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Implementation of the 2006 Ohio nursing  
home family satisfaction survey: Final  
report

Jane Straker  
strakejk@muohio.edu

Farida Ejaz



**Implementation of the 2006  
Ohio Nursing Home Family  
Satisfaction Survey**

**Final Report**

Submitted to  
The Ohio Department of Aging  
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Jane K. Straker, M.G.S., Ph.D.<sup>1</sup>  
Farida K. Ejaz, Ph.D., L.I.S.W.<sup>2</sup>

<sup>1</sup>Scripps Gerontology Center

<sup>2</sup>Margaret Blenkner Research Institute of Benjamin Rose

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## **Background and Instrument Refinement**

In 2000 the Ohio State Legislature passed House Bill 403 that called for the development of a Web-based Ohio Long-Term Care Consumer Guide (OLTCCG). The OLTCCG includes data on resident and family satisfaction with Ohio's nursing homes. Although funding was discontinued in 2003, a new bill and appropriation were passed in 2006. This bill requires the collection of family and resident nursing home satisfaction data in alternating years, beginning with the family survey in 2006. This report presents information about the third annual implementation of the Ohio Nursing Home Family Satisfaction Survey (ONHFSS). The survey implementation was conducted by the Scripps Gerontology Center (Scripps) at Miami University, Ohio with sub-contracts to the Margaret Blenkner Research Institute (MBRI) at Benjamin Rose Institute and Pearson Education (formerly NCS Pearson).

The process of implementing the mailed survey to family members of nursing home residents throughout Ohio began on April 1, 2006. After administering the family survey twice in Ohio and once in Rhode Island, the family survey items, while changed from the last Ohio version, remained essentially the same as the revised version used in Rhode Island.

A new scannable form was produced in 2006 because a different scanning system was used than in previous years (See Appendix A). For ease of distribution, a revised letter introducing the survey from ODA Director Kearns was incorporated into the survey booklet. A new front cover with survey instructions was also added.

Extensive psychometric work was done with both the resident and family surveys prior to the use of the Ohio surveys by Rhode Island under a grant from the Commonwealth

Fund. This work is described elsewhere (Ejaz, Straker, Fox & Swami, 2003; Ejaz, Straker & Fox, 2005; Straker, Ejaz, McCarthy & Jones, in press). Table 1 summarizes the changes made to the survey instrument since its last administration in Ohio in 2002.

**Table 1: 2006 Refinements to 2002 Family Survey Questions**

2002 Survey	2006 Survey
Q. 2 Did the staff give you clear information about the <i>daily rate</i> ?	Q.2 Did the staff give you clear information about the <i>cost of care</i> ?
Q. 3 Did the staff provide you with adequate information about any <i>additional charges</i> ?	Deleted
Q. 8 Does the social worker treat the resident with respect?	Deleted
Q. 11 Are the <i>facility's</i> activities things the resident likes to do?	Q.9 Are the <i>facility</i> activities things the resident likes to do?
Q. 20 Are the telephone calls processed in an efficient manner?	Q.48 Added to Overall Domain
Q. 21 Is the receptionist helpful and polite?	Deleted
Q. 22 Does the <i>resident</i> look well-groomed and cared for?	Q. 49 Do the <i>residents</i> look well-groomed and cared for?
Q. 30 Do the Registered Nurses and License Practical Nurses (RNs and LPNs) follow up and respond quickly to your concerns?	Deleted
Q. 32 Does the <i>physical and/or occupational therapist</i> spend enough time with the resident?	Q. 27 Does the <i>physical therapist</i> spend enough time with the resident? Q 28 Does the <i>occupational therapist</i> spend enough time with the resident?
Q. 36 Does the administration treat the resident with respect?	Deleted
Q. 45 Are there enough comfortable places for residents to sit outdoors?	Q 39. Can the resident get outdoors when he/she wants to, either with help or on their own?
Q. 54 Are there times when you are upset by the staff?	Deleted
Q. 55 Does the staff know the resident's likes and dislikes?	Deleted
Q. 59 Overall, are you satisfied with the quality of care the resident gets in the facility?	Q. 54. Overall, do you like this facility?

## Survey Process and Refinement

A number of modifications were made to the survey instruction packet, the letters to administrators and families from Director Kearns, and the reminder postcard. (Copies of all survey materials are included in the Appendix).

Facility instructions for sampling residents and mailing surveys to families were essentially the same as reported in 2002 (Straker, Ehrichs, Ejaz, & Fox, 2002) with the exceptions outlined in Table 2.

**Table 2: 2006 Family Survey Changes**

<b>Change in Process/Instructions 2006</b>	<b>Justification for Change</b>
Administrator letter changed.	Updated information about the website.
FAQs in instruction packet updated.	Additional information about the website.
Printed facility name and address on surveys.	Clarity regarding the facility it came from.
Used window return envelopes for return address.	Reduce burden for facilities addressing surveys
Family letter changed.	Updated information about the website, and suggested adding comments on a separate sheet and returning with survey instrument.
Reminder postcards sent to facilities to return audit forms.	Increase audit form return rate for more accurate margin-of-error reporting.
Reminder phone calls made to facilities without audit forms that had not met margin of error.	Increase number of facilities meeting margin of error.
Instructions on survey modified, separate instruction sheet and letter omitted.	Reduce cost and improve administration with all materials included in survey booklet.

The number of survey packets to be distributed to each facility was based on the following assumptions: 1) 40% of families will respond (based on 2002 response), and 2) Occupancy had increased no more than 5% since the 2003 Annual Survey of Long-Term Care Facilities. We ensured that enough surveys were provided by assuming that 100% of

the estimated number of residents had involved family or friends. Census numbers from the 2003 Annual Survey were used as the largest source for the number of residents in a facility. When data were not available from the Annual Survey, the number of licensed beds was used and a 90% occupancy rate was assumed. This process provided very good census estimates; only 34 facilities requested additional surveys. The process is challenging since printing more surveys than are needed is costly, but estimates need to be accurate in order to reduce the burden on facilities that do not have enough surveys in their initial shipment.

### **Facility Identification**

A mailing list was developed from information downloaded from the Ohio Department of Health website, supplemented with information from the Ombudsman Data Information System. Extensive efforts were made to ensure that every facility was located, and that facilities that were closed were excluded from the survey. Despite extensive checking, five facilities were omitted from the mailing list. They were found when the list of Federal ASPEN Identifiers (IDs) used by ODH was provided and matched to the mailing list. Since the ASPEN ID file is used to match survey results for download to the website, future surveys should begin with the ASPEN file as the authoritative source of facilities.

At Pearson Education each survey was printed with a serial number, a provider identification number used by the state, and the facility name and address. Window return address envelopes showed the facility name and address on each survey allowing Pearson staff to ensure that the survey packets prepared for a particular facility were accurately mailed to that facility. After mailing, Pearson provided Scripps and MBRI with an Excel file

indicating the survey serial numbers that were assigned to each facility and the tracking numbers for the survey kits shipped to the facility. The final list included 970 facilities.

Each of these homes was required to participate in the survey process; however no penalties were assessed if they failed to comply. Non-participating facilities are identified in the OLTCCG with the statement “Refused to Participate”.

### **Implementation**

Each nursing home received a survey kit that included the following:

- Survey packets to be addressed, stamped and mailed to family members
- Instructions for conducting the family survey
- One Family Satisfaction Survey for facility reference
- Reminder postcards for families
- Pink facility audit forms for reporting facility census and number of surveys mailed
- One pink Business Reply Envelope for returning facility audit forms

Survey materials were mailed to nursing homes between June 15 and July 5 2006. Most facilities mailed their surveys promptly. Of the 687 facilities reporting mailing dates, 591 mailed surveys in July and 86 mailed in August. Ten facilities mailed the surveys in June with the remainder being mailed in September or later.

Families were invited to provide comments on a separate sheet of paper and to return them with their surveys and a number of families did so. Once returned, the survey packets were opened, survey pages with family comments were photocopied, marked with the provider ID and survey serial number and given to a graduate assistant for entry and coding. Relevant portions from each set of comments were entered into an Excel spreadsheet with a numeric code corresponding to the topics mentioned in the comment. Survey booklets were disassembled and prepared for scanning. Batches of surveys were

scanned and filed according to scanning date. At completion of scanning an electronic image file was created which captures the scanned “picture” of each survey. These files were provided to ODA for record retention purposes. Scanned paper surveys were sent to Miami’s secure shredder in January 2007 for disposal.

### **Survey Assistance**

In order to assist family members and facilities with questions or issues during the 2006 ONHFSS process, a toll-free phone line was set up by the Margaret Blenkner Research Institute of Benjamin Rose in Cleveland, Ohio. The phone line was staffed during regular business hours and had voice mail capability so callers could leave a message 24 hours a day, seven days a week. The phone line operated from June through December 2006. There were 630 calls logged during this time, about half of them in August. All calls, including hang ups, were logged and tracked until issues were resolved. All but a few calls with complicated issues or incomplete contact information were resolved within one business day of receipt.

Family members made 400 calls and 166 were from facilities or others. Staff were unable to resolve 19 calls due to insufficient contact information and 45 calls were hang ups. Table 3 compares the differences between total calls received during 2001, 2002, and 2006. Despite having the largest number of returned surveys ever, the number of family calls was less than half of the volume received in the initial survey year. This suggests that as processes and instructions have been refined there are fewer problems and confusing issues for families. In contrast, the number of facility calls has increased each year as the number of participating facilities increased. Some facilities participated this year for the first

time and lacked experience with the process. Over time, as more facilities participate, these calls are likely to decline as well.

**Table 3. Calls Made to the Toll-Free Help Line  
2001-2006**

	<b>2001</b>	<b>2002</b>	<b>2006</b>
<b>Total</b>	1172	685	566
<b>Families</b>	1070	550	400
<b>Facilities</b>	102	135	166

Note: Table does not include hang-ups and calls with no contact information.

#### Calls From Facilities

Calls from facilities largely revolved around process issues – shipments misplaced, not receiving enough surveys, requesting additional supporting materials, and assistance with selecting respondents, etc. Some calls were related to general information or comments, questions about when results would be available, and updates on facility changes. See Table 4 for a breakdown of the types of calls received from facilities.

**Table 4. Topics Raised in Calls from Facilities**

<b>Number of calls</b>	<b>Subject</b>
34	Facilities reporting "lost" shipments of survey kits
31	Request for additional surveys to complete sampling
29	Request audit form / any other survey materials
29	Process issues (selection criteria, how to do mailing, participation requirements, certification vs. licensed facility, short-term rehabilitation facilities)
26	General information and comments (Was it too late to send surveys to families?, facilities found the surveys that were "lost", How were results going to be reported?)
6	Whether researchers had received completed audit form
5	Facility closed or changed
5	Timeline for results availability / web site
5	Ohio Long-Term Care Annual Survey (not NHFSS)
170	Total number of topics covered *

\* A single call could span more than one topic; each topic was coded independently, so the total number of topics is greater than the number of phone calls received.

The largest number of facility calls revolved around lost shipments to facilities. This issue was quite complex and required various strategies to resolve. In a few cases facilities suggested that parcels could have been misdirected to agencies or facilities with similar names or addresses. However, no survey kits were returned to the sender so it is uncertain what happened to those parcels.

With the exception of those few instances, the primary problem for most callers appeared to be survey shipment timing. Our analysis reveals that in most cases 'lost'

shipments coincided with the Independence Day holiday. When we provided parcel tracking information (delivery date, time, and the signature on the receipt) to callers reporting 'lost' shipments, facility staff often indicated that they had been on vacation at that time and/or the person who received the package was a substitute. In addition to the holiday timing, not having an administrator name in the address on the survey package results in confusion among mail room staff regarding who to direct the survey package to. This sometimes led to the survey box being stranded in the mailroom among the dozens of deliveries nursing homes receive each day. Fortunately, the vast majority of the survey kits reported 'lost' were eventually found, albeit occasionally only after extensive searching. This resulted to some substantial delays to the survey process in a few facilities.

Thirty-four facilities also requested additional survey materials. As previously mentioned, occupancy rates from 2003 were used to estimate occupancy. In many cases, the facilities had also increased their number of licensed beds and needed more surveys than estimated.

Facilities sometimes requested replacement audit forms. As audit forms were scheduled to be filed about a month after the surveys were distributed to families, many audit forms were misplaced or forgotten until reminders triggered requests for replacements.

Most of the survey process issues were resolved when survey kit instructions were found and read by facility staff. Some questions were not specifically addressed in the instructions or the frequently asked questions section, however, and were clarified by phone staff. For instance, some callers knew that the Pay for Performance system being implemented in Ohio was going to include resident and family satisfaction survey results

and wanted more information. Others wanted to know whether facilities with special populations or reimbursement designations (e.g., an order of nuns with only one power of attorney contact; facilities that had licensed nursing home beds that were or were not Medicare / Medicaid certified) were required to participate in the survey process. Another concern voiced by some facilities was the issue of the timing the survey coinciding with changes in facility ownership and management. Administrators were concerned about how past or current poor scores that resulted from such changes were likely to affect their facilities.

Short-term rehabilitation facilities (such as those affiliated with hospitals) in particular had a number of issues that made participating in the survey a challenge. For example, some facilities had a more cognitively intact and independent resident population and did not have family information for mailing surveys.

Another issue dealt with the fact that some organizations have different types of residential care beds/units besides nursing home beds. Research staff were piloting a survey for residents in Residential Care Facilities in Ohio, and the Ohio Annual Survey of Long-term Care Facilities had recently been completed. Calls about each of these other surveys were received on the ONHFSS help line. Although the Annual Survey should have been completed several months prior to the Family Survey, many facilities received notification that they had not returned their Annual Survey, prompting them to call the ONHFSS helpline rather than the phone number for the Annual Survey.

