialdienste zu koordinieren
- d. Zuviel administrative Arbeit im Zusammenhang mit der Koordination mit den Sozialdiensten
- e. Mangelndes Nachfragen durch die Sozialdienste bezüglich der Leistungen, welche Patienten erhalten haben oder brauchen

**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: Arbeiten Sie in Ihrer Praxis mit elektronischen Patientendossiers (nicht gemeint sind Abrechnungssysteme)?

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

Anmerkung: Es geht hier um die praxis-eigenen digitalen Krankengeschichten und nicht um das schweizweite elektronische Patientendossier (EPD).

1 Ja

2 Nein

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

998 PHONE ONLY: (V) Weiss nicht

999 PHONE ONLY: (V) Antwort verweigert; 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. Können Sie mit Gesundheitsdienstleistern ausserhalb Ihrer Praxis elektronisch die folgenden Dinge austauschen? [PHONE ONLY: “, not including fax or regular email”]?  
[PHONE ONLY: (READ FIRST ITEM)]

WEB/MAIL ONLY: (Anmerkung: Zählen Sie Fax oder normale E-Mails nicht dazu.)

PHONE ONLY: How about (READ ITEM)?

1 Ja

2 Nein

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

998 WEB/MAIL ONLY: Weiss nicht / PHONE ONLY: (V) Weiss nicht

999 PHONE ONLY: (V) Antwort verweigert; WEB/MAIL ONLY: Blank

a. Krankheitsbilder von Patienten

b. Labordaten und andere diagnostische Tests

c. Liste aller Medikamente, die durch einen einzelnen Patienten eingenommen werden

(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: Bitte geben Sie an, ob Ihre Praxis Ihren Patienten die Möglichkeit gibt:  
PHONE ONLY: Votre cabinet offre-t-il la possibilité à vos patients de: (READ FIRST ITEM)?  
PHONE ONLY: How about (READ ITEM)?

1 Ja

2 Nein

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

998 WEB/MAIL ONLY: Weiss nicht / PHONE ONLY: (V) Weiss nicht

999 PHONE ONLY: (V) Antwort verweigert; WEB/MAIL ONLY: Blank

- a. Per E-Mail oder sichere Webseite mit Ihrer Praxis bezüglich einer medizinischen Frage oder einem Anliegen zu kommunizieren
- b. Online Arzttermine anzufordern (Anmerkung: Keine E-Mails einbeziehen)
- c. Online Rezeptverlängerungen anzufordern (Anmerkung: E-Mail nicht eingeschlossen)
- d. Testresultate online einsehen
- e. Zusammenfassungen der Arztbesuche eines Patienten online einsehen (Gründe für den Arztbesuch, Befunde, Ergebnisse)

(IHP 2019 SWI-2)

**BASE: SWITZ RESPONDENTS (Q500=9)**

[PN: DISPLAY AFTER Q25]

SWI-2. Planen Sie, sich mit Ihrer Praxis dem schweizweiten elektronischen Patientendossier (EPD) (Austausch von Informationen mit anderen Gesundheitsdienstleistern) anzuschliessen?

1 Ja, während diesem Jahr

2 Ja, in den nächsten ein bis zwei Jahren

3 Ja, in den nächsten zwei bis drei Jahren

4 Ja, das braucht aber drei Jahre oder länger

5 Nein, ich plane nicht, mich dem schweizweiten elektronischen Patientendossier (EPD) anzuschliessen

6 Ich nutze bereits das schweizweite elektronische Patientendossier (EPD) und bin einer Stammgemeinschaft angeschlossen

998 PHONE ONLY: (V) Weiss nicht

999 PHONE ONLY: (V) Antwort verweigert; WEB ONLY: Blank

## **SECTION G: PROVIDER EXPERIENCES WITH THEIR PRACTICE**

**PN: SHOW TO ALL:** Die nächsten Fragen beziehen sich auf Ihre derzeitigen Erfahrungen in Ihrer Praxis verglichen mit der Zeit vor Beginn der COVID-19-Pandemie.

