

## QUALITY OF END-OF-LIFE CARE (QEOLC-10): COMMON SOLUTION FAMILY MEMBERS

In this questionnaire, we are interested in the care your family member or friend has received from his or her clinician.

Please rate this clinician on each of the following questions using a scale from 0 (“Poor”) to 10 (“Absolutely Perfect”). The middle of the scale with the value of “5” indicates “Very Good.”

Circle ONE number for each question. If you are unable to rate this clinician on a question or if a question does not apply to your family member or friend, circle the letters “NA” to indicate that this question does not apply.

Rate your family member or friend’s clinician on each of the following: *(Please circle one number for each question.)*

	Poor		Very Good						Absolutely Perfect		Does Not Apply	
	0	1	2	3	4	5	6	7	8	9	10	NA
1. Talks to your family member or friend in an honest and straightforward way...	0	1	2	3	4	5	6	7	8	9	10	NA
2. Responsive to your family member or friend’s emotional needs...	0	1	2	3	4	5	6	7	8	9	10	NA
3. Helps you and your family member or friend get consistent information from the entire healthcare team...	0	1	2	3	4	5	6	7	8	9	10	NA
4. Takes into account your family member or friend’s wishes when treating pain and symptoms...	0	1	2	3	4	5	6	7	8	9	10	NA
5. Admits when he/she (the clinician) doesn’t know something...	0	1	2	3	4	5	6	7	8	9	10	NA
6. Treats the whole person, not just the disease...	0	1	2	3	4	5	6	7	8	9	10	NA
7. Knowledgeable about the care your family member or friend needs during the dying process...	0	1	2	3	4	5	6	7	8	9	10	NA

8. Openly and willingly communicates with you	0	1	2	3	4	5	6	7	8	9	10	NA
9. Acknowledges and respects your family member or friend's personal beliefs...	0	1	2	3	4	5	6	7	8	9	10	NA
10. Makes your family member or friend feel confident that he/she will not be abandoned prior to death...	0	1	2	3	4	5	6	7	8	9	10	NA

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