## Calls from Families

The breakdown of the nature of the calls made by families is reported in Table 5. Over half of the 400 calls from family members were requests for new surveys, usually in response to

**Table 5. Topics Raised in Calls from Families**

<b>Number of calls</b>	<b>Subject</b>
229	Needed a replacement survey
44	Sent survey in but received a reminder postcard
29	Needed assistance with completing the survey or questions about how to complete the instrument
26	Refused to participate
20	Confidentiality concerns
20	Process issues (selection criteria of most involved family, random selection)
17	Would be completing survey soon
11	Needed Ombudsman or abuse reporting phone number
8	General comments or questions
5	Inappropriate receipt of survey (patient, non family)
409	Total number of call topics *

\*A single call could cover more than one topic. Each topic was coded independently so the number of topics is greater than the number of phone calls received.

receiving a reminder postcard. It is our assumption that some families misplaced the original survey form and the reminder postcard prompted them to request a new form. Other families claimed that they had never received an original survey form but did receive the reminder postcard. As the nursing homes mailed both the survey forms and the reminder postcards, it is unclear why one item might be received while another was not.

Some family calls were in response to the reminder postcards when a survey had already been returned. Despite the instruction to disregard the reminder if their survey had been returned, these families were inquiring whether their survey could be tracked to ensure its receipt.

Twenty-six callers specifically reported that they were refusing to participate for a variety of reasons. Some indicated that they did not know the facility or the staff well enough to feel comfortable answering the questions, or felt uneasy at having to use so many “DK/NA” responses, or felt that management at the facility had changed so recently that they didn’t know how to rate them. Others indicated a lack of time or interest in completing the survey. Some were critical of the questions, topics, or answer categories. A few callers requested that “they be taken off the list.” A smaller number of family members called to let phone staff know that the surveys were being completed and would be returned soon.

Of the family members with concerns about confidentiality, two distinct groups emerged. One group thought that the receipt of a reminder postcard meant that they were being monitored and were upset by this. Simply being told that everyone who received a survey had also received a reminder postcard because it was impossible to know who had received and/or returned a survey seemed to reassure most of these callers. Others were concerned that nursing homes might get specific, individual data and be able to figure out who had reported it due to unique characteristics (e.g., only male in a small nursing home, only resident over age 100). Assurances that individual responses would not be given to the nursing homes and a description of the confidentiality safeguards reassured most of these callers.

Some callers asked questions about the survey process, needed assistance in responding to specific questions, or asked how to add comments. Related to the confidentiality concerns mentioned above, some family members were slightly suspicious that they had been targeted specifically, or wondered why they had been chosen; an explanation of the selection process usually helped set these callers at ease. Because individual situations are unique, some callers needed assistance with understanding how to answer questions in their own cases (e.g., how to respond to food items for a tube-fed resident; who might be included in “other staff”, how to handle domains that they were not familiar with). Several also decided to add comments to clarify their responses.

On occasion, a person would call to request a survey though they were not a valid respondent. Since family members were randomly selected at most facilities (facilities with fewer than 54 residents included all family members), sometimes a person who had not been randomly selected would call to ask for a survey. In other instances, a family member would call to request a survey for a different facility since their resident had moved recently or because they had involvement with multiple residents, sometimes in different facilities.

Some families who had relatives in a rehabilitation facility were confused as to why they were selected when their relative either a) had been an in-patient in a rehabilitation facility and they did not perceive this as a nursing home or b) had been an outpatient user of a rehabilitation facility and had not resided in a nursing home. These calls reinforce the earlier conclusions that short term rehabilitation facilities had difficulties complying with survey protocols.

## Facility Participation

Prior to mailing the family survey packages to nursing homes, ODA sent a mailing to every nursing home in Ohio, informing them about the upcoming family survey. Despite the advance notice, a large number of facilities either elected not to participate or were unaware that they had received the survey materials and did not participate. As shown in Table 6, although the majority of facilities in Ohio participated in the OHNFSS, a significant number did not.

As part of the reporting strategy for calculating response rates, facilities were expected to complete an audit form after they had completed the survey process. This form requires facilities to report the number of beds in their facility, the number of residents on the day sampling was done for the survey, the number of residents with no family or involved friend/person, and the number of surveys mailed to families. This information provides the basis for determining whether enough surveys were returned for a facility to meet a  $\pm 10\%$  margin of error. This number represents the probability that the actual responses, if all families were surveyed, would fall between plus or minus 10% of the number actually reported. When facilities fail to report either the number of surveys mailed or the number of residents with involved family or friends (the study population in each facility), we are unable to accurately determine whether they meet the  $\pm 10\%$  margin of error. A reminder postcard was sent to all facilities that had not returned their audit forms by mid-December. The postcard provided a mailing address, a Scripps fax number, and a phone number for requesting a new audit form if it could not be located.

For those who did not report or incorrectly reported the number of residents with involved persons, we assumed the total number of residents from their audit form rather

than the number of residents with families, as the population for calculating the margin of error. When no audit form was returned at all, we assumed that the number of surveys we supplied (as described previously) was the appropriate number of residents for the study population. This reduces the number of facilities that are likely to meet the margin of error since other surveys have found an 85% occupancy rate statewide (Applebaum, Mehdizadeh, & Straker, 2005). Rather than computing item-by-item whether the item met the margin of error, this year we based the margin of error on the number of surveys returned in a facility since not all residents receive all services. Because “don’t know” cannot be considered a valid response for determining satisfaction, it seemed more appropriate to consider the total number of surveys returned and whether, as a group, they were reflective of the population of family members for a given facility.

**Table 6: Facility Participation Rates: 2001, 2002, 2006**

	2001	2002	2006
Number of Facilities on Final Revised Mailing List	992	970	972
Number of Facilities with Surveys Returned	687(69%)	736 (77%)	849 (87%)
Number of Facilities with Audit Forms Returned	439 (64% of participants)	565 (76% of participants)	697 (80 % of participants)
Number of Facilities meeting +/- 10%	490 (71% of participants)	436 (59% of participants)	605 (71% of participants)
Average response rate in all participating facilities	45%	44%	50%
Average response rate in facilities that returned audit forms	52%	48%	53%
Average response rate in facilities without audit forms <sup>a</sup>	33%	33%	41%
Number of facilities not participating	304 (31%)	222 (23%)	123 (13%)
Total Number of Families Responding	20,226	16,955	23,633

<sup>a</sup> For these facilities, response rates were based on the number of surveys we supplied rather than the number of residents with families (the actual population).

With an increase in overall response rates, the proportion of facilities meeting the margin of error this year increased to its original 71%. It appears that a number of facilities barely missed meeting the margin of error. Ninety-four of the 244 facilities not meeting the margin of error needed only 3 or fewer additional surveys to meet this criterion. Thirty-seven of the 244 needed only 1 more. Because we assumed occupancy had increased 5% over their 2003 census, and we used the number of beds rather than the actual census when facilities did not return audit forms, we have probably declared that a number of facilities did not meet the margin of error when, in reality, they did. The 12% difference in response rates between facilities with and without audit forms suggests that the simplest way for facilities to improve their response rates is to report the number of surveys they actually mailed since we assume 90% occupancy and many of them have lower occupancy

rates. We also assume that 100% of those residents have involved family or friends, when they may not. Almost half (44.3%) of the facilities without audit forms did not meet the margin of error compared to about one-quarter (25.2%) of the facilities that returned audit forms. On average, facilities with audit forms received 6 (5.75) more surveys than were needed; facilities without audit forms received only .2 surveys more than were needed. Returning the audit form is critical to a facility's efforts to meet the margin of error in order to accurately determine if they have enough returned surveys.

### **Family Satisfaction Survey Technical Processes**

The survey was created using a software package, Snap, developed by the Mercator Corporation of Great Britain. The finished survey was sent to Pearson Education for printing and mailing. Because the surveys were printed in booklet form, it was necessary to remove the staples from the spine and to cut the 17 X 11 inch sheets in half to end up with the 8.5 X 11 inch sheets required by the scanner.

In order to maximize scanning accuracy and minimize manual data input, all questions were multiple-choice with check boxes (the most accurate format for scanning purposes). The only numeric fields on the survey were the Facility ID and the survey serial number. The scanner and associated software were located at Scripps and allowed Scripps staff to implement and fully monitor the scanning process.

#### **Survey Processing: Testing Scanner Accuracy and Consistency**

##### Procedure

To test scanner accuracy and consistency, 50 surveys were each scanned twice. The scanned results were compared against the actual surveys to check for accuracy of scanning hardware and software. To test for consistency, the scanned data was analyzed

using statistical software to ensure that the 2 separate scans of the same survey produced the same results.

### Results of Testing

The data analysis revealed that nine question responses were read inconsistently by the scanner (different results for the two scans of the same survey). After consultation with the software vendor's technical support, a calibration process was run on the scanning software. After calibration, the surveys were scanned again (twice each) resulting in three inconsistent responses read for an accuracy rate of 99.6% (three errors divided by the total number of surveys scanned (70 questions X 100 surveys)), which is well within the industry standard. The three inconsistent responses were lightly marked or corrections incorrectly made. This type of misread, while small, can be expected with improperly marked surveys.

### **Survey Processing: The Production Run**

Scanning of surveys began in July of 2006 and continued through December.

Scripps employed office staff to process surveys prior to scanning as follows:

1. Remove staples from survey booklets.
2. Cut survey booklets along the spine.
3. Place cut surveys in boxes and deliver to research lab where scanner is located.

Surveys were scanned primarily by student employees, who were trained in the scanning procedure by the research associate who created the survey in the Snap software. Due to the design of the survey (using only multiple-choice questions) and the favorable results of the accuracy testing, the only data verification required was for the Facility ID and survey serial number fields.

On a weekly basis, a Scripps research associate selected a small sample of scanned surveys to check for accuracy of scanned results. No problems were detected. The scanned results were exported to statistical analysis software and then all electronic files associated with the scanning process were backed up to the network server on a daily basis. The scanned surveys were boxed, labeled with the scan date, and placed in storage. At the peak of survey processing, over 600 surveys were scanned per day.

### **Survey Data Management**

Upon completion of scanning, survey data was exported to a spreadsheet application, where the data was cleaned and arranged in a form suitable for statistical analysis. The data was then sent to the statistical support service of Miami's Mathematics and Statistics Department, where two statisticians were contracted as consultants to perform the final analysis for Scripps. Upon completion of analysis, the final results were sent to the Ohio Department of Aging to be placed on their website.

### **Data Coding**

Satisfaction question items were scored as follows:

- 1=Yes, always
- 2=Yes, sometimes,
- 3=No, hardly ever
- 4=No, never
- 5=DK/Doesn't apply

Items 37 and 38 are negatively worded items. These reverse ordered items include:

- Do the resident's clothes get lost in the laundry?
- Do the resident's clothes get damaged in the laundry?

All items except for 37 and 38 were recoded to a 0 -100 point scale as follows:

1=100

2=67

3=33

4=0

5=Missing

The laundry items were reverse coded with 1 being 0, and 4 being 100.

### **Margin of Error**

Another table provides information regarding the margin of error. A list of sample sizes needed in facilities with differing numbers of residents with involved family/friend/person was generated in order to determine whether a facility met the +-10% margin of error. A program that compared the number of surveys needed was used to determine which facilities met the margin of error. Facilities that did not have enough returned surveys to meet the margin of error were excluded from calculation of statewide average scores and counts of facilities having the highest and lowest statewide scores. However, their ratings will be posted on the website, noting that their results do not meet the margin of error.

### Statewide Averages

Statewide averages were computed on each item and on each domain. Facilities with two or fewer surveys were excluded from these calculations. Detailed calculation decisions were made for each data item included on the website and in the facility reports. These are included in Appendix B.

## **Satisfaction Results**

### **Respondent and Resident Characteristics**

In order to build a profile of those who responded to the family satisfaction surveys, and the residents they were responding about, the following demographic questions were included: information about the family member/respondent, respondent's relationship to the resident, some information about the resident, and the kinds of things the family

member/ friend does when visiting the nursing home. Demographic information is provided in Tables 7-9.

In general, the characteristics of the residents and family members are in keeping with the literature and our previous survey results. The majority of involved family members in the survey are adult children. They are also very involved in the nursing home, visiting quite often, talking to a variety of staff members, and providing some types of personal assistance to their family members. In short, the respondents are likely to be a group that is very informed and able to make judgments about the care their family member receives. Comments received with blank surveys that were returned to Scripps indicated that in some cases family members did not feel qualified to evaluate the facility. This was usually because they did not visit often, or their family member had been a resident for such a brief period that they felt unable to make a fair judgment about the care. As shown, the majority of residents for whom family members reported are long-stay rather than short-stay residents.

**Table 7: Demographic Characteristics of 2006 Respondents and their Residents**

	Family	Resident
<b>Average Age (sd)</b>		
(6.0% missing-family)	61.5	81.0
(4.8% missing-resident)	(12.3)	(13.6)
<b>Race (Percent)</b>		
Caucasian	90.9	
African American	7.0	
Hispanic	.4	
Other	1.7	
(3.0% missing)		
<b>Female (Percent)<sup>a</sup></b>		
(missing-family)	67.0	72.6
(1.5% missing-resident)		
(2.6% missing-family)		
<b>Education Level (Percent)</b>		
Less than HS	4.9	
HS Graduate	57.1	
College Graduate	26.1	
Master's or greater	11.9	
3.2% (missing)		
<b>Relationship to Resident (Percent)</b>		
Child	48.0	
Spouse	12.3	
Sibling	8.6	
Guardian	6.9	
Son/daughter-in-law	6.2	
Niece/Nephew	5.6	
Parent	4.9	
Other	3.7	
Friend	2.0	
Grandchild	1.6	
4.8% (missing)		

N =23,633 NOTE: Percentages are based on those who answered the questions.

<sup>a</sup> High volume of missing data makes this variable unreliable.