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

### **BASE: ALL RESPONDENTS**

**33. Wie hat sich Ihre Arbeitsbelastung im Vergleich zur Lage vor der COVID-19-Pandemie verändert:**

- 1 Erheblich zugenommen
- 2 Etwas zugenommen
- 3 Ungefähr gleich geblieben
- 4 Etwas abgenommen
- 5 Erheblich abgenommen

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. Wie hat sich Ihr Praxisumsatz im Vergleich zur Lage vor der COVID-19-Pandemie verändert:**

- 1 Erheblich zugenommen
- 2 Etwas zugenommen
- 3 Ungefähr gleich geblieben
- 4 Etwas abgenommen
- 5 Erheblich abgenommen

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

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

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

*(IHP 2019 UK2 Modified – updated frame of reference to be the past two years, expanded base to be asked of all countries)*

### **BASE: ALL RESPONDENTS**

**35. Wie hat sich die Qualität der Behandlung, die Sie Ihren Patienten derzeit anbieten können, im Vergleich zur Lage vor der COVID-19-Pandemie insgesamt verändert:**

- 1 Erheblich zugenommen
- 2 Etwas zugenommen
- 3 Ungefähr gleich geblieben
- 4 Etwas abgenommen
- 5 Erheblich abgenommen

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. Wie häufig (falls überhaupt) werden in Ihrer Praxis Daten in Bezug auf die folgenden Aspekte der Versorgung Ihrer Patienten geprüft? [PHONE ONLY: “(READ FIRST ITEM)”]

PHONE ONLY: (READ LIST OF RESPONSE-OPTIONS)

PHONE ONLY: How about (READ ITEM)?

1 Vierteljährlich

2 Jährlich

3 Weniger häufig

4 Nie

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

998 PHONE ONLY: (V) Weiss nicht

999 PHONE ONLY: (V) Antwort verweigert; WEB/MAIL ONLY: Blank

- a. Klinische Ergebnisse WEB ONLY: (z.B. Prozentanteil der Diabetiker oder Asthmatiker, bei welchen die Krankheit unter Kontrolle ist)
- b. Einweisungen von Patienten in Spitäler und Notaufnahmen
- c. Vorgehen beim Verschreiben von Medikamenten (z.B. Verwendung von Generika, Antibiotika oder Opiaten)
- d. Befragungen zur Zufriedenheit und zu den Erfahrungen Ihrer Patienten mit der Behandlung und Pflege
- e. Patientenberichtete Indikatoren (PROMs, Patient Reported Outcome Measures)

(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. Inwiefern ist der Zeit-Aufwand, den Sie oder Ihre Angestellten für die folgenden Punkte aufwenden, problematisch: [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 Grosses Problem

2 Kleines Problem

3 Kein Problem

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

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

998 PHONE ONLY: (V) Weiss nicht

999 PHONE ONLY: (V) Antwort verweigert; WEB/MAIL ONLY: Blank

a. Für administrative Tätigkeiten im Zusammenhang mit den Versicherungen oder der Abrechnung.

b. Patienten mit den benötigten Medikamenten oder der benötigten Behandlung zu versorgen, wenn ein eingeschränkter Versicherungsschutz besteht.

c. Klinische Daten oder Daten zur Behandlungsqualität für staatliche Stellen oder andere externe Organisationen wie z.B. Krankenkassen zusammenstellen.

d. Dokumentation der Patientenversorgung oder der Patiententermine, einschliesslich ärztlicher Notizen und Aktualisierungen elektronischer Gesundheitsakten.

e. Koordinierung von Überweisungen an Spezialisten (z. B. ausbleibende Reaktionen auf Überweisungen, Nachverfolgung von Ablehnungen).

f. Einhaltung sich ändernder COVID-19-bedingter Pflegeprotokolle und Vorschriften.

