

**Inpatient Rehabilitation
Facility
Experience of Care Survey**

Telephone Script

Q1

When (you/the patient) (were_was) admitted to the rehabilitation (hospital/unit), did the staff fully explain to (you or your/the patient or the) family or friend involved with (your/the patient's) care **what (YOUR_THE PATIENT'S) stay would be like?**

- Yes, definitely..... 01
 - Yes, somewhat 02
 - No..... 03
 - DON'T KNOW-1
 - REFUSED.....-2
-
-

Q2

During this rehabilitation stay, did the staff work with (you or your/the patient or the) family or friend involved with (your/the patient's) care to **set (your_the patient's) goals?**

- Yes, definitely..... 01
 - Yes, somewhat 02
 - No..... 03
 - DON'T KNOW-1
 - REFUSED.....-2
-
-

Q3

Nursing aides or assistants and patient care technicians are not nurses but other staff who may help patients in various ways. For example, they may help patients get to and from bed or the bathroom, or help with eating and dressing. During this rehabilitation stay, did (you/the patient) receive care from **nursing aides or assistants or patient care technicians?**

- Yes..... 01
 - No..... 02 GO TO Q6
 - DON'T KNOW-1 GO TO Q6
 - REFUSED.....-2 GO TO Q6
-
-

Q4

During this rehabilitation stay, how often did the **nursing aides or assistants and patient care technicians** treat (you/the patient) and (your/the) family or friend involved with (your/the patient's) care with courtesy and respect?

- Never..... 01
 - Sometimes 02
 - Usually..... 03
 - Always 04
 - DON'T KNOW-1
 - REFUSED.....-2
-
-

Q5

During this rehabilitation stay, how often did the **nursing aides or assistants and patient care technicians** explain things in a way (you or your/the patient or the) family or friend involved with (your/the patient's) care could understand?

- Never..... 01
 - Sometimes 02
 - Usually..... 03
 - Always 04
 - DON'T KNOW-1
 - REFUSED.....-2
-
-

Q6

During this rehabilitation stay, did (you/the patient) receive care from **nurses**?

- Yes 01
 - No..... 02 GO TO Q9
 - DON'T KNOW-1 GO TO Q9
 - REFUSED.....-2 GO TO Q9
-
-

Q7

During this rehabilitation stay, how often did the **nurses** treat (you/the patient) and (your/the) family or friend involved with (your/the patient's) care with courtesy and respect?

- Never..... 01
- Sometimes 02
- Usually..... 03
- Always 04
- DON'T KNOW-1
- REFUSED.....-2

Q8

During this rehabilitation stay, how often did the **nurses** explain things in a way (you or your/the patient or the) family or friend involved with (your/the patient's) care could understand?

- Never..... 01
- Sometimes 02
- Usually..... 03
- Always 04
- DON'T KNOW-1
- REFUSED.....-2

Q9

During this rehabilitation stay, did (you/the patient) receive care from **doctors**?

- Yes..... 01
- No..... 02 GO TO Q12
- DON'T KNOW-1 GO TO Q12
- REFUSED.....-2 GO TO Q12

Q10

During this rehabilitation stay, how often did the **doctors** treat (you/the patient) and (your/the) family or friend involved with (your/the patient's) care with courtesy and respect?

- Never..... 01
- Sometimes 02
- Usually..... 03
- Always 04
- DON'T KNOW-1
- REFUSED.....-2

Q11

During this rehabilitation stay, how often did the **doctors** explain things in a way (you/the patient) or (your/the) family or friend involved with (your/the patient's) care could understand?

- Never.....01
- Sometimes02
- Usually.....03
- Always04
- DON'T KNOW-1
- REFUSED.....-2

Q12

During this rehabilitation stay, did (you/the patient) receive **physical therapy**?

- Yes.....01
- No.....02 GO TO Q15
- DON'T KNOW-1 GO TO Q15
- REFUSED.....-2 GO TO Q15

Q13

During this rehabilitation stay, how often did the **physical therapy staff** treat (you/the patient) and (your/the) family or friend involved with (your/the patient's) care with courtesy and respect?

- Never.....01
- Sometimes02
- Usually.....03
- Always04
- DON'T KNOW-1
- REFUSED.....-2

Q14

During this rehabilitation stay, how often did the **physical therapy staff** explain things in a way (you/the patient) or (your/the) family or friend involved with (your/the patient's) care could understand?

- Never.....01
 - Sometimes02
 - Usually.....03
 - Always04
 - DON'T KNOW-1
 - REFUSED.....-2
-
-

Q15

During this rehabilitation stay, did (you/the patient) receive **occupational therapy**?

