



Hawaii Medical Home Implementation Project  
 C/o Department of Pediatrics  
 1319 Punahou Street, Seventh Floor  
 Honolulu, Hawaii 96826  
 Tel 808.983.8196

**EVALUATION: Medical Home Family Stories Video & Companion Materials**

Greetings! Many thanks for completing the evaluation of this 15 minute Medical Home Family Story to assist us in strengthening our future efforts.

**A. Demographics**

1. Area of life experience:

- Family of Child with Special Needs       Physician  
 Community Agency                                       Medical Resident  
 Other \_\_\_\_\_

2. Gender:     Female                                       Male

3. Date: \_\_\_\_\_ Location: \_\_\_\_\_

4. Experience with Medical Home: How familiar were you with the concept of Medical Home before discussing this video and companion materials?

- Not at all                                       Somewhat                                       Advanced

**B. Medical Home Family Story viewed:**

- Bernadette’s Story     Kaiyah’s Story     Bryan’s Story

SA = strongly agree, A= agree, D = disagree, SD = strongly disagree

**C. Intent of video**

	SA	A	D	SD
1. This <u>video and companion materials</u> significantly enhanced my understanding of the Medical Home concept.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
2. The <u>facilitated discussion</u> centering on this video and companion materials significantly enhanced my understanding of the Medical Home concept.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
3. I was <u>excited and motivated by the ideas</u> presented in this video and/or discussion.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
4. I would <u>like to see other videos</u> similar to this.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
5. I <u>didn’t learn anything</u> from this video and/or facilitated discussion.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
6. Focusing on a specific family’s real story or “case” is a <u>powerful way to learn</u> more about how to operationalize Medical Homes.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

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SA = strongly agree, A= agree, D = disagree, SD = strongly disagree

- |   | SA                       | A                        | D                        | SD                       |
|---|--------------------------|--------------------------|--------------------------|--------------------------|
| 7. The video will be helpful in discussions to raise significant issues in trainings for <u>families</u> .  | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 8. The video will be helpful in discussions to raise significant issues in trainings for <u>pediatric residents and community pediatricians</u> . | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 9. The video will be helpful in discussions to raise significant issues in trainings for <u>community partners</u> .                              | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 10. This family's story was presented in <u>a compelling way</u> .  | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 11. Scenes in the video were presented at <u>the right pace</u> .   | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 12. The <u>technical quality</u> of the video, audio, graphics, and music contributed to the effectiveness of the video.                          | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 13. I would <u>recommend this video</u> to a colleague or friend.   | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 14. I can see ways to <u>use this material in facilitated discussions to expand implementation</u> of Medical Homes in my community/state.        | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 15. Please suggest aspects of the video, companion materials, and/or the facilitated discussion that need improvement.                            |                          |                          |                          |                          |

16. Other Comments:

***Mahalo for completing this survey!***

For questions, additional information, or feedback, contact: Sharon Taba, MEd, Project Director  
Hawaii Medical Home Implementation Project, 1319 Punahou, 7<sup>th</sup> floor, Honolulu, HI 96826  
Tel: 808.983.8196 E-mail: <sharontab@kapiolani.org>