
CAHPS[®] Clinician & Group Surveys

Supplemental Items for the Child Surveys 1.1

Language: English

Response Scale: 4 points

Notes

- **Supplemental items currently being updated:** The supplemental items for the CAHPS Clinician & Group Surveys are version 1.1. The most notable change between the 1.0 and 1.1 versions of the supplemental items is the updating of question wording from “doctor” to “provider”. The CAHPS Team is in the process of updating the supplemental items to reflect all of the changes made to the 2.0 version of the CAHPS Clinician & Group Survey. The 2.0 version of the supplemental items will be released in 2012.
- **Supplemental items for the Visit Survey:** The supplemental items were originally designed for use with the Clinician & Group 12-Month Survey. Until the 2.0 version of the supplemental items is released in 2012, users who are interested in using supplemental items with the Clinician & Group Visit Survey should contact the CAHPS User Network at cahps1@ahrq.gov or 1-800-492-9261 for free technical assistance.
- **Primary and specialty care:** The supplemental items were previously packaged separately for primary care and specialty care. Since the core survey is the same, many of the supplemental items are applicable for both primary and specialty care. More detailed guidance on the use of supplemental items for primary vs. specialty care is currently being developed.



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Important Instructions

Placing supplemental items in the core questionnaires. This document includes instructions on where to place items in the survey. After you copy one or more supplemental items into the core questionnaire:

- **Fix the formatting** of the items as needed to fit into the two-column format.
- **Renumber** the supplemental item and **ALL** subsequent items so that they are consecutive.
- **Revise ALL skip instructions** in the questionnaire to make sure they point the respondent to the correct item number.

For additional guidance, refer to **Preparing a Questionnaire Using the CAHPS Clinician & Group Surveys**: https://www.cahps.ahrq.gov/~media/Files/Surveys-and-Guidance/CGKit/1032_CG_Preparing_a_Questionnaire.pdf

Chronic Conditions

Children with a chronic condition are identified by a “Yes” response to one of CC2, CC4, CC6, CC8, or CC10.

Insert CC items after core question 45

CC1. Does your child currently need or use medicine prescribed by a provider, other than vitamins?

- ¹ Yes
² No → **If No, go to #CC3**

CC2. Is this medicine for a condition that is expected to last for at least 12 months?

- ¹ Yes
² No

CC3. Does your child need or use more medical care, more mental health services, or more educational services than is usual for most children of the same age?

- ¹ Yes
² No → **If No, go to #CC5**

CC4. Are these services or medical care for a condition that is expected to last for at least 12 months?

- ¹ Yes
² No

CC5. Is your child limited or prevented in any way in his or her ability to do the things most children of the same age can do?

¹ Yes

² No → **If No, go to #CC7**

CC6. Is this because of a condition that is expected to last for at least 12 months?

¹ Yes

² No

CC7. Does your child need or get special therapy, such as physical, occupational, or speech therapy?

¹ Yes

² No → **If No, go to #CC9**

CC8. Is this therapy for a condition that is expected to last for at least 12 months?

¹ Yes

² No

CC9. Does your child have any kind of emotional, developmental, or behavioral problem for which he or she needs or gets treatment or counseling?

¹ Yes

² No → **If No, go to #core question 46**

CC10. Is this treatment or counseling for a condition that is expected to last for at least 12 months?

¹ Yes

² No

Provider Communication With Child

The 1.0 version of the Child Primary Care Questionnaire had additional supplemental items under this heading; those items (DC1, DC2, and DC4) have been incorporated into the 2.0 version of the Clinician & Group Child Questionnaire.

Insert DC3 after core question 7.

DC3. In the last 12 months, how often did this provider encourage **your child** to ask questions?

- ¹ Never
² Sometimes
³ Usually
⁴ Always

Provider Communication With Parent

Insert DP1 after core question 21.

DP1. In the last 12 months, how often did this provider ask if you had any questions about your child's health?

- ¹ Never
² Sometimes
³ Usually
⁴ Always

Provider Thoroughness

Insert DT1 – DT2 before core question 28.

DT1. In the last 12 months, did this provider ever examine your child?

- ¹ Yes
² No → **If No, go to #core question 28**

DT2. In the last 12 months, how often was this provider as thorough as you thought your child needed?

- ¹ Never
² Sometimes
³ Usually
⁴ Always

Identification of Site of Visit

Insert ID1 after core question 1.