(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. **Wie stressig, falls überhaupt, ist Ihre Tätigkeit als Hausarzt?**

PHONE ONLY: (READ LIST)

1 Äusserst stressig

2 Sehr stressig

3 Etwas stressig

4 Nicht allzu stressig

5 Überhaupt nicht stressig

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

998 PHONE ONLY: (V) Weiss nicht

999 PHONE ONLY: (V) Antwort verweigert; 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. **Bitte geben Sie an, wie zufrieden Sie mit den folgenden Aspekten Ihrer ärztlichen Tätigkeit sind.** [PHONE ONLY: "(READ FIRST ITEM)"]

PHONE ONLY: (READ LIST OF RESPONSE-OPTIONS)

PHONE ONLY: How about (READ ITEM)?

1 Äusserst zufrieden

2 Sehr zufrieden

3 Mässig zufrieden

4 Gerinfügig zufrieden

5 Überhaupt nicht zufrieden

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

998 PHONE ONLY: (V) Weiss nicht

999 PHONE ONLY: (V) Antwort verweigert; WEB/MAIL ONLY: Blank

a. Mit Ihrem Einkommen durch die Praxistätigkeit

b. Mit der Zeit, die Sie pro Patient aufbringen können

c. Mit Ihrem täglichen Arbeitspensum

d. Mit der Zeit, die Sie mit Verwaltungsarbeiten verbringen

e. Mit Ihrer 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. Haben Sie vor, in den nächsten ein bis drei Jahren keine Patienten mehr regelmässig zu behandeln (z. B. weil Sie sich zur Ruhe setzen oder sich beruflich verändern)?

1 Ja

2 Nein

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

998 Weiss nicht

999 PHONE ONLY: (V) Antwort verweigert; WEB/MAIL ONLY: Blank

*(IHP 2022 New)*

**BASE: ALL RESPONDENTS**

31. Wie würden Sie nach Ihrer Definition von Burnout Ihr eigenes derzeitiges Burnout-Niveau insgesamt einschätzen?

PHONE ONLY: (READ LIST OF RESPONSE-OPTIONS)

1 Ich habe Spass an meiner Arbeit. Burnout-Symptome habe ich nicht.

2 Ich habe gelegentlich Stress und nicht immer so viel Energie wie früher, fühle mich aber nicht ausgebrannt.

3 Ich bin auf jeden Fall ausgebrannt und leide unter einem oder mehreren Burnout-Symptomen wie körperlicher und emotionaler Erschöpfung.

4 Die Burnout-Symptome, die bei mir auftreten, gehen nicht weg. Ich denke viel an die Frustration bei der Arbeit.

5 Ich fühle mich völlig ausgebrannt und frage mich oft, ob ich so weitermachen kann. Ich bin an einem Punkt, wo ich vielleicht etwas ändern oder mir Hilfe suchen müsste.

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

998 PHONE ONLY: (V) Weiss nicht

999 PHONE ONLY: (V) Antwort verweigert; WEB/MAIL ONLY: Blank

**SECTION H: PERSONAL AND PRACTICE CHANGES SINCE COVID**

*(IHP 2022 New)*

**BASE: ALL RESPONDENTS**

32. Traf seit März 2020, als die COVID-19-Pandemie begann, Folgendes auf Sie zu ...  
[PHONE ONLY: "(READ FIRST ITEM)"]

PHONE ONLY: (READ LIST OF RESPONSE-OPTIONS)

1 Ja

2 Nein

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

998 PHONE ONLY: (V) Weiss nicht

999 PHONE ONLY: (V) Antwort verweigert; WEB/MAIL ONLY: Blank

a. Emotionaler Stress wie Angst, große Traurigkeit, Wut oder ein Gefühl der Hoffnungslosigkeit

b. Inanspruchnahme von professioneller Hilfe wegen eines psychischen Problems

## **SECTION I: PERSPECTIVES ON THE HEALTH CARE SYSTEM**

(IHP 2021 Q1700)

**BASE: ALL RESPONDENTS**

36. Wie häufig, falls überhaupt, denken Sie, dass das Gesundheitssystem in der Schweiz [IF UK, US, NETH (Q500=5,10,11) DISPLAY: "the"] [INSERT COUNTRY FROM Q500] Personen wegen ihrer ethnischen Herkunft ungerecht behandelt?