**Table 8: Level of Family Activities in the Nursing Home 2006**

<b>Frequency of Visits (Percent)</b>			
Daily	20.0		
Several times a Week	37.8		
Once a Week	21.4		
Two or Three Times per Month	10.4		
Once a Month	5.4		
Few times per Year (3.6% missing)	5.1		
	<b>Always</b>	<b>Sometimes</b>	<b>Never</b>
<b>Helps with (Percent)</b>			
Feeding (17.0% missing)	12.5	36.9	50.6
Dressing (21.9% missing)	13.7	31.1	65.2
Toileting (22.3% missing)	5.1	22.3	72.6
Grooming (13.9% missing)	15.2	47.1	37.7
Going to Activities (14.3% missing)	11.1	53.6	35.4
<b>Talks to (Percent)</b>			
Nurse aides (5.2% missing)	59.7	39.2	1.2
Nurses (4.7% missing)	59.5	39.6	.8
Social Workers (9.6% missing)	27.8	62.7	9.5
Physician (13.5% missing)	11.3	45.7	42.9
Administrator (9.9% missing)	18.9	66.2	14.9
Other (56.7% missing)	22.2	57.5	20.3

N = 23,633 NOTE: Percentages are based on those who answered the questions.

**Table 9: Residents in Nursing Homes, 2006**

<b>Resident Receives Nursing Home Payments from:</b>			
<b>(Percent<sup>a</sup>)</b>			
Medicare	42.9		
Medicaid	65.5		
Private Pay	26.1		
LTC Insurance	3.8		
Other Insurance	9.8		
Don't Know (3.8% missing)	2.0		
<b>Average Number of Payment Sources</b>	1.5		
(sd)	(0.7)		
<b>Resident's Expected Length of Stay</b>			
<b>(Percent<sup>a</sup>)</b>			
less than 30 days	1.8		
31 – 90	4.7		
more than 90	93.5		
(2.9% missing)			
	<b>Always</b>	<b>Sometimes</b>	<b>Never</b>
<b>Resident:</b>			
Knows current season (3.7% missing)	50.2	34.0	15.8
Recognizes respondent (3.3% missing)	78.8	16.9	4.3
Knows they're in nursing home (4.0% missing)	64.4	23.6	12.0
	<b>Some</b>	<b>A Great Deal</b>	<b>Totally Dep.</b>
<b>Resident Needs Help With:</b>			
Eating (3.6% missing)	34.7	11.5	16.0
Toileting (3.5% missing)	25.7	20.9	35.7
Dressing (3.4% missing)	31.4	24.0	32.6
Transferring (3.4% missing)	24.8	20.0	34.6

N =23,633 <sup>a</sup> Families were asked to check as many sources as applied so percentages sum to more than 100.NOTE: Percentages are based on those who answered the questions.

## **Item Scores**

Table 10 shows the frequency of responses for each questionnaire item, along with the statewide means for each item.

Because frequencies reflect the proportion of individual families that answered in each domain, we computed statewide averages in this table at the individual level as well. Thus, all responses are based on a sample of 23,633 families. That is, in the first step, all individual responses were averaged for a particular domain rather than averaging the data within each facility. In the second step, researchers then took the average of those averages for a particular facility. The data below provide aggregate information about the experience of every nursing home family member across the state. This differs slightly from what is shown on the website which is the average of each facility's average for each item and domain.

Complete calculation rules for the strategies used to calculate scores on the website and for individual facility reports are shown in Appendix B.

**Table 10: Item Frequencies and Averages for Family Survey  
Items for 2002 and 2006\* Family Surveys**

<b>DOMAIN* (2006 responses are in bold)</b>	Always	Some-times	Hardly Ever	Never	Doesn't Apply/ Missing	<i>Mean 2002</i> <b>Mean 2006</b>
<b>Admissions</b>						<b>89.0</b>
1. Did the staff provide you with adequate information about the different services in the facility?	72.4 <b>70.9</b>	21.0 <b>22.4</b>	2.4 <b>2.7</b>	.9 <b>1.1</b>	3.4 <b>2.9</b>	90.3 <b>88.5</b>
2. Did the staff give you clear information about the [daily rate] cost of care?	72.0 <b>70.9</b>	9.8 <b>14.7</b>	2.7 <b>3.7</b>	3.6 <b>3.5</b>	11.9 <b>7.3</b>	90.2 <b>86.6</b>
3. Did the staff adequately address your questions about how to pay for care (private pay, Medicare, Medicaid)?	75.2 <b>73.9</b>	12.7 <b>14.6</b>	2.3 <b>3.0</b>	2.3 <b>2.4</b>	7.5 <b>6.0</b>	91.3 <b>89.0</b>
4. Overall, were you satisfied with the admission process?	79.9 <b>79.1</b>	13.5 <b>15.3</b>	1.2 <b>1.4</b>	.8 <b>.7</b>	4.6 <b>3.5</b>	93.6 <b>92.4</b>
<b>Social Services</b>						<b>91.1</b>
5. Does the social worker follow-up and respond quickly to your concerns?	67.9 <b>67.4</b>	20.4 <b>21.3</b>	2.8 <b>3.1</b>	1.2 <b>1.3</b>	7.9 <b>6.9</b>	89.4 <b>88.2</b>
6. Does the social worker treat you with respect?	83.9 <b>83.2</b>	7.9 <b>9.0</b>	.8 <b>.9</b>	.4 <b>.6</b>	7.0 <b>6.3</b>	96.2 <b>95.2</b>
7. Overall, are you satisfied with the quality of the social workers in the facility?	76.4 <b>73.8</b>	14.1 <b>16.5</b>	1.7 <b>2.4</b>	.7 <b>1.2</b>	7.1 <b>6.2</b>	93.0 <b>90.9</b>
<b>Activities</b>						<b>83.7</b>
8. Does the resident have enough to do in the facility?	45.6 <b>45.8</b>	31.7 <b>34.3</b>	5.9 <b>6.6</b>	1.3 <b>1.4</b>	15.5 <b>12.0</b>	81.4 <b>79.8</b>
9. Are the facility activities things the resident likes to do?	29.0 <b>30.7</b>	43.3 <b>44.3</b>	8.5 <b>8.9</b>	1.8 <b>2.0</b>	17.4 <b>14.1</b>	73.7 <b>73.1</b>
10. Is the resident satisfied with the spiritual activities in the facility?	46.2 <b>46.5</b>	24.7 <b>25.4</b>	3.3 <b>3.7</b>	.9 <b>1.2</b>	24.9 <b>23.3</b>	85.0 <b>83.5</b>

<b>DOMAIN* (2006 responses are in bold)</b>	Always	Sometimes	Hardly Ever	Never	Doesn't Apply/ Missing	Mean 2002 Mean 2006
11. Do the activities staff treat the resident with respect?	78.4 <b>80.0</b>	11.4 <b>12.8</b>	.15 <b>.5</b>	.1 <b>.3</b>	9.5 <b>6.4</b>	95.3 <b>94.6</b>
12. Overall, are you satisfied with the activities in the facility?	64.1 <b>63.6</b>	23.0 <b>24.7</b>	2.7 <b>3.3</b>	.7 <b>1.0</b>	9.4 <b>7.4</b>	88.8 <b>87.2</b>
<b>Choice</b>						<b>89.2</b>
13. Can the resident go to bed when he/she likes?	58.8 <b>59.7</b>	24.4 <b>25.2</b>	2.9 <b>3.0</b>	1.3 <b>1.3</b>	12.6 <b>10.7</b>	87.1 <b>87.1</b>
14. Can the resident choose the clothes that he/she wears?	56.6 <b>58.8</b>	18.2 <b>17.8</b>	3.5 <b>3.9</b>	2.6 <b>2.7</b>	19.1 <b>16.8</b>	86.4 <b>86.5</b>
15. Can the resident bring in belongings that make his/her room feel homelike?	81.4 <b>82.3</b>	10.6 <b>11.9</b>	.7 <b>.9</b>	.4 <b>.6</b>	6.9 <b>4.2</b>	95.3 <b>94.2</b>
16. Do the staff leave the resident alone if he/she doesn't want to do anything?	65.1 <b>65.7</b>	22.7 <b>23.1</b>	.9 <b>1.0</b>	.3 <b>.5</b>	11.0 <b>9.8</b>	90.6 <b>90.0</b>
17. Does the staff let the resident do the things he/she wants to do for himself/herself?*	60.3 <b>59.9</b>	22.1 <b>24.3</b>	1.0 <b>1.4</b>	.4 <b>.5</b>	16.1 <b>13.9</b>	90.0 <b>88.8</b>
<b>Direct Care &amp; Nursing</b>						<b>87.7</b>
18. Does a staff person check on the resident to see if he/she is comfortable? (needs a drink, a blanket, a change in position)	49.4 <b>49.4</b>	34.4 <b>36.9</b>	5.7 <b>5.9</b>	.7 <b>.8</b>	9.8 <b>7.1</b>	82.4 <b>81.8</b>
19. During the week, is a staff person available to help the resident if he/she needs it (help getting dressed, help getting things)?	71.7 <b>71.7</b>	20.9 <b>23.1</b>	1.3 <b>1.4</b>	.1 <b>.2</b>	5.9 <b>3.7</b>	91.6 <b>90.6</b>

<b>DOMAIN* (2006 responses are in bold)</b>	Always	Some-times	Hardly Ever	Never	Doesn't Apply/ Missing	<i>Mean 2002</i> <b>Mean 2006</b>
20. During the weekends, is a staff person available to help the resident if he/she needs it (help getting dressed, help getting things)?	61.7 <b>62.9</b>	27.7 <b>28.8</b>	3.4 <b>3.3</b>	.3 <b>.3</b>	7.0 <b>4.7</b>	87.5 <b>87.2</b>
21. During the evening and night, is a staff person available to help the resident if he/she needs it (get a blanket, get a drink, needs a change in position)?	57.3 <b>58.3</b>	26.1 <b>26.7</b>	3.0 <b>3.4</b>	.3 <b>.3</b>	13.3 <b>11.4</b>	87.4 <b>87.0</b>
22. Are the nurse aides gentle when they take care of the resident?	68.6 <b>70.8</b>	25.4 <b>24.8</b>	1.0 <b>1.3</b>	.1 <b>.2</b>	4.9 <b>2.8</b>	90.3 <b>90.3</b>
23. Do the nurse aides treat the resident with respect?	76.5 <b>76.3</b>	19.3 <b>20.9</b>	.9 <b>1.1</b>	.1 <b>.3</b>	3.2 <b>1.4</b>	92.7 <b>91.8</b>
24. Do the nurse aides spend enough time with the resident?	NA <b>53.6</b>	NA <b>35.9</b>	NA <b>5.5</b>	NA <b>.8</b>	NA <b>4.2</b>	NA <b>82.9</b>
25. Overall, are you satisfied with the nurse aides who care for the resident?	74.4 <b>64.7</b>	21.1 <b>30.4</b>	1.6 <b>3.0</b>	.4 <b>.7</b>	2.6 <b>1.2</b>	91.4 <b>86.9</b>
26. Overall, are you satisfied with the quality of the RNs and LPNs in the facility?	75.6 <b>73.5</b>	20.3 <b>23.4</b>	1.6 <b>1.9</b>	.3 <b>.5</b>	2.2 <b>.8</b>	91.8 <b>90.1</b>
<b>Therapy</b>						<b>79.2</b>
27. Does the physical therapist spend enough time with the resident?	38.1 <b>34.4</b>	20.5 <b>17.3</b>	6.0 <b>5.5</b>	1.7 <b>2.2</b>	33.7 <b>40.6</b>	81.2 <b>79.6</b>
28. Does the occupational therapist spend enough time with the resident?	45.0 <b>29.9</b>	18.6 <b>14.8</b>	4.4 <b>5.1</b>	1.8 <b>2.2</b>	30.2 <b>47.9</b>	84.4 <b>78.9</b>
<b>Administration</b>						<b>91.3</b>
29. Is the administration available to talk with you?	71.7 <b>71.5</b>	20.8 <b>22.5</b>	2.4 <b>2.8</b>	.6 <b>.6</b>	4.5 <b>2.7</b>	90.5 <b>89.1</b>

<b>DOMAIN* (2006 responses are in bold)</b>	Always	Some-times	Hardly Ever	Never	Doesn't Apply/ Missing	<i>Mean 2002 Mean 2006</i>
30. Does the administration treat <u>you</u> with respect?	83.0 <b>84.4</b>	10.8 <b>11.2</b>	.9 <b>1.2</b>	.4 <b>.5</b>	4.9 <b>2.8</b>	95.2 <b>94.4</b>
31. Overall, are you satisfied with the administration here?	77.4 <b>77.3</b>	15.7 <b>16.9</b>	1.8 <b>2.4</b>	.9 <b>1.1</b>	4.2 <b>2.3</b>	92.4 <b>90.9</b>
<b>Meals and Dining</b>						<b>79.7</b>
32. Does the resident think that the food is tasty?	25.8 <b>27.8</b>	49.0 <b>48.5</b>	10.6 <b>11.7</b>	2.5 <b>3.0</b>	12.1 <b>9.1</b>	70.7 <b>70.4</b>
33. Are foods served at the right temperature (cold foods cold, hot foods hot)?	47.0 <b>46.9</b>	35.6 <b>36.6</b>	4.4 <b>5.1</b>	.9 <b>1.2</b>	12.0 <b>10.2</b>	82.2 <b>81.4</b>
34. Can the resident get the foods he/she likes?	33.2 <b>33.5</b>	42.0 <b>42.5</b>	7.8 <b>8.6</b>	1.9 <b>2.3</b>	15.1 <b>13.1</b>	75.3 <b>74.3</b>
35. Does the resident get enough to eat?*(frequencies from 2001 reversed to reflect changed wording)	73.5 <b>72.0</b>	17.7 <b>20.4</b>	1.5 <b>1.8</b>	.5 <b>.7</b>	6.8 <b>5.2</b>	92.1 <b>90.5</b>
36. Overall, are you satisfied with the food in the facility?	56.1 <b>54.0</b>	30.6 <b>32.6</b>	5.0 <b>6.0</b>	1.5 <b>2.3</b>	6.9 <b>5.1</b>	84.0 <b>81.8</b>
<b>Laundry</b>						<b>55.7</b>
37. Do the resident's clothes get lost in the laundry?	6.8 <b>6.6</b>	41.4 <b>42.3</b>	22.9 <b>23.0</b>	13.5 <b>12.3</b>	15.4 <b>15.8</b>	50.2 <b>49.4</b>
38. Do the resident's clothes get damaged in the laundry?	5.7 <b>3.8</b>	22.4 <b>22.2</b>	30.7 <b>32.1</b>	23.0 <b>23.5</b>	18.2 <b>18.5</b>	62.3 <b>63.6</b>
<b>Facility Environment</b>						<b>84.8</b>
39. Can the resident get outside when he/she wants to, either with help or on their own?	54.1 <b>40.2</b>	21.8 <b>30.2</b>	6.8 <b>9.7</b>	2.3 <b>3.9</b>	15.0 <b>16.0</b>	83.5 <b>75.1</b>
40. Can you find places to talk the resident in private?	70.6 <b>72.6</b>	19.9 <b>20.0</b>	3.9 <b>3.1</b>	1.1 <b>.9</b>	4.6 <b>3.1</b>	89.3 <b>89.5</b>

