

The Columbia Children’s Complex Care Program will be using the data from the following survey in order to evaluate the effectiveness of the program. This will help us make improvements to the program in order to ensure we are providing the best care coordination possible. We really appreciate your input. Thank you for your time.

**Self-Efficacy**

Q1. Please circle the number on a scale of 1-4, 1 being not true at all and 4 being exactly true, that most represents how you feel about the following statements.

	Not at all true	Barely true	Moderately true	Exactly true
I can always solve any issues that arise relating to my child’s care if I try hard enough.	1	2	3	4
If someone opposes me, I can find means and ways to get what I want for my child.	1	2	3	4
It is easy for me to stick to my aims and accomplish my goals relating to my child’s care.	1	2	3	4
I am confident that I could deal efficiently with unexpected events that come up relating to my child’s care.	1	2	3	4
Thanks to my resourcefulness, I know how to handle unforeseen situations relating to my child’s care.	1	2	3	4
I can solve most problems relating to my child’s care if I invest the necessary effort.	1	2	3	4
I can remain calm when facing difficulties with my child’s care because I can rely on my coping abilities.	1	2	3	4
When I am confronted with a problem relating to my child’s care, I can usually find several solutions.	1	2	3	4
If I am in a bind relating to my child’s care, I can usually think of something to do.	1	2	3	4

No matter what comes my way, in regards to my child's health care needs, I'm usually able to handle it.	1	2	3	4
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**ii Quality of Life**

Q2. In general, when taking into account your child's usual functioning and capabilities, would you say your child's health is...

- Poor, .....1
- Fair, .....2
- Good, .....3
- Or very good? .....4
- Don't Know .....8

Q3. Compared to 12 months ago, how would you rate your child's health?

- Much worse now, .....1
- Somewhat worse now, .....2
- About the same, .....3
- Somewhat better now, .....4
- Or much better now? .....5
- Don't Know .....8

Q4. During the past 4 weeks, to what extent has your child's physical problems interfered with their usual activities. Did they interfere...

- Not at all, .....1
- A little bit, .....2
- Somewhat, .....3
- Quite a bit, .....4
- Or a lot? .....5
- Don't Know .....8

Q5. During the past 4 weeks, to what extent has your child's emotional state interfered with their usual activities. Did they interfere...

- Not at all, .....1
- A little bit, .....2
- Somewhat, .....3
- Quite a bit, .....4
- Or a lot? .....5
- Don't Know .....8

Q6. During the past 4 weeks, to what extent has your child's physical or emotional problems interfered with YOUR usual activities. Did they interfere...

- Not at all, .....1
- A little bit, .....2
- Somewhat,.....3
- Quite a bit,.....4
- Or a lot? .....5
- Don't Know .....8

**Parent Satisfaction**

Q7.Circle the answer that best represents how you feel about the following statement. In the last 12 months, the explanations my child's primary care physician gave me about my child's health were difficult to understand. Do you...

- Strongly agree, .....1
- Somewhat agree,.....2
- Somewhat disagree, .....3
- Or strongly disagree? .....4
- Don't Know .....8

Q8. Circle the answer that best represents how you feel about the following statement. In the last 12 months, my child's providers used medical words I did not understand when explaining my child's health problems? Do you.. (2)

- Strongly agree, .....1
- Somewhat agree,.....2
- Somewhat disagree, .....3
- Or strongly disagree, .....4
- Don't Know .....8

Q9. In the last 12 months, how frequently did you feel ignored by any of your child's providers? (2)

- Never, .....1
- Rarely,.....2
- Sometimes,.....3
- Usually, .....4
- Always, .....5
- Don't Know .....8

Q10. Circle the answer that most represents how you feel about the following statement. In the last 12 months, my child's providers showed interest in my questions and concerns regarding my child. (2)

- Strongly agree, .....1
- Somewhat agree,.....2
- Somewhat disagree, .....3
- Strongly disagree, .....4
- Don't Know .....8

Q11. In the last 12 months, how frequently was someone involved with treating your child able to answer all your questions to your satisfaction? (2)

- Never, .....1
- Rarely,.....2
- Sometimes, .....3
- Usually, .....4
- Always, .....5
- Don't Know .....8

Q12. Circle the answer that best represents how you feel about the following statement. In the last 12 months, my child's Primary Care Physician seemed informed and up-to-date about my child's health. (3)

- Strongly agree, .....1
- Somewhat agree,.....2
- Somewhat disagree, .....3
- Strongly disagree, .....4
- Don't Know .....8

