

Comparison of Current and Proposed Home Health Care CAHPS Survey Measures¹

Measure	Item(s) in Current Measure	Item(s) in Proposed Revised or New Measure
Care of Patients	<ul style="list-style-type: none"> In the last 2 months of care, how often did home health providers from this agency seem informed and up-to-date about all the care or treatment you got at home? (Q9) 	<ul style="list-style-type: none"> In the last 2 months of care, how often did home health staff from this agency seem to be aware of all the care or treatment you were getting at home? (Q6)
	<ul style="list-style-type: none"> In the last 2 months of care, how often did home health providers from this agency treat you as gently as possible? (Q16) 	<ul style="list-style-type: none"> In the last 2 months of care, how often did home health staff from this agency treat you with care – for example, when moving you around or changing a bandage? (Q7)
	<ul style="list-style-type: none"> In the last 2 months of care, how often did home health providers from this agency treat you with courtesy and respect? (Q19) 	<ul style="list-style-type: none"> In the last 2 months of care, how often did home health staff from this agency treat you with courtesy and respect? (Q10)
	<ul style="list-style-type: none"> N/A 	<ul style="list-style-type: none"> In the last 2 months of care, how often did you feel that home health staff from the agency cared about you as a person? (Q11)
	<ul style="list-style-type: none"> N/A 	<ul style="list-style-type: none"> In the last 2 months of care, how often have the services you received from this agency helped you take care of your health? (Q13)
	<ul style="list-style-type: none"> In the last 2 months of care, did you have any problems with the care you got through this agency? (Q24) 	<ul style="list-style-type: none"> N/A (removed from revised survey)
Communications between Providers and Patients	<ul style="list-style-type: none"> When you first started getting home health care from this agency, did someone from the agency tell you what care and services you would get? (Q2) 	<ul style="list-style-type: none"> N/A (removed from revised survey)
	<ul style="list-style-type: none"> In the last 2 months of care, how often did home health providers from this agency keep you informed about when they would arrive at your home? (Q15) 	<ul style="list-style-type: none"> In the last 2 months of care, how often did home health staff from this agency keep you informed about when they would arrive at your home? (Q5)
	<ul style="list-style-type: none"> In the last 2 months of care, how often did home health providers from this agency explain things in a way that was easy to understand? (Q17) 	<ul style="list-style-type: none"> In the last 2 months of care, how often did home health staff from this agency explain things in a way that was easy to understand? (Q8)
	<ul style="list-style-type: none"> In the last 2 months of care, how often did home health providers from this agency listen carefully to you? (Q18) 	<ul style="list-style-type: none"> In the last 2 months of care, how often did home health staff from this agency listen carefully to you? (Q9)
	<ul style="list-style-type: none"> N/A 	<ul style="list-style-type: none"> In the last 2 months of care, did home health staff from this agency provide your family or friends with information

¹ For some survey items, there are slight tweaks to the item wording in the revised survey based on testing.

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		<p>or instructions about your care as much as you wanted? (Q12)</p>
	<ul style="list-style-type: none"> In the last 2 months of care, when you contacted this agency's office did you get the help or advice you needed? (Q22) 	<ul style="list-style-type: none"> When you contacted this agency's office, did you get the help or advice you needed? (Q16)
	<ul style="list-style-type: none"> When you contacted this agency's office, how long did it take for you to get the help or advice you needed? (Q23) 	<ul style="list-style-type: none"> N/A (removed from revised survey)
Specific care issues	<ul style="list-style-type: none"> When you first started getting home health care from this agency, did someone from the agency talk with you about how to set up your home so you can move around safely? (Q3) 	<ul style="list-style-type: none"> When you first started getting home health care from this agency, did someone from the agency talk about ways to help make your home safer? For example, they may have suggested adding grab bars in the shower or removing tripping hazards. (Q2) Removed composite; Recommend reporting as standalone item
	<ul style="list-style-type: none"> When you started getting home health care from this agency, did someone from the agency talk with you about all the prescription and over-the-counter medicines you were taking? (Q4) 	<ul style="list-style-type: none"> Has someone from the agency ever reviewed the prescribed and over-the-counter medicines you were taking? For example, they might have asked you to show them your medicines and talked with you about how and when to take each one. (Q3) Removing composite; Recommend reporting as standalone item
	<ul style="list-style-type: none"> When you started getting home health care from this agency, did someone from the agency ask to see all the prescription and over-the-counter medicines you were taking? (Q5) 	<ul style="list-style-type: none"> N/A (removed from revised survey)
	<ul style="list-style-type: none"> In the last 2 months of care, did home health providers from this agency talk with you about the side effects of these medicines? (Q14) 	<ul style="list-style-type: none"> In the last 2 months of care, did home health staff from this agency talk with you about any side effects of your medicines? (Q4) Removing composite; Recommend reporting as standalone item
	<ul style="list-style-type: none"> In the last 2 months of care, did you and a home health provider from this agency talk about pain? (Q10) 	<ul style="list-style-type: none"> N/A (removed from revised survey)
	<ul style="list-style-type: none"> In the last 2 months of care, did home health providers from this agency talk with you about the purpose for taking your new or changed prescription medicines? (Q12) 	<ul style="list-style-type: none"> N/A (removed from revised survey)

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	<ul style="list-style-type: none"> In the last 2 months of care, did home health providers from this agency talk with you about when to take these medicines? (Q13) 	<ul style="list-style-type: none"> N/A (removed from revised survey)
Overall rating	<ul style="list-style-type: none"> We want to know your rating of your care from this agency's home health providers. Using any number from 0 to 10, where 0 is the worst home health care possible and 10 is the best home health care possible, what number would you use to rate your care from this agency's home health providers? (Q20) 	<ul style="list-style-type: none"> We want to know your rating of your care from this agency's home health staff. Using any number from 0 to 10, where 0 is the worst home health care possible and 10 is the best home health care possible, what number would you use to rate your care from this agency's home health staff? (Q14)
Willingness to recommend	<ul style="list-style-type: none"> Would you recommend this agency to your family or friends if they needed home health care? (Q25) 	<ul style="list-style-type: none"> Would you recommend this agency to your family or friends if they needed home health care? (Q17)