- Yes.....01
 - No.....02 GO TO Q18
 - DON'T KNOW-1 GO TO Q18
 - REFUSED.....-2 GO TO Q18
-
-

Q16

During this rehabilitation stay, how often did the **occupational therapy staff** treat (you/the patient) and (your/the) family or friend involved with (your/the patient's) care with courtesy and respect?

- Never.....01
 - Sometimes02
 - Usually.....03
 - Always04
 - DON'T KNOW-1
 - REFUSED.....-2
-
-

Q17

During this rehabilitation stay, how often did the **occupational therapy staff** explain things in a way (you/the patient) or (your/the) family or friend involved with (your/the patient's) care could understand?

- Never.....01
 - Sometimes02
 - Usually.....03
 - Always04
 - DON'T KNOW-1
 - REFUSED.....-2
-
-

Q18

During this rehabilitation stay, did (you/the patient) receive **speech therapy**?

- Yes.....01
 - No.....02 GO TO Q21
 - DON'T KNOW-1 GO TO Q21
 - REFUSED.....-2 GO TO Q21
-
-

Q19

During this rehabilitation stay, how often did the **speech therapy staff** treat (you/the patient) and (your/the) family or friend involved with (your/the patient's) care with courtesy and respect?

- Never.....01
- Sometimes02
- Usually.....03
- Always04
- DON'T KNOW-1
- REFUSED.....-2

Q20

During this rehabilitation stay, how often did the **speech therapy staff** explain things in a way (you/the patient) or (your/the) family or friend involved with (your/the patient's) care could understand?

- Never.....01
- Sometimes02
- Usually.....03
- Always04
- DON'T KNOW-1
- REFUSED.....-2

Q21

Case managers and social workers are staff who may help with specific issues such as discharge planning, follow-up care, and insurance coverage. During this rehabilitation stay, did (you/the patient) or (your/the) family or friend involved with (your/the patient's) care interact with case managers and social workers?

- Yes01
- No.....02 GO TO Q24
- DON'T KNOW-1 GO TO Q24
- REFUSED.....-2 GO TO Q24

Q22

During this rehabilitation stay, how often did the **case managers and social workers** treat (you/the patient) and (your/the) family or friend involved with (your/the patient's) care with courtesy and respect?

- Never.....01
- Sometimes02
- Usually.....03
- Always04
- DON'T KNOW-1
- REFUSED.....-2

Q23

During this rehabilitation stay, how often did the **case managers and social workers** explain things in a way (you/the patient) or (your/the) family or friend involved with (your/the patient's) care could understand?

- Never.....01
- Sometimes02
- Usually.....03
- Always04
- DON'T KNOW-1
- REFUSED.....-2

Q24

When answering the next few questions, think about all staff at the rehabilitation (hospital/unit) who were involved in (your/the patient's) care - including but not limited to doctors, physician assistants, nurses, therapists, technicians, aides, case managers, social workers, and discharge planners.

During this rehabilitation stay did (you or your/the patient or the) family or friend involved with (your/the patient's) care **receive the same information** from the different staff about (your/the patient's) care?

- Yes, definitely.....01
 - Yes, somewhat02
 - No.....03
 - DON'T KNOW-1
 - REFUSED.....-2
-
-

Q25

During this rehabilitation stay, did staff **discuss (your/the patient's) progress** with (you or your/the patient or the) family or friend involved with (your/the patient's) care?

- Yes, definitely..... 01
 - Yes, somewhat 02
 - No..... 03
 - DON'T KNOW-1
 - REFUSED.....-2
-
-

Q26

During this rehabilitation stay, how often (WERE_WAS) (you or your/the patient or the) family or friend involved with (your/the patient's) care able to **discuss needs and concerns** with the staff?

- Never..... 01
 - Sometimes 02
 - Usually..... 03
 - Always 04
 - DON'T KNOW-1
 - REFUSED.....-2
-
-

Q27

During this rehabilitation stay, how often did the staff give **encouragement and support** to (you or your/the patient or the) family or friend involved with (your/the patient's) care?

- Never..... 01
 - Sometimes 02
 - Usually..... 03
 - Always 04
 - DON'T KNOW-1
 - REFUSED.....-2
-
-

Q28

During this rehabilitation stay, after the call button was pressed how often did (you/the patient) **get help** as soon as (your/he/she) wanted it?

- Never..... 01
- Sometimes 02
- Usually..... 03
- Always 04
- Never pressed the call button..... 05
- DON'T KNOW -1
- REFUSED..... -2

Q29

When answering the next few questions, please tell me how much you agree or disagree with the statement.

During this rehabilitation stay, (your/the patient's) room and bathroom were kept clean.

- Strongly Agree..... 01
- Agree 02
- Disagree 03
- Strongly Disagree 04
- DON'T KNOW -1
- REFUSED..... -2

Q30

During this rehabilitation stay, the staff were considerate of (your/the patient's) need for sleep.

