

1.21b Data Collection Tool(s)

CoreQ: Long-Stay Family questionnaire

1. In recommending this facility to your friends and family, how would you rate it overall?
☐ Poor ☐ Average ☐ Good ☐ Very Good ☐ Excellent
2. Overall, how would you rate the staff?
☐ Poor ☐ Average ☐ Good ☐ Very Good ☐ Excellent
3. How would you rate the care your family member received?
☐ Poor ☐ Average ☐ Good ☐ Very Good ☐ Excellent

The instruments vary since they are administered by a CoreQ vendor.

FAMILY EXPERIENCE SURVEY
Please answer the questions in the survey about your stay at <Center Name>.
Mark the square next to your response. If a question does not apply to you, please leave it blank and go on to the next question.

The three questions below are part of a national initiative to ensure the quality of skilled nursing facilities.					
	Poor	Average	Good	Very Good	Excellent
In recommending this facility to your friends and family, how would you rate it overall?	☐	☐	☐	☐	☐
Overall, how would you rate the staff?	☐	☐	☐	☐	☐
How would you rate the care your family member receives?	☐	☐	☐	☐	☐