**TABLE 1: OVERALL EXPERIENCE**

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| Was there anything about the questions that did not make sense? | Were the instructions easy to follow? |
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**TABLE 2. OUTCOMES**

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| --- | --- | --- | --- | --- |
| Statement | | Are the statements meaningful choices?  YES OR NO | Are the statements different choices? YES OR NO | Comments |
| 1 | The child is in a school for children with special needs. |  |  |  |
| The child gets good grades in school. |
| The child is able to stay in school all day with no problems. |
| The child gets an IEP. |
| 2 | The child is able to keep friends for a long time. |  |  |  |
| Family supports the caregiver's treatment decisions. |
| Friends going through the same thing support the caregiver. |
| The caregiver is able to bring the child to social events. |
| 3 | The child is able to manage healthcare decisions in the future. |  |  |  |
| The child is able to live on his/her own as an adult. |
| The child is able to manage his/her money as an adult. |
| The child is able to hold a paying job as an adult. |
| 4 | The child is not behaving in ways that could hurt him/her. |  |  |  |
| The child is not behaving in ways that can hurt other children. |
| The child is not a risk to the safety of siblings at home. |
| Caregiver is able to bring the child to social events. |

**Table 3. COMMENTS**

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| When making your decision did you consider only one item? Two items? All of the items? |
|  |
| Any additional comments that could help us improve the experience with the survey? |
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