ID1. Which health center did your child visit to get care in the last 12 months? Please list one or more.

List names of health centers _____

Patient-Centered Medical Home Item Set

Insert PCMH1 after core question 13.

PCMH1. In the last 12 months, how many days did you usually have to wait for an appointment when your child **needed care right away?**

- ¹ Same day
² 1 day
³ 2 to 3 days
⁴ 4 to 7 days
⁵ More than 7 days

Insert PCMH2 – PCMH4 before core question 16.

PCMH2. Did this provider's office give you information about what to do if your child needed care during evenings, weekends, or holidays?

- ¹ Yes
² No

PCMH3. In the last 12 months, did your child need care during evenings, weekends, or holidays?

- ¹ Yes
² No → **If No, go to #core question 16**

PCMH4. In the last 12 months, how often were you able to get the care your child needed from this provider's office during evenings, weekends, or holidays?

- ¹ Never
² Sometimes
³ Usually
⁴ Always

Insert PCMH5 before core question 20.

PCMH5. Some offices remind patients between visits about tests, treatment, or appointments. In the last 12 months, did you get any reminders about your child's care from this provider's office between visits?

- ¹ Yes
² No

Insert PCMH6 – PCMH7 after core question 30 and add the instruction noted below before core question 31.

PCMH6. Specialists are doctors like surgeons, heart doctors, allergy doctors, skin doctors, and other doctors who specialize in one area of health care. In the last 12 months, did your child see a specialist for a particular health problem?

- ¹ Yes
² No → **If No, go to # core question 38**

PCMH7. In the last 12 months, how often did the provider named in Question 1 seem informed and up-to-date about the care your child got from specialists?

- ¹ Never
² Sometimes
³ Usually
⁴ Always

Please answer these questions about the provider named in Question 1 of this survey.

Insert PCMH8 – PCMH11 after core question 41

PCMH8. In the last 12 months, did anyone in this provider's office talk with you about specific goals for your child's health?

¹ Yes

² No

PCMH9. In the last 12 months, did anyone in this provider's office ask you if there are things that make it hard for you to take care of your child's health?

¹ Yes

² No

PCMH10. In the last 12 months, did your child take any prescription medicine?

¹ Yes

² No → **If No, go to #core question 42**

PCMH11. In the last 12 months, did you and anyone in this provider's office talk at each visit about all the prescription medicines your child was taking?

¹ Yes

² No

Prescription Medicines

Insert PM1 after core question 27.

PM1. In the last 12 months, did this provider talk with you about all of the prescription medicines your child was taking?

¹ Yes

² No

Shared Decisionmaking

Shared decisionmaking items were updated during the development of the PCMH Item Set. Current research indicates that shared decisionmaking is best measured when asking about a specific decision. Thus, starting or stopping a medication and talking about a procedure were selected. However, testing confirmed that it is difficult to obtain an adequate sample based on the frequency of these occurring in the general pediatric population.

Insert SD1 – SD4 and/or SD5 – SD8 before core question 30.

SD1. In the last 12 months, did you and this provider talk about starting or stopping a prescription medicine for your child?

¹ Yes

² No → **If No, go to #SD5 or core question 30 if SD5 – SD 8 are not included**

SD2. When you talked about starting or stopping a prescription medicine for your child, how much did this provider talk about the reasons you might want your child to take a medicine?

¹ Not at all

² A little

³ Some

⁴ A lot

SD3. When you talked about starting or stopping a prescription medicine for your child, how much did this provider talk with you about the reasons you might **not** want your child to take a medicine?

¹ Not at all

² A little

³ Some

⁴ A lot

SD4. When you talked about starting or stopping a prescription medicine for your child, did this provider ask what you thought was best for your child?

¹ Yes

² No

SD5. In the last 12 months, did you and this provider talk about your child having surgery or any type of procedure?

¹ Yes

² No → **If No, go to #core question 30**

SD6. How much did this provider talk about the reasons you might want your child to have the surgery or procedure?

¹ Not at all

² A little

³ Some

⁴ A lot

SD7. How much did this provider talk about the reasons you might **not** want your child to have the surgery or procedure?

¹ Not at all

² A little

³ Some

⁴ A lot

SD8. When you and this provider talked about your child having surgery or a procedure, did this provider ask you what you thought was best for your child?

¹ Yes

² No