



## Perth County Paramedic Mobile Integrated Health Team Allied Agency Satisfaction Survey

Thank you for taking the time to provide your feedback on our Mobile Integrated Health Team. Your feedback and comments will help guide and improve the services that Perth County Paramedic Services offer to the community we serve. If you have any additional comments or concerns, please contact Debbie Hunter, Mobile Integrated Health Team Manager at 519-271-0531 ext 522 or [dhunter@perthcounty.ca](mailto:dhunter@perthcounty.ca)

Please identify which allied agency you represent: \_\_\_\_\_

**Please respond to the following statements using this scale:**

- 1. Strongly Disagree    2. Disagree    3. Neutral    4. Agree    5. Strongly Agree    6. N/A**

The Mobile Integrated Health Team provided valuable assistance to my client.	
The Mobile Integrated Health Team was compassionate and sensitive to the health and well-being of the client I referred.	
The Mobile Integrated Health Team decreased the burden of stress my client and their family were feeling.	
The Mobile Integrated Health Team has improved the overall well-being of the client I care for.	
The Mobile Integrated Health Team delivered high quality care and service.	
The Mobile Integrated Health Team kept me in informed about the health and care of my client.	
The Mobile Integrated Health Team had a positive impact on the mental health of the client.	
The Mobile Integrated Health Team helped my client stay safely in their home longer.	
The Mobile Integrated Health Team was able to help avoid a potential ER visit.	
The Mobile Integrated Health Team met the goals and expectations I had.	
If needed, I would use the Mobile Integrated Health Team again.	
The Mobile Integrated Health Team will save health care costs.	
The Mobile Integrated Health Team was valuable to the agency I represent during the COVID-19 Pandemic.	
Mobile Integrated Health Team has a valuable place in our Community.	

**On a scale of 1 to 10, with 1 being the lowest and 10 being the highest, how would you answer the following questions?**

Based on your complete experience with our Mobile Integrated Health Team, how likely are you to refer our program to a colleague?	
I feel satisfied with the support and care provided by the Mobile Integrated Health Team?	
I trust the Mobile Integrated Health Team's evaluation of my client's medical condition?	
I felt comfortable with the Mobile Integrated Health Team that I worked with.	
How would you rate the professionalism of the Mobile Integrated Health Team?	
I believe this is a valuable program.	

**Do you have any suggestions for how the Mobile Integrated Health Team could improve?**

**What do you think are the main benefits of the Mobile Integrated Health Team?**

**Is there anything else you would like us to know?**

It has been our privilege and pleasure to work with you and your organization through our Mobile Integrated Health Team. Thank you for taking the time to complete this survey. All of your feedback will be carefully considered as we continue to develop this pilot.