[PHONE ONLY: READ LIST]

- 1 Sehr häufig
- 2 Häufig
- 3 Manchmal
- 4 Selten
- 5 Nie

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

998 WEB/MAIL ONLY: Weiss nicht / PHONE ONLY: (V) Weiss nicht

999 PHONE ONLY: (V) Antwort verweigert; WEB/MAIL ONLY: Blank

(IHP 2021 Q1705 Modified – updated to ask about patients' reports of experiences rather than direct experiences)

**BASE: ALL RESPONDENTS**

37. Hat Ihnen ein Patient schon einmal gesagt, dass er aufgrund seiner Rasse oder ethnischen Herkunft ungerecht behandelt wurde oder das Gefühl hatte, dass seine gesundheitlichen Anliegen von einem Gesundheitsdienstleister nicht ernst genommen wurden?

- 1 Ja
- 2 Nein

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

998 PHONE ONLY: (V) Weiss nicht

999 PHONE ONLY: (V) Antwort verweigert; WEB/MAIL ONLY: Blank

## **SECTION I: PRACTICE PROFILE AND DEMOGRAPHIC DATA**

(IHP 2019 Q31, 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. In Vollzeitstellen gerechnet (VZÄ), wie viele Ärzte, einschliesslich Ihnen, sind in Ihrer Praxis tätig?

WEB/MAIL ONLY: (Zum Beispiel, ein Arzt, welcher 5 Tage in der Woche arbeitet und ein weiterer Arzt, welcher 2 Tage in der Woche arbeitet = 1.4 VZÄ; 2 Ärzte, die Vollzeit arbeiten = 2.0 VZÄ)

PHONE ONLY: Par exemple, un médecin travaille 5 jours par semaine et un autre 2 jours par semaine équivalent à 1.4 FTE and 2 médecins à plein temps équivalent à 2.0 FTE.

(PHONE ONLY: PROBE IF WEISS NICHT OR DECLINE)

\_\_\_\_\_ VZÄ Ärzte

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) Weiss nicht

9999 PHONE ONLY: (V) Antwort verweigert; WEB/MAIL ONLY: Blank

*(IHP 2019 Q32, 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. **Wie viele Stunden arbeiten Sie durchschnittlich pro Woche für Ihre Praxis?**

**WEB/MAIL ONLY: (Anmerkung: Geben Sie sämtliche Stunden an, die Sie in verschiedenen Praxen tätig sind, einschliesslich der Stunden, die Sie zu Hause und in Bereitschaft arbeiten.)**

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

(PHONE ONLY: PROBE IF WEISS NICHT OR DECLINE)

\_\_\_\_\_ Stunden

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) Weiss nicht

9999 PHONE ONLY: (V) Antwort verweigert; WEB/MAIL ONLY: Blank

*(IHP 2019 Q33 Modified – updated question-text to include NZ insert)*

**BASE: ALL RESPONDENTS**

[PN: DECIMALS SHOULD NOT BE ALLOWED]

[PN: ALLOW RANGE 0-999]

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

42. **Wie viele Patienten sehen im Durchschnitt während einer typischen Arbeitswoche?**

**WEB/MAIL ONLY: (Anmerkung: Bitte geben Sie sowohl persönliche als auch telemedizinische Termine an..)**

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

[PHONE ONLY: PROBE IF WEISS NICHT OR DECLINE.]

\_\_\_\_\_ Patienten

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) Weiss nicht

9999 PHONE ONLY: (V) Antwort verweigert; WEB/MAIL ONLY: Blank

*(IHP 2019 Q34, 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. Wieviel Zeit können Sie während eines Routinetermins durchschnittlich mit einem Patienten verbringen?

WEB/MAIL ONLY: (Anmerkung: Bitte geben Sie sowohl persönliche als auch telemedizinische Termine an.)

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

[PHONE ONLY: PROBE IF WEISS NICHT OR DECLINE.]

