**Survey**

PLACE YOUR COMMUNITY LOGO HERE

Please answer the following questions as honestly as possible. Place an X or a checkmark in the appropriate box.

**1. Gender:**

* Male
* Female

**2. Age:**

* + 18 – 30
  + 31 – 40
  + 41 – 50
  + 51 – 60
  + 61 and over

## Your General Knowledge of Palliative Care

**3. Have you heard of the term Palliative Care?**

* Yes
* No

For the purposes of this survey, the term “palliative care” is defined as the following:

Palliative Care: **A term used to describe a variety of services that are brought together to relieve the suffering and improve the quality of life for persons living with or dying from a terminal illness. These services are also available for family members of the individuals.**

**4. Who do you think that palliative care services are intended for? (please choose one answer)**

* Everyone at the end of their life regardless of their illness
* Only patients dying of a life threatening disease like cancer or AIDS
* I don’t know

**5. Where do you think that palliative care is offered? (please check all that apply)**

* Long-term facility or nursing home
* Hospital
* Patient’s home
* Hotel
* In the Community
* Other

**6. What services do you think palliative care includes? (please check all that apply)**

* Medical services such as pain management
* Psychological support such as dealing with depression and anxiety
* Home-making such as help with household tasks, cooking, cleaning, etc.
* Spiritual care such as dealing with beliefs/religious practices/traditional customs
* Personal care such as hairdressing/shaving
* Respite
* Other

## Your Personal Opinions

**7. If you needed information about services for someone who is dying, who would you go to for information? (please check all that apply)**

* Family Doctor
* Community Health Centre
* Health Nurse
* Hospital
* Pharmacist
* Internet
* Tribal Authority Health Clinic
* Community Health Representative
* Friend/Family Member
* Social Worker/Counsellor
* Priest/Minister/Pastor
* Traditional Healer/Elder
* Other

**8. Have you or a family member ever provided care for someone who was dying? (*if No, please go to question #9*)**

* Yes
* No
* I don’t know

1. **Where was this care provided at? (please check all that apply)**
   * Long term care facility or nursing home
   * Hospital
   * Home
   * Other

**b) Did you use health or community care services to take care of the person who was dying?**

* + Yes
  + No
  + I don’t know

If yes, please name the services that you used

**c) How satisfied were you with the services that you and your loved one received? (please circle one answer)**

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| Very Satisfied | Satisfied | Dissatisfied | Very Dissatisfied | Don’t Know |

**9. How many hours a week do you think it would take to care for a dying loved one in your home – this would include tasks such as food preparation, housekeeping, shopping and attending appointments?**

hours a week

**10. Do you think you could devote this much time to caring for a dying loved one, given your current schedule?**

* Yes
* No

If no, please indicate why not?

**11. Do you feel that talking about death and dying is acceptable in your community?**

* Yes
* No
* I don’t know

If no, please indicate why not?

**12. In your opinion, how important is it to discuss your end-of-life care with a family member? (please circle one answer)**

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| Very Important | Important | Not very important | Not at all important | Don’t Know |

**13. Have you ever discussed your end-of-life care with a family member?**

* Yes
* No

**14. In your opinion, how important is it to discuss your end-of-life care with a doctor? (please circle one answer)**

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| Very Important | Important | Not very important | Not at all important | Don’t Know |

**15. Have you ever discussed your end-of-life care with a doctor?**

* Yes 🞏 No

**16. In your opinion, if services were available and adequate, would more community members choose to die at home?**

🞏Yes

* No
* I don’t know

**17. Which comes closer to the way you feel: (please choose one answer)**

* People should start planning for end-of-life care when they are healthy
* People should start planning for end-of-life care when they have a serious illness
* You can’t plan for end-of-life care; planning happens when you need it

**18. What would be some of the advantages of choosing to die in your community?**

**19. In your opinion, what additional services or programs are needed to improve the experience and care of people who are dying in your community?**

**20. What kinds of education or training do community members need to support people who choose to die at home in your community?**

**21. If you needed to get services in the home for someone who is dying, where would you go or who would you talk to?**

**Any Additional Comments:**

***Thank you for your time and participation!!!***