Q13. In the last 12 months, how satisfied did you feel with the amount of information that your child's specialists knew about their medical history? Did you feel.. (2)

- Not at all satisfied, .....1
- Somewhat satisfied, .....2
- Somewhat dissatisfied,.....3
- Or very dissatisfied? .....4
- Don't know .....8

Q14. In the last 12 months, how often have you felt like complaining about any aspect of your child's care? (4)

- Never, .....1
- Rarely,.....2

Sometimes, .....3  
Always? .....4  
Don't Know .....8

Q15. Overall, how satisfied are you with the care you have received in the past 12 months? (4)

Not at all satisfied, .....1  
Somewhat satisfied, .....2  
Somewhat dissatisfied, .....3  
Very dissatisfied? .....4  
Don't know .....8

**Was Care Better Coordinated**

Q16. Approximately how many different physicians has your child visited in the last 12 months? (1)

1-2 physicians, .....1  
3-4 physicians, .....2  
5-6 physicians, .....3  
Or more than 6 physicians? .....4  
Don't Know .....8

Q.17 Approximately how many different providers prescribed medication to your child in the last 12 months? (1)

1-2 providers, .....1  
3-4 providers, .....2  
5-6 providers, .....3  
Or more than 6 providers .....4  
Don't Know .....8

Q.18 In the past 12 months, approximately how many times did your child visit the Emergency Room?

1-3 times, .....1  
4-6 times, .....2  
7-10 times, .....3  
Or more than 10 times? .....4  
Don't Know .....8

Q.19 In the last 12 months, how easy was it to coordinate appointments with specialists? Was it... (2)

Very Easy, .....1  
Somewhat Easy, .....2  
Somewhat Difficult, .....3  
Or very difficult? .....4  
Don't Know .....8

Q.20 In the past 12 months, how difficult was it to get transport to medical services for your child? Was it.. (4)

Very Easy, .....1  
Somewhat Easy, .....2  
Somewhat Difficult, .....3  
Or very difficult? .....4  
Don't Know .....8

Q.21 In the past 12 months, how frequently did providers seem to be unnecessarily repeating tests or assessments?

Never, .....1  
Rarely, .....2  
Sometimes, .....3  
Often .....4  
Don't Know .....8

Q.22 In your opinion, in the past 12 months, how would you rate the coordination of your child's care? (4)

Poor, .....1  
Fair, .....2  
Good, .....3  
Or Excellent. ....4  
Don't Know .....8

Q. 23 Circle the answer that best represents how you feel about the following statement. I often get conflicting advice from the different providers who treat my child. (4) Do you..

Strongly agree, .....1  
Somewhat agree, .....2  
Somewhat disagree, .....3  
Or strongly disagree? .....4  
Don't Know .....8

Demographics

Q.24 What is your child's age?

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Q.25 With what gender does your child identify?

Male.....1

Female .....2

Other .....3

If other please specify \_\_\_\_\_

Q.26 What is your child's race? Please mark one or more.

White .....1

Black or African-American .....2

Hispanic or Latino .....3

Asian .....4

Native Hawaiian or other Pacific

Islander .....5

American Indian or Alaska Native .....6

Other .....7

If other please specify \_\_\_\_\_

Q.27 What is your age?

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Q.28 With what gender do you identify?

Male.....1

Female .....2

Other .....3

If other please specify \_\_\_\_\_

Q.29 What is the highest grade or level of school that you have completed?

8<sup>th</sup> grade or less .....1

Some High School but did not graduate.....2

High School Graduate or GED.....3

Some College or 2-year Degree .....4

4-year College Degree .....5  
Masters Degree or more .....6

Q.30 How are you related to your child?

Parent .....1  
Grandparent .....2  
Aunt/Uncle .....3  
Sibling .....4  
Other relative .....5  
Legal Guardian.....6

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<sup>i</sup> Schwarzer, R., & Jerusalem, M. (1995). Generalized Self-Efficacy scale. In J. Weinman, S. Wright, & M. Johnston, Measures in health psychology: A user's portfolio. Causal and control beliefs (pp. 35- 37). Windsor, England: NFER-NELSON.



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<sup>ii</sup> Hays, RD (1994). *The Medical Outcomes Study (MOS) Measures of Patient Adherence*. Retrieved April 19, 2004, from the RAND Corporation web site:  
<http://www.rand.org/health/surveys/MOS.adherence.measures.pdf>