- Strongly Agree..... 01
 - Agree 02
 - Disagree 03
 - Strongly Disagree 04
 - DON'T KNOW -1
 - REFUSED..... -2
-
-

Q31

During this rehabilitation stay, the staff were considerate of (your/the patient's) personal privacy - such as when showering, dressing, or using the toilet.

- Strongly Agree..... 01
- Agree 02
- Disagree 03
- Strongly Disagree 04
- DON'T KNOW -1
- REFUSED..... -2

Q32

During this rehabilitation stay, the staff regularly paid attention to (your/the patient's) personal hygiene needs - such as brushing (your/the patient's) teeth, using the bathroom, or bathing or showering.

- Strongly Agree..... 01
- Agree 02
- Disagree 03
- Strongly Disagree 04
- DON'T KNOW -1
- REFUSED..... -2

Q33

During this rehabilitation stay, the rehabilitation (hospital/unit) had therapy equipment to support (your/the patient's) rehabilitation goals.

- Strongly Agree..... 01
- Agree 02
- Disagree 03
- Strongly Disagree 04
- Patient did not need any equipment 05
- DON'T KNOW -1
- REFUSED..... -2

Q34

During this rehabilitation stay, did (you/the patient) have physical pain?

- Yes 01
 - No 02 GO TO Q37
 - DON'T KNOW -1 GO TO Q37
 - REFUSED..... -2 GO TO Q37
-

Q35

When answering the next few questions, please tell me how much you agree or disagree with the statement.

During this rehabilitation stay, the staff (were_was) responsive when they were told about (your/the patient's) physical pain.

- Strongly Agree..... 01
- Agree 02
- Disagree 03
- Strongly Disagree 04
- DON'T KNOW -1
- REFUSED -2

Q36

During this rehabilitation stay, the staff gave options about different ways to manage (your/the patient's) physical pain.

- Strongly Agree..... 01
- Agree 02
- Disagree 03
- Strongly Disagree 04
- DON'T KNOW -1
- REFUSED -2

Q37

Towards the end of this rehabilitation stay, did the staff spend enough time talking with (you or your/the patient or the) family or friend involved with (your/the patient's) care about what to expect and what would be needed after (your/the patient's) stay ended?

- Yes, definitely..... 01
 - Yes, somewhat 02
 - No 03
 - Not Applicable..... 04
 - DON'T KNOW -1
 - REFUSED -2
-
-

Q38

Towards the end of this rehabilitation stay, did the staff give (you or your/the patient or the) family or friend involved with (your/the patient's) care information about the medication to be taken after discharge, including what the medication was for, how to take it, and possible side effects?

- Yes, definitely..... 01
- Yes, somewhat 02
- No..... 03
- Not Applicable..... 04
- DON'T KNOW-1
- REFUSED.....-2

Q39

Towards the end of this rehabilitation stay, did the staff inform (you/the patient) or (your/the) family or friend involved with (your/the patient's) care that they could contact the rehabilitation (hospital/unit) with any questions or concerns after (you/the patient) left?

- Yes, definitely..... 01
- Yes, somewhat 02
- No..... 03
- Not Applicable..... 04
- DON'T KNOW-1
- REFUSED.....-2

INT_LANG

CHOOSE THE LANGUAGE THAT WAS PREDOMINANTLY USED TO CONDUCT THIS INTERVIEW

- ENGLISH 01
 - SPANISH 02
-
-

Q40

For the following questions, please rate (FACILITY). Do not include any other hospital stays in your answers. Using any number from 0 to 10, where 0 is the worst rehabilitation (hospital/unit) possible and 10 is the best rehabilitation (hospital/unit) possible, what number would you use to rate this rehabilitation (hospital/unit)?

0 Worst possible	00
1	01
2	02
3	03
4	04
5	05
6	06
7	07
8	08
9	09
10 Best possible	10
DON'T KNOW	-1
REFUSED.....	-2

Q41

Would you recommend this rehabilitation (hospital/unit) to a family member or friend?

Definitely no.....	01
Probably no	02
Probably yes.....	03
Definitely yes.....	04
DON'T KNOW	-1
REFUSED.....	-2

Q42

Please answer the following questions about (you/the patient).

In general, how would you rate (your/the patient's) current overall health?

- Excellent.....01
- Very good.....02
- Good.....03
- Fair.....04
- Poor.....05
- DON'T KNOW.....-1
- REFUSED.....-2

Q43

In general, how would you rate (your/the patient's) overall current mental or emotional health?

- Excellent.....01
- Very good.....02
- Good.....03
- Fair.....04
- Poor.....05
- DON'T KNOW.....-1
- REFUSED.....-2

Q44

What sex (were/was) (you/the patient) assigned at birth, on (your/their) original birth certificate?