<b>DOMAIN* (2006 responses are in bold)</b>	Always	Sometimes	Hardly Ever	Never	Doesn't Apply/ Missing	Mean 2002 Mean 2006
43. Are the public areas (dining room, halls) quiet enough?* (frequencies from 2001 reversed to reflect changed wording)	56.2 <b>57.7</b>	34.5 <b>34.3</b>	3.8 <b>3.8</b>	.7 .8	4.8 <b>3.4</b>	84.7 <b>84.2</b>
44. Does the facility seem homelike?	53.0 <b>55.9</b>	34.9 <b>32.8</b>	7.2 <b>7.8</b>	1.7 <b>2.3</b>	3.2 <b>1.2</b>	81.4 <b>80.7</b>
45. Is the facility clean enough?* (frequencies from 2001 reversed to reflect changed wording)	71.1 <b>70.0</b>	25.0 <b>26.2</b>	1.8 <b>2.6</b>	.5 <b>1.0</b>	1.6 <b>.2</b>	89.9 <b>87.9</b>
47. Are you satisfied with the safety and security of this facility?	69.6 <b>72.5</b>	24.5 <b>23.3</b>	2.4 <b>2.4</b>	1.0 <b>1.1</b>	2.4 <b>.7</b>	89.0 <b>88.9</b>
<b>Resident Environment</b>						<b>85.0</b>
41. Is the resident's room quiet enough?* (frequencies from 2001 reversed to reflect changed wording)	67.2 <b>65.6</b>	26.8 <b>29.3</b>	3.2 <b>3.5</b>	.6 <b>.8</b>	2.2 <b>.8</b>	88.1 <b>86.8</b>
42. Are you satisfied with the resident's room?	54.8 <b>66.6</b>	20.6 <b>27.0</b>	2.9 <b>4.3</b>	.8 <b>1.7</b>	20.9 <b>.4</b>	87.9 <b>86.0</b>
46. Are the resident's belongings safe in the facility?	54.4 <b>56.0</b>	35.3 <b>33.6</b>	5.1 <b>5.4</b>	1.9 <b>2.3</b>	3.4 <b>2.7</b>	82.5 <b>82.1</b>
<b>General</b>						<b>89.1</b>
48. Are the telephone calls processed in an efficient manner?	64.5 <b>70.5</b>	17.2 <b>20.9</b>	1.4 <b>2.2</b>	.6 <b>.5</b>	16.3 <b>5.8</b>	91.4 <b>90.1</b>
49. Do residents look well-groomed and cared for?	59.7 <b>60.8</b>	34.7 <b>34.0</b>	2.6 <b>2.5</b>	.5 <b>.3</b>	2.4 <b>2.4</b>	85.9 <b>86.5</b>
50. Is the staff here friendly?	NA <b>79.8</b>	NA <b>18.8</b>	NA <b>.9</b>	NA <b>.2</b>	NA <b>.2</b>	NA <b>92.6</b>
51. Do you get adequate information from the staff about the resident's medical condition and treatment?	69.7 <b>72.9</b>	23.7 <b>22.1</b>	4.1 <b>3.7</b>	.7 <b>.8</b>	1.8 <b>.6</b>	88.5 <b>88.8</b>

<b>DOMAIN* (2006 responses are in bold)</b>	Always	Some-times	Hardly Ever	Never	Doesn't Apply/ Missing	<i>Mean 2002</i> <b>Mean 2006</b>
52. Are you satisfied with the medical care in the facility?	66.3 <b>69.8</b>	28.2 <b>25.8</b>	2.7 <b>2.7</b>	.6 <b>.9</b>	2.1 <b>.8</b>	88.0 <b>88.2</b>
53. Would you recommend this facility to a family member or friend?	73.9 <b>75.3</b>	18.1 <b>17.9</b>	2.7 <b>2.7</b>	2.3 <b>2.6</b>	3.0 <b>1.5</b>	89.6 <b>88.5</b>
54. Overall, do you like this facility?	71.6 <b>75.5</b>	23.8 <b>20.6</b>	2.1 <b>2.1</b>	.7 <b>1.3</b>	1.6 <b>.5</b>	89.8 <b>89.7</b>

NOTE: The items above are not presented in the order they appear on the questionnaire, but rather according to their domains. N = 16,955 in 2002, 23,633 in 2006. Means computed on those who provided valid answers to the questions.

\*Question changed from 2002 to 2006.

### Domain Scores

Domain scores were computed by averaging the scores on most items in the domain. In order for a respondent to be included in the domain average, he/she should have answered at least all but one of the domain items. For example, where six items are in a domain, respondents had to answer at least five. While this criterion is important in not letting zeros or a great deal of missing data influence the averages, it did result in several cases where facilities did not have any respondents who answered enough domain items to compute a domain score.

Table 11 shows 2006 mean scores for each of the domains, along with standard deviations and a comparison with the domain means from the 2001 family survey and the 2002 family survey. Comparisons across surveys are not identical—the family survey across the years include changes, i.e., deletion and addition of items.

**Table 11: Statewide Average Domain Scores**

<i>Domain Name</i>	<i>Family Mean 2001 (SD)</i>	<i>Family Mean 2002 (SD)</i>	<i>Family Mean 2006 (SD)</i>
Admissions	89.1 (19.0)	90.0 (17.7)	90.2 (17.6)
Social Services	93.5 (13.7)	93.7 (13.3)	92.0 (16.0)
Activities	86.1 (14.5)	84.9 (15.5)	84.3 (16.1)
Choice	89.5 (14.0)	90.1 (13.1)	89.8 (13.6)
Phone	93.8 (13.2)	93.9 (13.0)	NA.
Direct Care	87.9 (14.6)	89.0 (13.6)	88.1 (14.8)
Professional Nurses	91.0 (16.2)	91.5 (15.5)	NA
Therapy	80.1 (26.8)	82.7 (24.2)	80.2 (26.7)
Administration	93.7 (13.7)	94.0 (13.0)	92.1 (15.5)
Meals & Dining	76.4 (18.8)	80.9 (17.8)	80.0 (18.9)
Laundry	54.8 (27.1)	55.9 (27.0)	56.3 (25.9)
Resident Environment	NA	NA	85.3 (17.5)
Facility Environment	NA	NA	85.3 (15.6)
General Satisfaction	80.3 (17.9)	83.1 (16.1)	89.8 (13.6)
	<b>N=20,226</b>	<b>N=16,955</b>	<b>N=23,633</b>

Note: Changes from the 2001 to 2002 to 2006 family survey may explain a portion of the differences in domain scores across surveys.

### **Family Comments**

Six hundred ninety-seven families (3.07%) included some form of written comments with their surveys. These comments were entered into an Excel spreadsheet, assigned a code corresponding to the topic(s) addressed in their comment, and then categorized into larger constructs, using the same method as that for coding the toll-free hotline comments. Original copies were forwarded weekly to ODA after entry since some families requested immediate intervention and assistance. The Ombudsman's office was responsible for determining the kind of assistance requested and for providing it in a timely manner.

Because some respondents commented on many different areas, the total number of individual comments received was 2266. Some comments received multiple codes

because they addressed several topics; 2712 codes were assigned. The distribution of comments across topic areas is shown in Table 12 below.

**Table 12: Constructs Identified in Written Family Comments**

<b>Construct</b>	<b>Number of Comment Codes</b>	<b>Percent</b>
Complaints about the nursing home	1546	68.6
Praise for the nursing home	489	21.7
Miscellaneous	426	18.9
Instrument improvement	181	8.0
Doesn't want to/ Can't complete	29	1.3
Sampling issues/ Selection criteria	21	.9
Process issues	16	.7
Wants to be contacted	4	.2

Note: Percentages sum to greater than 100% since some families made multiple comments.

The results above suggest that the ONHFSS provides an opportunity to “vent” for many families, with complaints being the most prevalent type of comment made. Complaints about specific services were the most prevalent (14.5% of all comments made), followed by complaints about resident care (12.1% of all comments). Such comments as “they serve food very late, almost 7 p.m.” “she loses her clothes and gets other people’s” “activities is only Bingo, nothing for most residents to do” indicate the kinds of specific service problems that families addressed.

Complaints about resident care included such items as “Grooming has been an ongoing complaint; hands are never washed before meals”, “you have to stay on top of things here or the resident’s care is compromised”, and “She takes insulin; shouldn’t they be testing her often to see how much she needs?” are indicative of the kinds of care and practice issues that concerned families.

Miscellaneous comments included those who just wanted to “tell their story”. Many of the comments suggest that families are increasingly savvy about nursing home care, and have experience with several different facilities. As more residents have short nursing home stays, families’ comparative expectations are likely to become higher. “My niece has been in 3 nursing homes in the past 7 years.” “We did not have a choice to come here, we are working on “liking” it.” One family member “marveled at how nursing homes have changed compared to years ago” and related a lengthy history of nursing home placements in her family.

Eleven percent of families had concerns about the physical building and the environment. These include such things as “the rooms are too small for 2 people”, “closets should be swept and clothes hung up” to “there are ants everywhere”. This category also included security of the facility and a large number of families complained about lost dentures, hearing aids, clothing, and valuables such as watches and money.

Prevalent among the complaints about staff were statements that showed empathy for the nurse aides in the facility. “Nurses aides are exceptional, go beyond duties with little pay, but they are understaffed”, “The staff are very caring and informative; my father is not the easiest person to care for and keep clean”.

Praise comments were often offered along with other comments. “My dad is picky but they go out of their way to please him.” “So much better than 3 other nursing homes” “Better than the other places she has been, but still room to improve”. Others could not say enough good things about the facility where their family member resided. “The employees look at their work as “more than a job” and my family and I are very thankful for the folks who make up the [facility name]. There is nothing like the peace of mind you get when you

know that your loved ones are well taken care of.” “She is happier here than where she was before. Everyone is very loving and caring.” “I am extremely happy with the staff, administration, service and care. I have recommended this facility to many friends.”

Sampling issues generally involved families who received surveys that either did not recognize the facility that sent them the survey or those who should have been removed from census lists. “I’ve never been in this nursing home”. “Father died in December”. Last year’s recommendations for implementation of the survey recommended an audit procedure for facilities where census related problems occurred. Although fewer comments related to census problems were received in the 2006 survey there are still concerns regarding keeping an updated census list of family members in some facilities that should probably be addressed through an audit procedure.

Some of the comments indicate a lack of understanding of the survey process saying, “take me off your list”, or “don’t send me this again”.

Process issues included such problems as: “There is no resident’s name so I don’t know who this survey is for”. But, the relatively low number of these comments suggests that process refinements have resulted in improvements after three rounds of survey administration.

In summary, the family comments provide a rich source of information about family member perceptions of nursing home life that complements the quantitative information provided to facilities. In some cases, these comments would make a valuable addition to the reports provided to facilities. However, it is also likely that if family members were informed that their comments would be provided to facilities they may be less likely to criticize (given their concerns about retaliation) and might be less likely to respond at all,

given their already apparent concerns about anonymity. However, since little use is made of the comments, their main function is now viewed as a venting mechanism. The value this has in increasing responses to the survey and in making family members feel involved in the process may outweigh any benefits derived from making a more dedicated effort to using the family comments in a formal way.

### **Survey Psychometrics**

Because some items were dropped and others rewritten, it is important to do additional psychometric work to determine if additional survey refinements are necessary. Table 13 shows the domain alphas from the 2002 survey, the new 2006 domain alphas and item-total correlations for each item. To control for within-facility correlations, nursing homes were used as the unit of analysis. Data on each item were aggregated by facility, and then converted to standardized means before reliability analyses were conducted.

