

**HOME CARE SATISFACTION MEASURE: HOME DELIVERED MEAL SERVICE (HCSM-MS11)**

	<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. I am happy with the number of meals I receive each week. ....	1	2	3	4	5
2. My meals often arrive late .....	1	2	3	4	5
3. Overall, I like the time of day my meals arrive .....	1	2	3	4	5
4. Sometimes the meals fail to be delivered at all. ....	1	2	3	4	5
5. Generally, the service has the kind of meals I like. ....	1	2	3	4	5
6. I need more meals than I get. ....	1	2	3	4	5
7. Most of the meals are great. ....	1	2	3	4	5
8. My meals come too early in the day. ....	1	2	3	4	5
9. My meals are cooked the way I want them cooked. ....	1	2	3	4	5
10. The home delivered meal service has a poor selection of meals. ....	1	2	3	4	5
11. Often the food is so bad I don't eat it. ....	1	2	3	4	5

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