- Male.....01
 - Female.....02
 - DON'T KNOW.....-1
 - REFUSED.....-2
-
-

Q45

How (do/does/did) (you/the patient) describe (yourself/themselves)?

Male	01
Female.....	02
Transgender	03
DOES NOT IDENTIFY AS FEMALE, MALE, OR TRANSGENDER.....	04
DON'T KNOW	-1
REFUSED.....	-2

Q46

Which of the following best describes how (you/the patient) (think/thinks) of (yourself/themselves)?

Lesbian or Gay.....	01
Straight, that is, not lesbian or gay	02
Bisexual or.....	03
Something else.....	04
I DON'T KNOW THE ANSWER.....	05
DON'T KNOW	-1
REFUSED.....	-2

Q47

What (is/was) (your/the patient's) marital status?

Married	01
Widowed.....	02
Divorced or separated	03
Never Married or	04
Living with a partner	05
DON'T KNOW	-1
REFUSED.....	-2

Q48

What (is/was) the highest grade or level of school (you/the patient) (have/has) completed?

- 8th grade or less..... 01
- Some high school, but did not graduate..... 02
- High school graduate or GED 03
- Some college or 2-year degree 04
- 4-year college graduate 05
- More than 4-year college degree 06
- DON'T KNOW -1
- REFUSED..... -2

Q49

(Are/Is) (you/the patient) of Hispanic, Latino, or Spanish origin or descent?

- No, not Hispanic, Latino, or Spanish 01
- Yes, Puerto Rican 02
- Yes, Mexican, Mexican American, Chicano..... 03
- Yes, Cuban..... 04
- Yes, other Spanish, Hispanic or Latino..... 05
- DON'T KNOW -1
- REFUSED..... -2

Q50

What (is/was) (your/the patient's) race? Choose all that apply.

- White..... 01
- Black or African American..... 02
- American Indian or Alaska Native..... 03
- Asian..... 04
- Native Hawaiian or other Pacific Islander..... 05
- DON'T KNOW -1
- REFUSED..... -2

Q51

What language (do/does/did) (you/the patient) **mainly** speak at home?

- English 01
 - Spanish 02
 - Other language (Please specify): 03
 - DON'T KNOW -1
 - REFUSED..... -2
-
-

Q52

QUESTION FOR INTERVIEWER, DO NOT READ

WHO COMPLETED THIS SURVEY?

- THE PATIENT01 GO TO Q58
- THE PATIENT WITH HELP02 GO TO Q53
- SOMEONE OTHER THAN THE PATIENT03 GO TO Q53
- DON'T KNOW-1
- REFUSED.....-2

Q53

Please answer the following questions about yourself. How did you help the patient with this questionnaire? Choose all that apply.

- No one helped the patient complete this survey01 GO TO Q58
- Answered the survey for the patient.....02
- ANSWERED THE QUESTIONS FOR THE PATIENT BECAUSE THE PATIENT IS DECEASED...03
- Asked the questions of the patient.....04
- WROTE DOWN THE PATIENT'S ANSWERS05
- TRANSLATED THE QUESTIONS INTO THE PATIENT'S LANGUAGE06
- Helped in some other way (Please explain):.....07
- DON'T KNOW-1
- REFUSED.....-2

Q54

What is (your/this person's) relationship to (the patient/you)?

- Spouse or Partner01 GO TO Q55
 - Son or Daughter02 GO TO Q55
 - Sibling.....03 GO TO Q55
 - Parent.....04 GO TO Q55
 - Other family member05 GO TO Q55
 - Friend or.....06 GO TO Q55
 - Someone else.....07
 - DON'T KNOW-1
 - REFUSED.....-2
-
-

Q55

While the patient was in the rehabilitation (hospital/unit), how often did you take part in or oversee care for (you/him or her)?

Never..... 01
Sometimes 02
Usually..... 03
Always 04
DON'T KNOW-1
REFUSED.....-2

Q56

What is your age?

18 TO 24 YEARS 01
25 TO 34 YEARS 02
35 TO 44 YEARS 03
45 TO 54 YEARS 04
55 TO 64 YEARS 05
65 TO 74 YEARS 06
75 TO 79 YEARS 07
80 TO 84 YEARS 08
85 YEARS OR OLDER..... 09
DON'T KNOW-1
REFUSED.....-2

Q57

Are you male or female?

MALE 01
FEMALE 02

Q58

Do you have comments about your experience you would like us to provide to (FACILITY)?

IF NEEDED: The answer you provide for this question will go directly to the facility. This includes any identifying information you provide, including names.

Comments..... 01 GO TO/INT99

THANKYOU

Those are all the questions we have for you. Thank you for completing the survey.

CONTINUE TO CLOSE CASE 1