**Table 13: Confirmatory Reliability Analyses of 2002  
and 2006 Survey Domains**

<b>Domain</b>	<b>2002 Coefficient Alpha</b>	<b>2006 Coefficient Alpha</b>	<b>2006 Corrected Item-Total Correlations</b>
<b>Admissions</b>	<b>.93; 5 items</b>	<b>.92; 4 items</b>	
1. Did the staff provide you with adequate information about the different services in the facility?			.83
2. Did the staff give you clear information about the daily rate?[cost of care]			.84
Did the staff provide you with adequate information about any additional charges?[Dropped]			NA
3. Did the staff adequately address your questions about how to pay for care (private pay, Medicare, Medicaid)?			.87
4. Overall, were you satisfied with the admission process?			.81
<b>Social Services</b>	<b>.90; 4 items</b>	<b>.91; 3 items</b>	
5. Does the social worker follow-up and respond quickly to your concerns?			.88
6. Does the social worker treat you with respect?			.79
Does the social worker treat the resident with respect?[Dropped]			NA
7. Overall, are you satisfied with the quality of the social workers in the facility?			.91
<b>Activities</b>	<b>.88; 5 items</b>	<b>.88; 5 items</b>	
8. Does the resident have enough to do in the facility?			.80
9. Are the facility's activities things the resident likes to do?			.73
10. Is the resident satisfied with the spiritual activities in the facility?			.69
11. Do the activities staff treat the resident with respect?			.61
12. Overall, are you satisfied with the activities in the facility?			.81

<b>Domain</b>	<b>2002 Coefficient Alpha</b>	<b>2006 Coefficient Alpha</b>	<b>2006 Corrected Item-Total Correlations</b>
<b>Choice</b>	<b>.81; 5 items: 1 reworded</b>	<b>.79; 5 items</b>	
13. Can the resident go to bed when he/she likes?			.60
14. Can the resident choose the clothes that he/she wears?			.60
15. Can the resident bring in belongings that make his/her room feel homelike?			.50
16. Do the staff leave the resident alone if he/she doesn't want to do anything?			.53
17. Does the staff let the resident do the things he/she wants to do for himself/herself?			.64
<b>Direct Care/Nurse Aides</b>	<b>.94; 8 items</b>	<b>.96; 9 items</b>	
18. Does a staff person check on the resident to see if he/she is comfortable? (need a drink, a blanket, a change in position)			.88
19. During the week, is a staff person available to help the resident if he/she needs it (help getting dressed, help getting things)?			.85
20. During the weekends, is a staff person available to help the resident if he/she needs it (help getting dressed, help getting things)?			.85
21. During the evening and night, is a staff person available to help the resident if he/she needs it (get a blanket, get a drink, needs a change in position)?			.86
22. Are the nurse aides gentle when they take care of the resident?			.79
23. Do the nurse aides treat the resident with respect?			.81
24. Do the nurse aides spend enough time taking care of the resident?			.89
25. Overall, are you satisfied with the nurse aides who care for the resident?			.89

<b>Domain</b>	<b>2002 Coefficient Alpha</b>	<b>2006 Coefficient Alpha</b>	<b>2006 Corrected Item-Total Correlations</b>
26. Overall, are you satisfied with the quality of the RNs and LPNs in the facility?			.79
<b>Therapy</b>	<b>.94; 2 items</b>	.96; 2 items	
27. Does the physical and/or occupational therapist spend enough time with the resident?[Rewritten for physical therapist only]			.92
28. Overall, are you satisfied with the care provided by the therapists in the facility? [Dropped. Replaced by : Does the occupational therapist spend enough time with the resident?]			.92
<b>Administration</b>	.93; 4 items	<b>.93; 3 items</b>	
29. Is the administration available to talk with you?			.84
30. Does the administration treat you with respect?			.87
Does the administration treat the resident with respect? [Dropped]			NA
31. Overall, are you satisfied with the administration here?			.89
<b>Meals and Dining</b>	<b>.91; 5 items</b>	<b>.93; 5 items</b>	
32. Does the resident think that the food is tasty?			.85
33. Are foods served at the right temperature (cold foods cold, hot foods hot)?			.83
34. Can the resident get the foods he/she likes?			.83
35. Does the resident get enough to eat?			.75
36. Overall, are you satisfied with the food in the facility?			.91
<b>Laundry</b>	<b>.89; 2 items</b>	<b>.89; 2 items</b>	
37. Do the resident's clothes get lost in the laundry?			.80
38. Do the resident's clothes get damaged in the laundry?			.80

<b>Domain</b>	<b>2002 Coefficient Alpha</b>	<b>2006 Coefficient Alpha</b>	<b>2006 Corrected Item-Total Correlations</b>
<b>Environment [Changed to Resident Environment and Facility Environment]</b>	<b>.91; 7 items</b>	<b>.87;6 items: 1 reworded</b>	
39. Are there enough comfortable places for residents to sit outdoors?[Can the resident get outdoors when he/she wants to, either with help or on their own?]			.43
40. Can you find places to talk the resident in private?			.64
43. Are the public areas (dining room, halls) quiet enough?			.74
44. Does the facility seem homelike?			.80
45. Is the facility clean enough?			.77
47. Are you satisfied with the safety and security of this facility?			.78
<b>Noise</b>	<b>.81 2 items</b>	<b>.Items included in Facility Environment</b>	
<b>Resident Environment</b>	<b>NA</b>	<b>.79; 3 items</b>	
41.Is the resident's room quiet enough?			.62
42. Are you satisfied with the resident's room?			.74
46. Are the resident's belongings safe in the facility?			.58
<b>General</b>	<b>.91; 6 items</b>	<b>.95; 7 items: 2 dropped 3 added, 1 rewritten</b>	
Are there times when you are upset by the staff?[Dropped]			NA
Does the staff know the resident's likes and dislikes? [Dropped]			NA
48. Are your telephone calls handled in an efficient manner?			.78
49. Do residents look well-groomed and cared for?			.79

<b>Domain</b>	<b>2002 Coefficient Alpha</b>	<b>2006 Coefficient Alpha</b>	<b>2006 Corrected Item-Total Correlations</b>
50. Is the staff here friendly?			.84
51. Do you get adequate information from the staff about the resident's medical condition and treatment?			.86
52. Are you satisfied with the medical care in this facility?			.90
53. Would you recommend this facility to a family member or friend?			.88
54. Overall, do you like this facility?			.91

### **Statewide Comparisons: 2002 and 2006**

One of the reasons for providing consumers with information about nursing homes is to provide an impetus for facilities to improve quality. Consumer satisfaction information, particularly when it is objective and specific as most of the items in the ONHFSS are, also tells facilities where to target their quality improvement efforts. After the first year of the family survey, a number of facilities requested information from Scripps, MBRI and ODA regarding how their consumer satisfaction information could be used. Since 2002 a number of state and federal initiatives have targeted improvements in nursing home quality, from the development of a federal website providing quality measures and staffing information about facilities nationwide, to quality improvement efforts undertaken by state Quality Improvement Organizations funded by CMS. Table 14 provides a comparison between the lowest scoring items for 2002 and 2006. Arbitrary cut-off scores were used to denote areas of concern as being those domains and items that had a score of 76 and under; and areas of excellence being scores of 90 and over.

**Table 14. Facility Areas of Concern (State Average 76 AND UNDER)**

<b>Domain</b>	<b>Area of Concern</b>	<b>STATE AVERAGE 2002</b>	<b>STATE AVERAGE 2006</b>
<b>Activities</b>	Are the facility activities things that the resident likes to do?	74	73
<b>Laundry</b>	Do the resident's clothes get <u>lost</u> in the laundry?	63	49
	Do the resident's clothes get <u>damaged</u> in the laundry?	51	64
<b>Meals and Dining</b>	Does the resident think the <u>food is tasty</u> ?	72	70
	Can the resident get the <u>food he/she likes</u> ?	76	74
<b>Environment</b>	Can the resident get outdoors when he/she wants to, either with help or on their own?	NA—new item	75
<b>General Satisfaction</b>	Are there times when the staff get you upset?	62	NA—item dropped
<b>TOTALS</b>		6 Areas of Concern	6 Areas of Concern

As shown in the table above, statewide, nursing homes stayed the same on the number of items that are “areas of concern” with six areas of concern in 2002 and 2006. Only one item (resident clothes damaged in the laundry) improved between 2002 and 2006, all other items that were the same over the two surveys showed declines in 2006. Our previous report showed that scores on the areas of concern improved between 2001 and 2002; similar improvements are not shown in this time period. It appears that some of the problem areas may be intractable for facilities to address. Cooking food in large quantities and producing a variety of tasty foods for people on special diets is notoriously difficult. However, it is not as difficult to give residents foods that they like. Often, when

facilities undertake the culture change process, the dining experience is one of the first modifications made.

Large quantity laundry operations are also extremely problematic, scoring the lowest of any of the domains with a 55.7 statewide average score. Again, while this may be difficult, commercial laundries and dry cleaners do far greater volume than a nursing home with little loss of clothing. It is unclear why nursing homes cannot find and follow an effective model for laundry practice. Some are able to do so; 15 facilities scored above 90 on this item.

The table below gives an overview of areas of excellence using a score of 90 and above.

**Table 15: Facility Areas of Excellence: (STATE Average 90 and above)**

<b>Domain</b>	<b>Area of Excellence</b>	<b>STATE Average 2002</b>	<b>STATE Average 2006</b>
<b>Admissions</b>	Did the staff give you clear information about the daily rate?[the cost of care]	91	
	Did the staff adequately address your questions about how to pay for care?	92	
	Overall, were you satisfied with the admission process?	94	92
<b>Social Services</b>	Does the social worker treat the family with respect?	96	96
	Does the social worker treat the resident with respect?	96	NA*
	Overall, are you satisfied with the quality of social workers in the facility?	93	NA
<b>Activities</b>	Does the activities staff treat the resident with respect?	96	95
<b>Choice</b>	Can the resident bring in belongings that make his/her room feel homelike?	96	94
	Does the resident have the opportunity to do as much as he/she would like to do for himself/ herself?	90	NA
	Does the staff leave the resident alone if he/she doesn't want to do anything?	91	NA

<b>Domain</b>	<b>Area of Excellence</b>	<b>STATE Average 2002</b>	<b>STATE Average 2006</b>
<b>Administration</b>	Do the nurse aides treat the resident with respect?	93	92
	Overall, are you satisfied with the quality of the RNs and LPNs in the facility?	92	90
	Does the administration treat the family with respect?	95	95
	Overall, are you satisfied with the administration here?	93	90
<b>Direct Care and Nursing Staff</b>	During the week, is a staff person available to help the resident if he/she needs it?	92	91
	Are the nurse aides gentle when they take care of the resident?	91	90
<b>Facility Environment</b>	Is the facility clean enough?	91	NA
<b>Meals and Dining</b>	Does the resident get enough to eat?	93	91
<b>General</b>	Are the telephone calls processed in an efficient manner?	92	90
	Is the staff here friendly?	NA—new item	93
<b>TOTALS</b>		19 Areas of Excellence	13 Areas of Excellence

\*NA- Statewide mean below 90.

The table above shows that nursing homes have fewer areas of excellence in 2006 than in 2002 and that even where the area is still excellent, slight decreases are demonstrated in many cases. Despite significant efforts to improve facility quality since the 2002 survey, it appears that families are still critical of care in many areas, and even where they are supportive of some areas of service, they do not rate the care or service as highly as they did in 2002. It is also possible that facilities that participated for the first time in 2006 differ in some fundamental ways, reducing the overall number of areas of excellence and lowering scores in those that continue to be excellent.

## Recommendations For 2008

The nursing home consumer guide is a “work in progress” by mandate; additional changes are being recommended to improve the survey and the survey process for 2008.

Some of our recommendations are:

1. Use more mailings from ODA to prepare facilities for survey participation in advance of survey implementation dates. Consider including promotional materials such as high-quality posters, pre-printed bill stuffers, news releases or other materials to encourage greater family participation. Consider a statewide ad campaign or public service announcements directly to families to encourage them to participate.
2. Use multiple methods (other than mail) to remind facility administrators that the ONHFSS is approaching. These methods might include advertisements in trade association newsletters, an e-mail to all facility addresses from the website, a tentative calendar sent with the December billing notice, and other strategies.
3. Ascertain from the mailing house the type of shipping cartons and/or labels that will be used so they can be described in advance in the mailing materials to administrators.
4. Address cartons: “ATTN: ADMINISTRATOR”.
5. Remind facilities to use their daily census list to randomly select resident names and to update their family mailing lists accordingly before survey packages arrive so that surveys are not sent to families of deceased or discharged residents or mailed to incorrect or incomplete addresses.
6. Make further attempts to determine why facilities choose not to participate and enlist assistance from the trade associations in encouraging participation.
7. Include additional information about the pay-for-performance incentive payment in the FAQs. Address non-participation issues for non-certified facilities.
8. Add information to the FAQs to address concerns of new administrators/recent management changes. These concerns usually regard the fact that family data will be based on old management practices.

9. Add information to the FAQs that explains that response rate information is not available until completion of scanning.
10. Reinforce confidentiality issues in the cover letter to families stating that no one at the nursing home will ever see individual results.
11. Encourage families of short-term residents and families who are not knowledgeable about certain issues to complete as much of the survey as possible.
12. Mention the dates and hours of operation of the toll-free hotline.
13. Consider reformatting the introductory letters to facilities in bullet form for ease of reading.
14. Institute an audit procedure for facilities, particularly those where comments or returned blank surveys suggest sampling problems, e.g. "I can't complete this survey because my mother moved back home six months ago." Indicate that if a recipient is not involved with a nursing home resident, they should call ODA with the name of the facility that sent them the survey.
15. Continue to invite families to send comments on a separate sheet of paper. Ask them not to write on the surveys.
16. Consider developing a web-based survey to allow facilities to submit the audit form electronically as well as by fax or mail.

## **Conclusions**

The lower number of toll-free helpline calls from families, lost packages, and recommendations for changes to the 2008 Ohio Nursing Home Family Satisfaction Survey suggest that our ongoing changes to the survey instrument and the survey process have increased the ease with which the survey is implemented and decreased the confusion for facilities and families. Based on the reduced number of family calls and comments about the survey, continued psychometric consistency, and a desire to provide comparable data

over time as the survey maintains a regular schedule, we are recommending no additional changes to the survey instrument.

This report on the third family survey implementation does provide guidance for further refinements to the family satisfaction survey process in future years. Ohio leads the nation in providing the most comprehensive consumer satisfaction information about nursing homes. As our experience grows, so will the knowledge base. Since the implementation of the first family survey, one state, Rhode Island, has adopted our instruments for their own use. Since the first resident and family satisfaction surveys, other states such as Minnesota and Maryland have also begun to publicly report satisfaction information.

We should also bear in mind that satisfaction is a function of one's experiences judged against their expectations. As nursing homes change over time, expectations of families are likely to change as well. A process for periodically revisiting family and resident expectations for nursing homes should be instituted. This will ensure that Ohio continue to assess the elements of the nursing home experience that are most relevant to family and resident satisfaction with care.

## References

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**Appendix A: Survey Materials**

# **2006 Ohio Nursing Home Family Satisfaction Survey**

Thank you for taking the time to complete the Ohio Nursing Home Family Satisfaction Survey. It is for family members and other people involved in the lives of Ohio's nursing home and hospital sub-acute unit residents. Please answer as many questions as you can. If a question does not apply to your resident, or you do not know about the service or care, please check the "Don't know/Does not apply to resident" box. If you still have questions or concerns after reading the letter that follows on page 2, please call the toll-free survey helpline at 1-866-370-1041.

