

Assisted living resident survey

Please do not write your name. There are no right or wrong answers. If the print is hard to read, ask a volunteer to read the questions to you.

Wing or floor

Date

For each statement, tick one box from 1 (strongly disagree) to 5 (strongly agree).

STATEMENT	STRONGLY DISAGREE				STRONGLY AGREE
1 When I ask for help, it comes in good time.	☐ 1	☐ 2	☐ 3	☐ 4	☐ 5
2 The aides and nurses are kind and patient with me.	☐ 1	☐ 2	☐ 3	☐ 4	☐ 5
3 I get the help I need to bathe, dress and get around.	☐ 1	☐ 2	☐ 3	☐ 4	☐ 5
4 I enjoy the meals here.	☐ 1	☐ 2	☐ 3	☐ 4	☐ 5
5 I can find an activity here that suits me most days.	☐ 1	☐ 2	☐ 3	☐ 4	☐ 5
6 I choose when I get up, eat and go to bed.	☐ 1	☐ 2	☐ 3	☐ 4	☐ 5
7 I feel safe in my room and around the building.	☐ 1	☐ 2	☐ 3	☐ 4	☐ 5
8 My room and the shared spaces are kept clean.	☐ 1	☐ 2	☐ 3	☐ 4	☐ 5
9 If I raise a problem here, it gets sorted out.	☐ 1	☐ 2	☐ 3	☐ 4	☐ 5
10 I would recommend living here to a friend.	☐ 1	☐ 2	☐ 3	☐ 4	☐ 5
11 How often do you join in the activities here?	☐ Most days ☐ A few times a week ☐ About once a week ☐ Rarely ☐ Never				

12 What is one thing that would make living here better for you?

Thank you. Your answers are anonymous.

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Optional questions (1 of 3)

Add any of these to the core questions. Keep the numbering running on from page one.

Activities, outings and weekends

STATEMENT	STRONGLY DISAGREE				STRONGLY AGREE
13 I hear about activities in time to plan for them.	1	2	3	4	5
14 Weekends here feel as full as weekdays.	1	2	3	4	5
15 I get out on trips as often as I would like.	1	2	3	4	5
16 Which of these would you join if they were offered? (tick all that apply)					
☐ Music ☐ Exercise ☐ Games ☐ Outings ☐ Faith services ☐ Gardening ☐ Crafts ☐ Talks					
17 What stops you joining in more often? (tick all that apply)					
☐ Wrong times ☐ Not my interests ☐ Pain or tiredness ☐ Hard to hear or see ☐ Not told in time ☐ Nothing					
18 When would you most like more to do?					
☐ Mornings ☐ Afternoons ☐ Evenings ☐ Weekends ☐ I have enough to do					

Care, home and dining

STATEMENT	STRONGLY DISAGREE				STRONGLY AGREE
19 My medicines arrive at the right times.	1	2	3	4	5
20 At night, how long does help take after you call?					
☐ Under 5 minutes ☐ 5 to 15 minutes ☐ Over 15 minutes ☐ I have not called					
STATEMENT	STRONGLY DISAGREE				STRONGLY AGREE
21 The aides know how I like things done.	1	2	3	4	5
22 My apartment feels like my own home.	1	2	3	4	5
23 I have a say in what goes on the menu.	1	2	3	4	5

Thank you. Your answers are anonymous.

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Optional questions (2 of 3)

Add any of these to the core questions. Keep the numbering running on from page one.

Family members answer these

24 How often do you visit or call your relative?

☐ Several times a week ☐ About once a week ☐ A few times a month ☐ Monthly or less

STATEMENT	STRONGLY DISAGREE				STRONGLY AGREE
25 Staff greet me warmly when I visit.	1	2	3	4	5
26 I hear quickly when my relative's health changes.	1	2	3	4	5
27 On my visits, my relative is often doing something.	1	2	3	4	5
28 I know what activities are planned each week.	1	2	3	4	5
29 Activities here suit my relative's interests.	1	2	3	4	5
30 I would recommend this community to another family.	1	2	3	4	5

31 What would you like to see your relative doing more of?

Memory care: a short interview

32 Are the people who help you kind to you?

☐ Most of the time ☐ Sometimes ☐ Hardly ever

33 Is the food good here?

☐ Most of the time ☐ Sometimes ☐ Hardly ever

34 Is there something fun to do most days?

☐ Most of the time ☐ Sometimes ☐ Hardly ever

35 When you ask for help, does someone come?

☐ Most of the time ☐ Sometimes ☐ Hardly ever

Optional questions (3 of 3)

Add any of these to the core questions. Keep the numbering running on from page one.

Memory care: a short interview (continued)

36 Are you happy living here?

- ☐ Most of the time ☐ Sometimes ☐ Hardly ever
-

About you (optional)

37 How long have you lived here?

- ☐ Under 6 months ☐ 6 to 12 months ☐ 1 to 3 years ☐ Over 3 years
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38 Who filled in this survey?

- ☐ I did, on my own ☐ I did, with help to read or write ☐ Someone answered for me
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Thank you. Your answers are anonymous.

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