

# Your Voice Matters

What we heard from Saskatoon West\*

Continuity and communication was a concern for some people. Many patients noted that they would prefer seeing the same continuing care aids (CCAs) as it would allow a stronger relationship between the patient and the provider.

24% of respondents said that they felt that the doctor or medical staff they saw judged them unfairly or treated them with disrespect because of their:

- Race
- National or Ethnic Origin
- Colour
- Religion
- Age
- Sex
- Sexual orientation
- Gender identity or expression
- Marital status

## Communicate Effectively

"Communication re care plan and changes in prescription ... hospitals don't always speak to me as the designated advocate and care provider."



## Time Spent



"Clinic doctor did not do a thorough examination [...] didn't take enough time."

## Listen to Patient



"For the most part, I am happy. Except [some doctors] don't seem to listen. The nurses and other staff treat me very well (drug problem)."

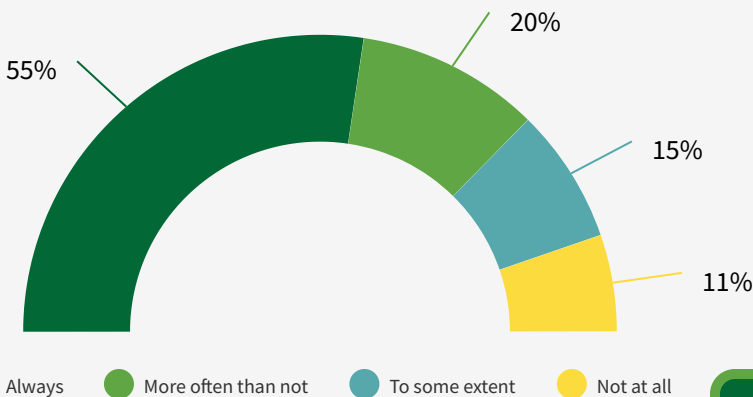
## Provider Continuity

Provider continuity was also important to some patients especially when a close bond was formed.

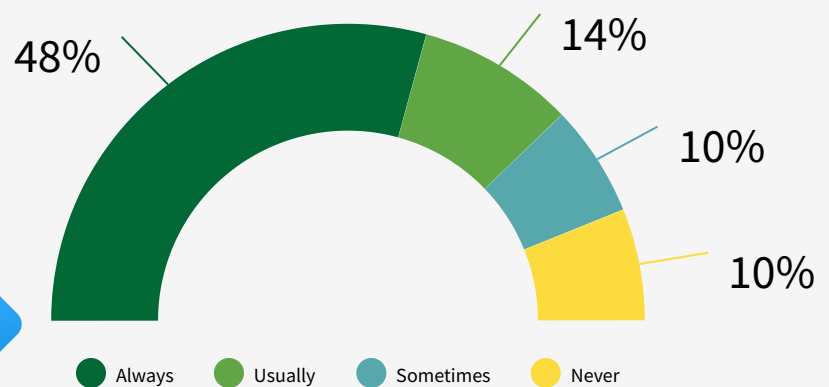


"The [continuing care aid] who retired was more like a friend. [Now I see] someone different every day. Hard on some people having so many [...] Never know who is coming."

Did you discuss what matters to you about your health?



I felt comfortable sharing my cultural beliefs and ways of being with my health-care provider.



## Interpersonal Processes of Care

\*The majority of the responses came from home care clients who were contacted for a phone interview.



## What are we doing to help?

🌱 Hiring more staff to support continuity of care

🌱 We are enhancing interdisciplinary team based care to support better care and communication across teams

🌱 Providing access to a medical team for people discharged from hospital who do not have a family doctor