**PLEASE DO NOT FOLD YOUR SURVEY.**

# Ohio Department of Aging



50 West Broad Street 9<sup>th</sup> Floor, Columbus, Ohio 43215-3363  
 (614)466-3500 TDD (614)466-6191 FAX (614)466-3741

Bob Taft, Governor  
 Merle Grace Kearns, Director

Dear Family Member or Friend:

The Ohio Department of Aging has contracted with the Scripps Gerontology Center at Miami University (main contractor) and the Margaret Blenkner Research Institute (sub-contractor) to conduct a Family Satisfaction Survey of residents of nursing homes or hospital sub-acute units. We are interested in your opinion about the facility where your relative or friend is staying. Residents will be interviewed for their opinions in 2007.

The results of the satisfaction surveys for each facility will be posted on the Ohio Long-Term Care Consumer Guide website ([www.ltcoho.org](http://www.ltcoho.org)) during December 2006. The Consumer Guide helps people select a nursing home by offering comparative information about facilities, and providing information to facilities to improve their services. If you want to see the information about your nursing home but do not have Internet access, call the Ohio Department of Aging at 1-800-282-1206 to request a hard copy.

You were **randomly chosen to participate** in this important statewide effort. Your participation is **voluntary**. The care your resident receives will not be affected by whether or not you take part in the survey. However, your input is critical because not everyone was selected to participate in the survey. If you participated in our last survey in 2002, we thank you, and hope you will help us by participating again. If you choose to participate, please answer as many questions as you can. If you are unfamiliar with a service, or the resident does not use a service, just check the box next to "don't know/doesn't apply to resident".

The information that you provide will be anonymous. Nothing on the survey identifies you. The resident's name and your name appear only on the envelope mailed to you by the facility. However, you will return the survey to researchers at Scripps using the enclosed envelope. Neither Scripps nor the Ohio Department of Aging know who received surveys. If your family member has received care in several places, please complete the survey only with respect to the facility name printed on the survey form.

If you would like to verify the information in this letter or have any questions about the survey, you may call the Family Satisfaction Survey toll-free helpline at **1-866-370-1041**. If you have additional comments, feel free to use a separate sheet of paper and return it with your survey. If you have a current concern about a nursing home, please call the Ohio Long-Term Care Ombudsman at 1-800-282-1206 for assistance.

I hope you will agree to help us by responding to the survey. Your participation can help make the services at the facility more responsive to your needs and will help others select the best facility for them. **Please return your completed survey within the next two weeks to the Scripps Gerontology Center in the enclosed postage-paid envelope.**

Sincerely,

  
 Merle Grace Kearns, Director  
 Ohio Department of Aging

# Ohio Department of Aging Family Satisfaction Survey 2006



### Marking Instructions

Use a dark-colored ink (ball-point, gel, roller-ball, felt-tip will all work well). Please do not use pencil.  
If you make a mistake, cross out the incorrect answer and check the correct one.

Correct:

If you make a mistake:

**\*\*\* Please do not fold your survey \*\*\***

### Admissions

	<i>Yes, always</i>	<i>Yes, sometimes</i>	<i>No, hardly ever</i>	<i>No, Never</i>	<i>Don't know /Doesn't apply to resident</i>
1. Did the staff provide you with adequate information about the different services in the facility?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
2. Did the staff give you clear information about the cost of care?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
3. Did the staff adequately address your questions about how to pay for care (private pay, Medicare, Medicaid)?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
4. Overall, were you satisfied with the admission process?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

### Social services

	<i>Yes, always</i>	<i>Yes, sometimes</i>	<i>No, hardly ever</i>	<i>No, never</i>	<i>Don't know /Doesn't apply to resident</i>
5. Does the social worker follow-up and respond quickly to your concerns?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
6. Does the social worker treat you with respect?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
7. Overall, are you satisfied with the quality of the social workers in the facility?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

**Activities**

	<i>Yes, always</i>	<i>Yes, sometimes</i>	<i>No, hardly ever</i>	<i>No, never</i>	<i>Don't know /Doesn't apply to resident</i>
8. Does the resident have enough to do in the facility?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
9. Are the facility activities things that the resident likes to do?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
10. Is the resident satisfied with the spiritual activities in the facility?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
11. Does the activities staff treat the resident with respect?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
12. Overall, are you satisfied with the activities in the facility?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

**Choices**

	<i>Yes, always</i>	<i>Yes, sometimes</i>	<i>No, hardly ever</i>	<i>No, never</i>	<i>Don't know /Doesn't apply to resident</i>
13. Can the resident go to bed when he/she likes?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
14. Can the resident choose the clothes that he/she wears?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
15. Can the resident bring in belongings that make his/her room feel homelike?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
16. Does the staff leave the resident alone if he/she doesn't want to do anything?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
17. Does the staff let the resident do the things he/she wants to do for himself/herself?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

**Direct Care and Nursing Staff**

	<i>Yes, always</i>	<i>Yes, sometimes</i>	<i>No, hardly ever</i>	<i>No, never</i>	<i>Don't know /Doesn't apply to resident</i>
18. Does a staff person check on the resident to see if he/she is comfortable (asks if he/she needs a blanket, needs a drink, needs a change in position)?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
19. During the week, is a staff person available to help the resident if he/she needs it (help with getting dressed, help getting things)?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
20. During the weekends, is a staff person available to help the resident if he/she needs it (help with getting dressed, help getting things)?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
21. During the evening and night, is a staff person available to help the resident if he/she needs it (get a blanket, get a drink, needs a change in position)?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
22. Are the nurse aides gentle when they take care of the resident?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
23. Do the nurse aides treat the resident with respect?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
24. Do the nurse aides spend enough time taking care of the resident?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
25. Overall, are you satisfied with the nurse aides who care for the resident?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
26. Overall, are you satisfied with the quality of the RNs and LPNs in the facility?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

**Therapy**

- |  | <i>Yes,<br/>always</i>   | <i>Yes,<br/>sometimes</i> | <i>No, hardly<br/>ever</i> | <i>No,<br/>never</i>     | <i>Don't<br/>know<br/>/Doesn't<br/>apply to<br/>resident</i> |
|--|--------------------------|---------------------------|----------------------------|--------------------------|--|
| 27. Does the physical therapist spend enough time with the resident?     | <input type="checkbox"/> | <input type="checkbox"/>  | <input type="checkbox"/>   | <input type="checkbox"/> | <input type="checkbox"/>                                     |
| 28. Does the occupational therapist spend enough time with the resident? | <input type="checkbox"/> | <input type="checkbox"/>  | <input type="checkbox"/>   | <input type="checkbox"/> | <input type="checkbox"/>                                     |

**Administration**

- |  | <i>Yes,<br/>always</i>   | <i>Yes,<br/>sometimes</i> | <i>No, hardly<br/>ever</i> | <i>No,<br/>never</i>     | <i>Don't<br/>know<br/>/Doesn't<br/>apply to<br/>resident</i> |
|--|--------------------------|---------------------------|----------------------------|--------------------------|--|
| 29. Is the administration available to talk with you?        | <input type="checkbox"/> | <input type="checkbox"/>  | <input type="checkbox"/>   | <input type="checkbox"/> | <input type="checkbox"/>                                     |
| 30. Does the administration treat you with respect?          | <input type="checkbox"/> | <input type="checkbox"/>  | <input type="checkbox"/>   | <input type="checkbox"/> | <input type="checkbox"/>                                     |
| 31. Overall, are you satisfied with the administration here? | <input type="checkbox"/> | <input type="checkbox"/>  | <input type="checkbox"/>   | <input type="checkbox"/> | <input type="checkbox"/>                                     |

**Meals and Dining**

- |   | <i>Yes,<br/>always</i>   | <i>Yes,<br/>sometimes</i> | <i>No, hardly<br/>ever</i> | <i>No,<br/>never</i>     | <i>Don't<br/>know<br/>/Doesn't<br/>apply to<br/>resident</i> |
|---|--------------------------|---------------------------|----------------------------|--------------------------|--|
| 32. Does the resident think that the food is tasty?                             | <input type="checkbox"/> | <input type="checkbox"/>  | <input type="checkbox"/>   | <input type="checkbox"/> | <input type="checkbox"/>                                     |
| 33. Are foods served at the right temperature (cold foods cold, hot foods hot)? | <input type="checkbox"/> | <input type="checkbox"/>  | <input type="checkbox"/>   | <input type="checkbox"/> | <input type="checkbox"/>                                     |
| 34. Can the resident get the foods he/she likes?                                | <input type="checkbox"/> | <input type="checkbox"/>  | <input type="checkbox"/>   | <input type="checkbox"/> | <input type="checkbox"/>                                     |
| 35. Does the resident get enough to eat?  | <input type="checkbox"/> | <input type="checkbox"/>  | <input type="checkbox"/>   | <input type="checkbox"/> | <input type="checkbox"/>                                     |
| 36. Overall, are you satisfied with the food in the facility?                   | <input type="checkbox"/> | <input type="checkbox"/>  | <input type="checkbox"/>   | <input type="checkbox"/> | <input type="checkbox"/>                                     |

**Laundry**

	<i>Yes, always</i>	<i>Yes, sometimes</i>	<i>No, hardly ever</i>	<i>No, never</i>	<i>Don't know /Doesn't apply to resident</i>
37. Do the resident's clothes get lost in the laundry?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
38. Do the resident's clothes get damaged in the laundry?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

**Environment**

	<i>Yes, always</i>	<i>Yes, sometimes</i>	<i>No, hardly ever</i>	<i>No, never</i>	<i>Don't know /Doesn't apply to resident</i>
39. Can the resident get outdoors when he/she wants to, either with help or on their own?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
40. Can you find places to talk with the resident in private?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
41. Is the resident's room quiet enough?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
42. Are you satisfied with the resident's room?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
43. Are the public areas (dining room, halls) quiet enough?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
44. Does the facility seem homelike?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
45. Is the facility clean enough?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
46. Are the resident's belongings safe in the facility?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
47. Are you satisfied with the safety and security of this facility?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

**General Questions**

	<i>Yes, always</i>	<i>Yes, sometimes</i>	<i>No, hardly ever</i>	<i>No, never</i>	<i>Don't know /Doesn't apply to resident</i>
48. Are your telephone calls handled in an efficient manner?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
49. Do residents look well-groomed and cared for?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
50. Is the staff here friendly?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
51. Do you get adequate information from the staff about the resident's medical condition and treatment?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
52. Are you satisfied with the medical care in this facility?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
53. Would you recommend this facility to a family member or friend?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
54. Overall, do you like this facility?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

## Background Information

1. How old is the resident (years)?

Example: 85

	0	<input type="checkbox"/>
1	1	<input type="checkbox"/>
2	2	<input type="checkbox"/>
3	3	<input type="checkbox"/>
4	4	<input type="checkbox"/>
5	5	<input checked="" type="checkbox"/>
6	6	<input type="checkbox"/>
7	7	<input type="checkbox"/>
8	8	<input checked="" type="checkbox"/>
9	9	<input type="checkbox"/>

1

2

3

4

5

6

7

8

9

0

1

2

3

4

5

6

7

8

9

2. How old are you (years)?

Example: 85

	0	<input type="checkbox"/>
1	1	<input type="checkbox"/>
2	2	<input type="checkbox"/>
3	3	<input type="checkbox"/>
4	4	<input type="checkbox"/>
5	5	<input checked="" type="checkbox"/>
6	6	<input type="checkbox"/>
7	7	<input type="checkbox"/>
8	8	<input checked="" type="checkbox"/>
9	9	<input type="checkbox"/>

1

2

3

4

5

6

7

8

9

0

1

2

3

4

5

6

7

8

9

3. What is your race/ethnicity?

Asian/Pacific Islander	<input type="checkbox"/>	Hispanic	<input type="checkbox"/>
African American/Black	<input type="checkbox"/>	Native American/Indian	<input type="checkbox"/>
Caucasian/White	<input type="checkbox"/>	Other	<input type="checkbox"/>

6. What is your educational level?

Less than high school	<input type="checkbox"/>	Completed college	<input type="checkbox"/>
High school completed	<input type="checkbox"/>	Master's or higher	<input type="checkbox"/>

4. Mark the gender for the resident

Male

Female

5. Mark the gender for you

Male

Female

7. Do you expect the resident's total stay in nursing home to be: (Please try to answer to the best of your ability. Select the category closest to your expectations.)

Less than 1 month .....

From 1 to 3 months.....

Greater than 3 months.....

**8. On average, how often do you visit the resident?**

Daily	<input type="checkbox"/>	Two or three times a month	<input type="checkbox"/>
Several times a week	<input type="checkbox"/>	Once a month	<input type="checkbox"/>
Once a week	<input type="checkbox"/>	Few times a year	<input type="checkbox"/>

**9. When you visit the resident, what do you help the resident with?**

**Help with:**

	Always	Sometimes	Never
I. Feeding	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
II. Dressing	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
III. Toileting	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
IV. Grooming (combing hair, cutting nails)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
V. Going to activities	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

**10. What is your relationship to the resident? I am their \_\_\_\_\_**

Spouse.....	<input type="checkbox"/>	Brother/sister.....	<input type="checkbox"/>
Child.....	<input type="checkbox"/>	Friend.....	<input type="checkbox"/>
Grandchild.....	<input type="checkbox"/>	Parent.....	<input type="checkbox"/>
Niece/Nephew.....	<input type="checkbox"/>	Guardian.....	<input type="checkbox"/>
Son/Daughter in law...	<input type="checkbox"/>	Other.....	<input type="checkbox"/>

**11. Do you talk to the following staff?**

	Always	Sometimes	Never
I. Nurse Aides	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
II. Nurses	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
III. Social Workers	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
IV. Physician	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
V. Administrators(s)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
VI. Other	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

**12. How is the resident's nursing home care paid for? (Mark all that apply.)**

Medicare.....	<input type="checkbox"/>
Medicaid.....	<input type="checkbox"/>
Private Pay (entire bill paid by resident, family funds).....	<input type="checkbox"/>
Long Term Care Insurance.....	<input type="checkbox"/>
Other Insurance.....	<input type="checkbox"/>
Don't know.....	<input type="checkbox"/>

**13. Does the resident know the current season?**

Always	Some-times	Never
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

**14. Does the resident recognize you?**

<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
--------------------------	--------------------------	--------------------------

**15. Does the resident know he/she is in a nursing home?**

<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
--------------------------	--------------------------	--------------------------

**16. Where was the resident before being admitted to this nursing home? (Mark only one.)**

Own home.....	<input type="checkbox"/>
Hospital.....	<input type="checkbox"/>
Another nursing home.....	<input type="checkbox"/>
Other.....	<input type="checkbox"/>

17. How much help does the resident need with the activities below? Please check the appropriate box.

**17a. Eating**

- Needs no assistance or supervision from another person.....*
- Needs some assistance or supervision from another person.....*
- Needs a great deal of assistance or supervision from another person .....*
- Resident is totally dependent.....*

**17c. Dressing**

- Needs no assistance or supervision from another person.....*
- Needs some assistance or supervision from another person.....*
- Needs a great deal of assistance or supervision from another person .....*
- Resident is totally dependent.....*

**17b. Going to bathroom**

- Needs no assistance or supervision from another person.....*
- Needs some assistance or supervision from another person.....*
- Needs a great deal of assistance or supervision from another person .....*
- Resident is totally dependent.....*

**17d. Transferring (moving from or to a bed or chair)**

- Needs no assistance or supervision from another person.....*
- Needs some assistance or supervision from another person.....*
- Needs a great deal of assistance or supervision from another person .....*
- Resident is totally dependent.....*

Thank you for your time! Your participation will help others know more about Ohio nursing homes. Please review your survey, making sure no pages were skipped and only one answer was chosen for questions 1-54. Place your completed survey in the business reply envelope and drop into the mail.