\_\_\_\_\_ Minuten

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) Weiss nicht

9999 PHONE ONLY: (V) Antwort verweigert; 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 Q43]

- SWI-12. Wie viel Prozent Ihrer Zeit verbringen Sie in einer typischen Woche mit dem Folgenden?

WEB ONLY: (Hinweis: Es müssen sich nicht insgesamt 100 % ergeben.)

PHONE ONLY: (SI NECESSAIRE: N'a pas besoin de totaliser 100%)

[PHONE ONLY: PROBE IF WEISS NICHT OR DECLINE.]

Prozentualer Zeitanteil

- |     |   |         |
|-----|---|---------|
| 1   | Persönlicher Kontakt mit Patienten  | _____ % |
| 2   | Anderweitiger Kontakt mit Patienten (z. B. per E-Mail oder Telefon)   | _____ % |
| 3   | Administrative Arbeiten (z. B. Pflege von Patientenakten, Besprechungen, Erstellung von Qualitätsberichten) | _____ % |
| 4   | Aufgaben im Zusammenhang mit Versicherungen und/oder der Einforderung von Zahlungen                         | _____ % |
| 998 | PHONE ONLY: (V) Weiss nicht   |         |
| 999 | PHONE ONLY: (V) Antwort verweigert; WEB ONLY: Blank   |         |

## **SECTION K: DEMOGRAPHICS AND PRACTICE PROFILE**

*(IHP 2019 Q35, 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: NON-SWEDEN/SWITZERLAND RESPONDENTS (Q500=1-7, 10, 11)**

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) Weiss nicht  
 999 PHONE ONLY: (V) Antwort verweigert; 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 Switzerland to base, 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: NON-SWEDEN RESPONDENTS (Q500=1-7, 9, 10, 11)**

45. **Sind Sie:**

- 1 Männlich
  - 2 Weiblich
  - 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: “**Anderes, nämlich: \_\_\_\_\_**”]
  - 4 [FOR US] Prefer not to answer
- 996 MAIL ONLY (AS PART OF BACK-END PROCEDURES ONLY): Multiple-response code  
 998 PHONE ONLY: (V) Weiss nicht  
 999 PHONE ONLY: (V) Antwort verweigert; WEB/MAIL ONLY: Blank

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

*[IHP 2019 Q37 Modified – updated code 5 to be for countries outside the Netherlands, 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. **Wo befindet sich Ihre Praxis?**

[PHONE ONLY: (READ LIST)]

- 1 In einer Stadt bzw. im städtischen Raum
- 2 In einem Vorort oder einer Kleinstadt
- 3 Auf dem Land oder an einem abgelegenen Ort

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

998 PHONE ONLY: (V) Weiss nicht

999 PHONE ONLY: (V) Antwort verweigert; WEB/MAIL ONLY: Blank

**SECTION L: SWITZERLAND-ONLY QUESTIONS**

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

**BASE: SWITZ RESPONDENTS (Q500=9)**

SWI-4. **Wie häufig nehmen Sie an einem Qualitätszirkel / Gruppe zur Qualitätsverbesserung teil?**

- 1 Wöchentlich
- 2 Mehrmals im Monat
- 3 Monatlich
- 4 Mehrmals im Jahr
- 5 Nie

998 PHONE ONLY: (V) Weiss nicht

999 PHONE ONLY: (V) Antwort verweigert; WEB ONLY: Blank

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

**BASE: SWITZ RESPONDENTS (Q500=9)**

SWI-5. **Nehmen Sie neue Patientinnen und Patienten auf?**

- 1 Ja
- 2 Nein

998 PHONE ONLY: (V) Weiss nicht; WEB ONLY: Weiss nicht

999 PHONE ONLY: (V) Antwort verweigert; WEB ONLY: Blank

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

**BASE: SWITZ RESPONDENTS (Q500=9)**

SWI-6. Welches trifft **hauptsächlich** auf Ihre Praxis zu?  
(Bitte eine Antwort auswählen.)

