

HOME CARE SATISFACTION MEASURE: HOME HEALTH AIDE SERVICE (HCSM-HHA13)

	<u>Yes, Definitely</u>	<u>Yes, I Think So</u>	<u>Maybe Yes, Maybe No</u>	<u>No, I Don't Think So</u>	<u>No, Definitely Not</u>
1. My home health aide does extra things for me.	1	2	3	4	5
2. My home health aide is rude to me.	1	2	3	4	5
3. My home health aide has become a friend.	1	2	3	4	5
4. I wish my home health aide could do more things that I need to have done.	1	2	3	4	5
5. Generally, my home health aide knows what to do.	1	2	3	4	5
6. My home health aide ignores what I tell her about how I like things done.	1	2	3	4	5
7. My home health aide is very thorough.	1	2	3	4	5
8. My home health aide arrives late.	1	2	3	4	5
9. My home health aide is assigned enough time to do all the jobs I need to have done. .	1	2	3	4	5
10. My home health aide leaves too early.	1	2	3	4	5
11. In general, my home health aide takes an interest in me as a person.	1	2	3	4	5
12. I need to see my home health aide more times each week than she comes now.	1	2	3	4	5
13. My home health aide does things the way I want them to be done.	1	2	3	4	5

© Trustees of Boston University 2001 • All Rights Reserved

Scott Miyake Geron, Ph.D. • Boston University School of Social Work • 264 Bay State Road • Boston, MA 02215 • (617) 353-3748

Office Use Only:

Client ID: _____

Date: _____