**\*\*\* Please do not fold your survey \*\*\***

Return to:

**Scripps Gerontology Center  
Miami University  
Oxford, OH 45056**

## The Ohio Department of Aging Family Satisfaction Survey

About two weeks ago, we sent you a satisfaction survey because you are involved with the care of a resident in a nursing home or sub-acute unit of a hospital in Ohio. **If you have already completed and returned your survey, disregard this notice and thank you for your participation.**

If you have not returned your survey, please complete it and return it in the postage paid envelope addressed to The Scripps Gerontology Center, Miami University, Oxford, OH, 45056.

We need your input so results accurately represent the opinions of families and friends of nursing home residents in Ohio.

If you did not receive the survey, or have misplaced it and wish to request another, please call the Family Satisfaction Survey Toll-Free number at **1- 866-370-1041**

# Ohio Department of Aging



50 West Broad Street/9<sup>th</sup> Floor, Columbus, Ohio 43215-3363  
 (614)466-5500 TTY (614)466-6191 FAX (614)466-5741

Ho's Tall, Governor  
 Merle Grace Kearns, Director

Dear Administrator:

It's time for Ohio's 2006 Nursing Home Family Satisfaction Survey!

As you know, the Ohio Department of Aging has developed a web-based Long-Term Care Consumer Guide ([www.ltc.ohio.org](http://www.ltc.ohio.org)) that provides individuals, family members, and professionals with a wide range of information about nursing homes. The goals of the Ohio Long-Term Care Consumer Guide are to assist individuals in selecting a long-term care provider and to provide facilities consumer feedback to assist in quality improvement. The Guide currently includes: results from prior family and resident satisfaction surveys, Quality Measures, Ohio Department of Health's inspection reports, and information you may have entered on the website about your facility's special care services, staff, bed availability, etc. The Long-Term Care Consumer Guide website receives an average of 10,000 visits a month.

This package contains everything you need to participate in the Family Satisfaction Survey. It includes the survey packets ready to be addressed, the criteria to select the most involved family, friend or interested party in the life of the resident, mailing instructions and reminder postcards. We value any effort you can make to encourage family members—especially those of short-term residents—to complete and return the survey. Beginning July 2007, family satisfaction scores will provide one element of the quality incentive in the new Medicaid reimbursement formula so it is especially important for families to return their surveys.

We appreciate the effort your facility will make to participate in this survey. Remember, we guarantee the complete anonymity of family members' responses. Scripps Gerontology Center, (main contractor) and the Margaret Blenkner Research Institute of Benjamin Rose (subcontractor) conducting the survey, will not know who participated and can only track surveys by the facility name printed on each survey. Results will be displayed in aggregate form only. Our goal is to post the survey results on the website during December 2006. A report providing detailed results about your facility will also be available to you. Should you have questions about the survey process, please call the toll-free Family Satisfaction Survey number, 1-866-370-1041.

I hope that your facility will participate in this survey as mandated by Am. Sub. H.B. 66 of the 126<sup>th</sup> General Assembly. Please make sure you have registered and entered data about your facility on the Guide. If you are already registered, please verify that your information is current. For assistance in registering on the website, contact Erin Pettigrew at [consumerguide@age.state.oh.us](mailto:consumerguide@age.state.oh.us) or (614) 995-0882.

Sincerely,

Merle Grace Kearns  
 Director  
 Ohio Department of Aging

THE OHIO DEPARTMENT OF AGING  
2006 NURSING HOME FAMILY SATISFACTION SURVEY

Your Family Satisfaction Survey package contains the following:

1. Packets with Family Satisfaction Surveys and Business Reply Envelopes inside ready for you to affix \$.87 in postage on each and address to the appropriate number of families from your facility.
2. Follow-up Postcards ready for you to affix \$.24 postage on each and address to the same person to whom you sent the survey.
3. A copy of the Family Satisfaction Survey for your reference.
4. General instructions for sampling families of residents and mailing surveys with a letter from ODA Director Kearns.
5. A list of Frequently Asked Questions and their answers.
6. A pink Survey Audit Form to be completed and returned in the pink Business Reply Envelope to the Scripps Gerontology Center.
7. A pink Business Reply Envelope for you to mail your Survey Audit Form to the Scripps Gerontology Center.

**Important Dates to Remember:**

- |   |  |
|---|--|
| ✓ Survey forms mailed to families:      | No later than July 22, 2006  |
| ✓ Follow-up postcards sent to families: | Two weeks after mailing initial survey                                   |
| ✓ Audit form returned to Scripps:       | Two weeks after follow-up postcards<br>(no later than September 1, 2006) |

PLEASE READ THESE MATERIALS CAREFULLY

*If you have any questions after reading the information in this packet, please call the Ohio Department of Aging Family Satisfaction Survey Toll-Free Number:*

1-866-370-1041

**THANK YOU FOR YOUR PARTICIPATION**

## SURVEY INSTRUCTIONS

### Selecting Survey Recipients:

Please follow these instructions for selecting the names of residents for whom you will identify a family member, friend or other interested party who is “most involved” in the care of the resident. Include all residents in beds licensed as nursing home beds. Do not include residents in other licensed beds (such as adult group home or residential care beds).

1. As soon as you receive your surveys, set aside a day in the following week to mail them out. On the day you are ready to send the surveys, obtain a copy of that day's resident census list. Please check to make sure that the name of each resident in all licensed nursing home beds is included in the census.
2. Review the *Selection Criteria for Person Designated to Respond to the Ohio Nursing Home Family Satisfaction Survey* located on page 6 of this instruction guide.
3. Based on the selection criteria exclude any resident(s) who does not have a ‘most involved’ family member, friend, or interested person by crossing them off the census list. You will now have a list of residents (all of whom have a most involved person) from which you can draw a random sample, described below.
4. Review the following sample size table to determine the approximate total number of family satisfaction surveys that need to be mailed from your facility. This figure is based on the number of residents with family and friends in your facility. *If you have 53 or fewer residents, you will not have to do random sampling. Mail the appropriate number of surveys for your facility choosing only one involved family member friend per resident.*

<i>Number of Residents with a Most Involved Person</i>	<i>Number of Surveys to Mail</i>
53 or fewer residents	One for each resident's family
54-55	53 (use random sampling)
56	55 (use random sampling)
57-58	56 (use random sampling)
59-67	58 (use random sampling)
68-80	60 (use random sampling)
81-86	63 (use random sampling)
87-91	65 (use random sampling)
92-111	68 (use random sampling)
112-134	70 (use random sampling)
135-155	73 (use random sampling)
156-177	75 (use random sampling)
178-238	78 (use random sampling)
239-307	80 (use random sampling)
308 and over	83 (use random sampling)

We made assumptions about the number of survey packets your facility will need. If you do not have enough survey packets please call 1-866-370-1041 and we will mail more to you. If you have extras, please keep them; you may need to select other family members and send new survey packets if any of the surveys you mail are returned to you by the post office as undeliverable.

5. Random Sampling of Residents: Use **ONE** of the following procedures (either Method A **or** Method B) to draw a random sample of residents.
 

**Method A:** Cut apart the resident names in your census list (excluding those without a ‘most involved’ person), place them in a container, and draw names until you have drawn the required number of residents needed for your facility based on the table above.

**Method B:** Give each resident name on your daily census list (excluding those without a ‘most involved’ person) a number, beginning with 1 and proceeding in ascending order. Ask another staff person(s) to

spontaneously choose numbers between 1 and the highest number. Mark the corresponding resident number chosen by your staff on your daily census list. Continue the process until you have marked enough residents needed for your facility based on the table above.

6. Use the "*Selection Criteria for Person Designated to Respond to the Ohio Department of Aging Family Satisfaction Survey*," (page 4) to determine who should receive a survey for each resident chosen. Even though the survey is called the Family Satisfaction Survey, it is very important that you select the family member, friend, guardian, or other interested party who is 'most involved' in the care of the resident by following the criteria.
7. Once you have identified the appropriate person to receive the survey, check your records for up-to-date address information and make a list of the names and addresses of those individuals. **In no case should any family member /guardian receive more than one survey from your facility.** Therefore, if you find that there are residents in your sample who share the same 'most involved' party, send only one survey to that most involved person and randomly select another resident and identify their most involved person in order to reach your quota. Retain the list of families/friends who received surveys.

#### Sending the Survey Packets:

You are now ready to address and mail the individual survey packets to the selected families. Each envelope includes:

- i. Survey form with a cover letter to families from Director Merle Grace Kearns at ODA
- ii. Postage paid return envelope addressed to the Scripps Gerontology Center

8. Affix or meter eighty-seven cents (\$.87) postage on each envelope.

9. Each of the selected family members should receive one of the survey packets. **Please check that the address for the most involved person is up-to-date and that you are not sending a survey to the family of a deceased resident.**

Write the address or affix a label to the envelope.

Address the envelopes this way:

The diagram shows a rectangular envelope with a dashed border. In the top-left corner, there is a box containing the text: "Your facility's address in this window". In the top-right corner, there is a box containing the text: "\$.87". In the center of the envelope, there is the text: "Most Involved Person's Name & Address".

In the event a survey is returned by the post office marked '*undeliverable*' please attempt to locate the respondent's current address and resend the survey. If you need to, repackage the survey materials in a new envelope. If you cannot find a current address, randomly select another resident. **It is important to send or re-send the identified number of surveys for the size of your facility so that there is a valid sample.**

10. Remember to document the number of *returned undeliverable* surveys for which no known address is available on the pink audit form included in your survey kit. **It is critical that you record everything on the audit form correctly.** This is necessary to determine whether the responses for your facility meet the margin of error for the survey.

**Mail all surveys no later than *July 22, 2006.***

### Follow Up Postcard:

11. The follow-up postcard should be addressed to the same person you sent the survey to and addressed in the same manner as the survey envelope. Postage for a postcard is twenty-four cents (\$.24). **Do not mail the postcard at the time you mail the initial survey. The reminder postcards should be mailed two weeks after the surveys are sent.** Do not mail a reminder postcard to a family whose survey was undeliverable.

### Completing the Audit Form:

The audit form will be used to determine whether enough surveys for your facility have been returned for a valid sample. The form **MUST** be completed and returned for your facility to receive valid survey results. Incomplete or unreturned forms will result in an inaccurate response rate for your facility and an increased likelihood that your results will not meet the necessary margin of error.

12. Two weeks after you mail the follow-up postcard, complete the pink audit form. Return the form in the pink Business Reply Envelope addressed to the Scripps Gerontology Center. This audit form is due **no later than September 1, 2006.**

13. **After September 15, 2006, please shred any leftover surveys.**

If families call with questions regarding the survey, please refer to the following "Frequently Asked Questions" to give appropriate responses.

If family members have additional questions that you are not comfortable addressing, please refer them to The Ohio Department of Aging Family Satisfaction Survey Toll Free Number at: **1-866-370-1041 until September 1.** They may call the number any time and leave a message and their call will be returned.

### Selection Criteria for Person Designated to Respond to The Ohio Department of Aging Family Satisfaction Survey

The goal is to select the 'most involved person' in the care of the resident to complete the survey. It is expected that this person will be most knowledgeable about the care provided to the resident in the nursing home and therefore, will be able to evaluate the care and services most effectively.

Since it is important that only one family survey be completed for each nursing home resident, it is critical that the following selection criteria are used to determine who should receive the survey.

**STEP 1: Identify ONE family member, friend, or other interested person who is most involved in the resident's care.** Use one or more of the following criteria for considering extent of involvement with care:

- Visits resident most often
- Talks to staff about the resident's condition
- Participates in resident care planning process
- Attends family council meetings
- Runs errands and takes care of residents' personal needs, etc.

**Using the above listed criteria send the survey to the most involved person.**

**STEP 2:** If there is more than one family member, friend, or other interested person that meets the above criteria:

1<sup>st</sup> Send the survey to the most involved person who is also the legal guardian.

2<sup>nd</sup> If there is no legal guardian AND it's difficult to identify ONE most involved person:

Persons may jointly complete a single survey. Designate one person to receive and return the jointly completed survey.

**STEP 3:** If the resident does not have an involved family member, friend, or other interested person, do not send the survey for that resident. Count the number of residents who do not have an involved family member and note this on the audit form.

**NOTE:** In no case should any guardian or family member receive more than one survey from your facility. Therefore, if you find that there are residents in your sample who share the same 'most involved' party, send only one survey to that most involved and randomly select another resident and identify their most involved person in order to reach your quota.