- 1 Einzelpraxis
- 2 Gemeinschaftspraxis
- 3 Medizinische Notfallstelle oder Klinik, die zu einem Spital gehört
- 4 Walk-in-Praxis, wie z.B. der City-Notfall in Bern oder die Permanence am Zürcher Hauptbahnhof
- 7 Anderes (bitte angeben):
- 998 PHONE ONLY: (V) Weiss nicht
- 999 PHONE ONLY: (V) Antwort verweigert; WEB ONLY: Blank

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

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

SWI-7. Haben Sie eine(n) Nachfolger(in) für Ihre Praxis?

- 1 Ja
- 2 Nein
- 998 PHONE ONLY: (V) Weiss nicht; WEB ONLY: Weiss nicht
- 999 PHONE ONLY: (V) Antwort verweigert; WEB ONLY: Blank

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

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

SWI-8. Hören sie mit 65 Jahren auf zu arbeiten?

- 1 Ja
- 2 Nein
- 998 PHONE ONLY: (V) Weiss nicht; WEB ONLY: Weiss nicht
- 999 PHONE ONLY: (V) Antwort verweigert; WEB ONLY: Blank

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

**BASE: SWITZ RESPONDENTS (Q500=9)**

SWI-9. Wie häufig haben Ihre Patienten im allgemeinen Mühe, Informationen zu verstehen, die Sie ihnen geben, wie z.B.: wie von Ihnen verschriebene Medikamente einnehmen, Anweisungen zu Symptomen, auf die geachtet werden muss, oder in welcher Situation eine weitere Behandlung angebracht ist?

- 1 Oft
- 2 Manchmal
- 3 Selten
- 4 Nie
- 998 PHONE ONLY: (V) Weiss nicht; WEB ONLY: Weiss nicht
- 999 PHONE ONLY: (V) Antwort verweigert; 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 “Weiss nicht”)

**BASE: NETHERLANDS AND SWITZERLAND RESPONDENTS (Q500=5.9)**

SWI-10\_NETH-1. Denken Sie bitte an die gesamte medizinische Versorgung Ihrer Patienten – nicht nur durch Sie, sondern durch alle Ärzte und Spezialisten – Was halten Sie vom Umfang der medizinischen Versorgung, die die Patienten erhalten? Würden Sie sagen es ist...?

(PHONE ONLY: READ LIST)

1 Viel zu wenig

2 Zu wenig

3 Etwa richtig

4 Zu viel

5 Viel zu viel

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

998 PHONE ONLY: (V) Weiss nicht; WEB/MAIL ONLY: Weiss nicht

999 PHONE ONLY: (V) Antwort verweigert; 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 items a and b from 2019 US1, and updated item-text for c and d (2019 items a and 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: 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

(IHP 2022 New)

**BASE: ALL RESPONDENTS**

QUAL. Eventuell werden wir mit einigen Umfrageteilnehmern Kontakt aufnehmen, um weitere Informationen einzuholen. Dürfen wir noch einmal auf Sie zurückkommen, um Ihnen einige weitere Fragen zu stellen?

- 1 Ja  
2 Nein

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. Vielen Dank. Bitte geben Sie Ihren Namen, Ihre E-Mail-Adresse und die Telefonnummer an, unter der Sie am besten zu erreichen sind

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

Nachname: \_\_\_\_\_  
99 (DO NOT READ) REFUSED/WEB BLANK

E-Mail-Adresse: \_\_\_\_\_  
99 (DO NOT READ) REFUSED/WEB BLANK

Telefon: \_\_\_\_\_  
99 (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. Wir sind fast am Ende des Fragebogens. Möchten Sie eine Zusammenfassung der Resultate dieser Befragung per Email erhalten?

1 Ja

2 Nein

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 (Q500=2, 3, 9, 11 AND Q3000=1)**

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

Q3001. Email-Adresse: \_\_\_\_\_

*(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. Bitte prüfen Sie noch einmal, ob Ihre E-Mail-Adresse korrekt angegeben ist.

[PN: DISPLAY ENTERED TEXT FROM Q3001.]

1 Ja

2 Nein [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**

Sie sind am Ende des Fragebogens angelangt. Vielen Dank, dass Sie sich Zeit dafür genommen haben!