## Frequently Asked Questions about the Family Satisfaction Survey and the Long-Term Care Consumer Guide ([www.ltcoho.org](http://www.ltcoho.org))

### General questions and answers

**1. *What is the Ohio Long-Term Care Consumer Guide?***

The Ohio Long-Term Care Consumer Guide provides information about nursing homes in Ohio on a website developed and maintained by the Ohio Department of Aging (ODA). Ohio Revised Code Sec. 173.45-173.49, enacted by the Ohio legislature in the most recent state budget bill, H.B. 66 of the 126<sup>th</sup> General Assembly, forms the legal basis for the Guide. For more information about the guide, see [www.ltcoho.org](http://www.ltcoho.org)

**2. *Who funds the Long Term Care Consumer Guide?***

*The Ohio Long Term Care Consumer Guide is funded through the State budget and an annual fee of \$400 from each nursing home and \$300 from each residential care facility. These funds are used to help support the cost of both the resident and family satisfaction surveys.*

**3. *What does the Long-Term Care Consumer Guide include?***

The Long-Term Care Consumer Guide displays information provided by individual nursing facilities, the consumer satisfaction survey results, and inspection reports from the Ohio Department of Health. Information about Medicaid and Medicare, nursing home organizations, and other long-term care options are also provided. Links to existing websites are used to provide additional information about funding and other long-term care options.

**4. *How will ODA get information about nursing facilities?***

Nursing homes provide information about special services, policies, beds and rates and more through a secured access to the site. After registering on the site, nursing facility staff can update information about their facility, provide pictures, and address inspection reports as needed. For registration instructions, email [consumerguide@oda.state.oh.us](mailto:consumerguide@oda.state.oh.us).

Regulatory performance data is provided by the Ohio Department of Health and CMS. Facilities with their own websites also have the opportunity to link to the Consumer Guide website.

**5. *Why should a facility participate in the family satisfaction survey?***

**Consumer Choice:** The Long-Term Care Consumer Guide receives an average of 10,000 visitors each month, evidence that choosing a nursing home is a difficult decision and consumers want more information about their options. The more information people have about every nursing home, the better decisions they can make. Consumers have shared a negative response to data missing from the website. This is likely to impact their impression of a nursing home.

**Quality Improvement:** Nursing homes are provided with the overall scores on satisfaction and may use that information for quality improvement purposes, newsletters, or marketing materials. By participating in the satisfaction surveys and providing other information on the Consumer Guide, a facility can convey commitment to quality and reach out to new customers.

**Legal Requirement:** In the latest state budget bill, H.B. 66 of the 126<sup>th</sup> General Assembly, the Ohio legislature included a requirement that facilities participate in the consumer satisfaction surveys conducted by the Ohio Department of Aging.

**Financial Incentive:** Performance on the consumer satisfaction surveys will be used as a measure of quality in Ohio's new Medicaid reimbursement formula set to start in 2008.

**6. *What is the Scripps Gerontology Center doing?***

Scripps Gerontology Center, located at Miami University in Oxford, Ohio has a contract with the Ohio Department of Aging to conduct the family satisfaction survey. Scripps will scan the completed surveys, compile the results, and provide a summary of responses for every facility.

**7. *Who was responsible for developing and testing the family satisfaction instrument?***

As a subcontractor to the Scripps Gerontology Center at Miami University, the Margaret Blenkner Research Institute of Benjamin Rose in Cleveland, Ohio was responsible for developing and testing the family satisfaction instrument with input from an Advisory Council set up by the Ohio Department of Aging. Family members from diverse nursing homes participated in pretesting the instruments for reliability and validity.

**8. *Who are the members of the LTC Consumer Guide Advisory Council?***

Members include representatives of family members of nursing home residents, representatives from the Office of the Long-Term Care Ombudsman, the Ohio Association of Area Agencies on Aging, representatives from three nursing home trade organizations, the American Association of Retired Persons, and the Ohio Departments of Aging, Health and Job and Family Services.

**9. *How many nursing homes are likely to participate in the family satisfaction survey?***

As participation is required, we anticipate receiving results from all Ohio nursing homes and sub-acute hospital units.

**10. *What will happen if a facility does not participate in the family satisfaction survey?***

The latest state budget bill, H.B. 66 of the 126<sup>th</sup> General Assembly, requires facilities to participate. However, if a facility does not participate in the satisfaction surveys the statement *Refused to Participate* will appear next to a facility's listing on the Consumer Guide.

Performance on the Family Satisfaction Surveys is also part of Ohio's new Medicaid reimbursement formula for nursing homes. A lack of family satisfaction data may negatively impact the amount of reimbursement available to your facility.

**11. *What is the cost to an individual facility to participate in the Family Satisfaction Survey?***

Nursing homes are required by law to pay an annual fee of \$400.00 to the Department of Aging to help cover the cost of the family and resident satisfaction surveys. This fee is subject to Medicaid reimbursement through the Medicaid program pursuant to sections 5111.20 to 5111.32 of the Revised Code.

**12. *How often are these surveys going to be completed?***

The law requires the family surveys and resident surveys to each be completed biannually. A Resident Satisfaction Survey will commence in the summer of 2007 and the next Family Satisfaction Survey will begin in the summer of 2008.

## Questions and answers specifically related to persons participating in the Family Satisfaction Survey:

**1. *Why was my name chosen to participate in the family satisfaction survey?***

Resident names were chosen at random by large nursing homes, and in nursing homes with fewer than 53 beds, every resident's name was selected. For every resident selected, a family member, friend, or other interested person was identified. You were identified by the facility staff as being the most involved person in the care of the resident.

**2. *How did nursing home staff identify me as the appropriate person to receive the family survey? What were the selection criteria for participating in the family satisfaction survey?***

An attempt was made to select one person who was 'most involved' in the care of a nursing home resident. Criteria to define being 'most involved' included identifying the person who visited the resident the most, talked to staff, participated in resident care planning etc. Thus, even though the survey is called the Family Satisfaction Survey, the most involved person could be a family member, a friend, or another interested party. Your name was identified as being the 'most involved' person in the care of the resident.

**3. *What about my privacy?***

The names and addresses of those receiving the survey have not been given to anyone outside the facility. No one outside this nursing home knows who received surveys and follow-up postcards. Nothing on the survey form identifies individuals; the code number on the pages identifies the nursing home where the resident lives. You mail your survey back to the Scripps Gerontology Center to conduct the analyses. They do not know who responded to the survey. When a facility receives the results from the survey they will receive only aggregate data; i.e., data that is averaged for their facility. They will not know individual answers or responses.

**4. *Will facilities get to see the individual answers to the family surveys?***

No, all of the answers are anonymous. Facilities will never get to see individual answers. All answers will be reported in aggregate form using numbers and percentages. That is why objective research institutions have been hired to develop, test and implement the survey. This system protects the anonymity of all the families who are participating in the survey.

**5. *Are residents completing a satisfaction survey?***

Residents will complete a satisfaction survey in summer 2007. The survey was developed and tested by the Scripps Gerontology Center at Miami University, Oxford, Ohio, and The Margaret Blenkner Research Institute of Benjamin Rose with input from the Consumer Guide Advisory Council. The resident survey will be a face-to-face interview (unlike the mailed survey approach that is being used with families) with randomly selected nursing home residents.

**6. *Why is there a number on my survey?***

This number is a facility code that identifies the nursing home in which your resident resides. This information will help the Scripps Gerontology Center track the responses for different facilities. This number does not identify you in any way since Scripps does not know which family members received surveys.

**7. *Why did I receive two surveys?***

If you are involved with residents living in more than one nursing facility, it is possible that you may receive more than one survey. The name of the facility that you should report about is printed on the front of the survey. However, if you are involved with only one resident in a nursing home in Ohio, you may have

received a duplicate survey by mistake. If this is the case, please complete only one survey. Mark "duplicate" on the extra survey and return it in its business reply envelope. If you have more than one relative in a nursing home, you may be asked to complete two surveys for the different nursing homes. **In no case should any guardian or family member complete more than one survey for the same nursing home.**

**8. *Whom should I contact if I have additional questions?***

Please call The Ohio Department of Aging Ohio Family Satisfaction Survey Toll-Free Number at **1-866-370-1041**. The Margaret Blenkner Research Institute of Benjamin Rose in Cleveland, Ohio is staffing the toll-free number. You may call the number any time and leave a message and your call will be returned the next business day. An attempt will be made to handle calls live during regular business hours; however, due to heavy call volume, you may be asked to leave a message.

**Thank you for your participation in the 2006 Ohio Nursing Home Family Satisfaction Survey!**

**2006 FAMILY SATISFACTION SURVEY AUDIT FORM**

**This form MUST be completed and returned for your facility to receive valid survey results.**

1. Name of Facility: \_\_\_\_\_
2. Street Address: \_\_\_\_\_
3. City: \_\_\_\_\_ Zip Code: \_\_\_\_\_
4. ODH License Number: \_\_\_\_\_
5. Telephone: \_\_\_\_\_
6. Facility Website Address: \_\_\_\_\_
7. Name of Person Responsible for Distributing Survey: \_\_\_\_\_
8. Email of Person Responsible for Distributing Survey (if available): \_\_\_\_\_  
\_\_\_\_\_
9. **Total Number of Licensed Nursing Home Beds** in your facility \_\_\_\_\_
10. **Total number of Nursing Home residents** (census) on the day residents were sampled for the survey \_\_\_\_\_
11. **Total number of residents WITHOUT** Involved Family/Friend/Other Interested Party \_\_\_\_\_.
12. **Number of surveys mailed** to Most Involved Family/Friend/Other Interested Party \_\_\_\_\_
13. **Number of** *returned undeliverable* surveys for which no known address is available: \_\_\_\_\_
14. **Date surveys** mailed \_\_\_\_\_

Please complete this form and return it in the enclosed pink Business Reply Envelope or fax to:

**Ohio Family Satisfaction Survey  
Scripps Gerontology Center  
Miami University  
Oxford, OH 45056  
Fax: 513-529-1476**

**This form is due at the Scripps Gerontology Center no later than September 1, 2006.**

## Appendix B. Calculation Rules Document

## Ohio Nursing Home Family Satisfaction Survey Calculation and Reporting Decisions

### FACILITY REPORTS

1. Facility names are to be taken from the audit form data file provided by Scripps. These are updated from name changes provided on returned audit forms and are more up-to-date than the file from ODH.
2. Overall facility satisfaction score is calculated as an average of all item scores. If the facility does not have enough returned surveys to meet the number needed to be within a +/-10% margin of error, no overall satisfaction score is calculated.
3. Statewide facility satisfaction scores are calculated as an average of all overall facility satisfaction scores. Only those facilities that had enough returned surveys are included in the statewide facility satisfaction scores.
4. Number of respondents statewide is the total of all surveys returned.
5. Statewide response rate is the average of each facility's response rate, including those facilities for whom a response rate was calculated without audit information. (See Item 15 below.)
6. Average age of respondent is the average of all reported respondent ages.
7. Average age of resident is the average of all reported resident ages.
8. Race/ethnicity is the proportion of respondents reporting each answer out all those who answered the question, i.e. provided a valid response.
9. Relationship to resident is the proportion of respondents reporting each answer out of all those who answered the question.
10. Gender of respondent is the proportion of respondents reporting each answer out of all those who answered the question.
11. Frequency of visit is the proportion of respondents reporting each answer out of all those who answered the question.
12. Resident's stay is the proportion of respondents reporting each answer out of all those who answered the question.
13. Number of Residents with Family/Friends is based on the audit form; (facility reported census-number of residents without family/friends). If their audit form is not returned, i.e. census is missing, we report "Not Available".

14. Number of Respondents from this facility is the number of returned surveys. There is no standard for how many items must have valid answers to be counted as a returned survey.
15. Facility Response rate is calculated as (number of returned surveys ÷ (number of mailed surveys-returned undeliverable)). There is no existing standard for how many items must have valid answers to be counted as a returned survey. If facilities do not return their audit forms, the calculation is (number of returned surveys ÷ number of surveys provided [SAMPSIZE]). The number of surveys provided is based on a 10% occupancy increase since 2003 and an estimated 40% response rate. We are assuming that they mailed all surveys we provided if they do not report the number of surveys mailed on their audit form.
16. Frequency of visit is the proportion of respondents reporting each answer out of all those who answered the question.
17. Facility met Margin of Error is calculated for the survey as a whole. The number of surveys returned is compared to the number of surveys needed for surveyable populations of different sizes. (The number of residents with family/friends, or the number of licensed beds in the absence of audit data.) A “Yes” or “No” is reported. There is no standard for how many items must have valid answers to be counted as a returned survey.
18. Each item is scored as 1=always, 2 =sometimes, 3=hardly ever 4 =never and 5=DK/Does not apply. Each item (except for laundry) is rescored as Always=100, Sometimes=67, Hardly Ever=33 and Never =0. Laundry Items are reverse scored, i.e. Never =100.
19. A facility’s average for each item is based on the average of those who answered, excluding “don’t know/doesn’t apply to resident”.
20. Facility domain scores are calculated as an average from all respondents who answered at least all but 2 of the items. For example, when a domain has 5 items, respondents must provide a valid answer to at least 3 to be included in the domain calculation. Three respondents must have enough items to calculate a domain score in a facility.
21. Statewide item averages are calculated as an average of all facility averages for that item. All facilities with at least 3 responses on the item are included in the statewide average. There is no requirement that the item had to meet the facility sample size needed to be included in statewide item averages.
22. Statewide domain averages are calculated as an average of all facility averages for that domain. All facilities with a calculated domain score are included in the statewide domain average.

#### ADDITIONAL WEBSITE DATA

23. Statewide highs and lows are taken from facilities that met margin of error. An individual facility that does not meet margin of error may show a score lower or higher than the reported statewide scores.
  
24. Item averages are reported for every item. A “yes” or “no” is returned for each item based on whether enough valid answers were recorded to meet the +/-10% margin of error. The variable COMPNEEF in the syntax file indicates the number of surveys needed for a facility of a particular size.