

QOL-LTCF

interRAI™ Self-Reported Quality of Life Survey for Long-Term Care Facilities (Nursing Homes)

Interviewer Version

Date of Interview:

[][][][] [][] [][]
Year Month Day

Interviewer ID: _____

Organization ID:

Person ID: _____

This survey has a variety of items about your quality of life. It also deals with how well
_____ [name of program] is providing services to you. The main
focus of this survey is to learn what life is like for you personally.

*I will read you a variety of statements about your experience here and would like you to respond with
how often that statement is true for you. There are no right or wrong answers.*

Note to interviewers: USE THESE CODES AS NECESSARY.

6 don't know

7 refused

8 no response or cannot be coded from response (write down what is said)

A. Privacy

First, I'd like to talk with you about privacy.

For each statement, please answer with one of the following choices:

0 Never **1** Rarely **2** Sometimes **3** Most of the time **4** Always

_____ A1. I can be alone when I wish.

----- A2. My privacy is respected when people care for me.

B. Food and Meals

The items that follow are about food.

For each statement, please answer with one of the following choices:

0 Never **1** Rarely **2** Sometimes **3** Most of the time **4** Always

----- B1. I get my *favorite* foods here.

----- B2. I can eat when I want.

----- B3. I have enough variety in my meals.

----- B4. I enjoy mealtimes.

----- B5. Food is the right temperature when I get to eat it.

C. Safety and Security

Now let's talk about safety.

For each statement, please answer with one of the following choices:

0 Never **1** Rarely **2** Sometimes **3** Most of the time **4** Always

----- C1. If I need help right away, I can get it.

----- C2. I feel my possessions are secure.

----- C3. I feel safe when I am alone.

D. Comfort

The items that follow focus on your life here.

For each statement, please answer with one of the following choices:

0 Never **1** Rarely **2** Sometimes **3** Most of the time **4** Always

----- D1. I get the services I need.

----- D2. I would recommend this site or organization to others.

----- D3. This place feels like home to me.

----- D4. I can easily go outdoors if I want.

----- D5. I am bothered by the noise here.

E. Daily Decisions (Autonomy)

For each statement, please answer with one of the following choices:

0 Never **1** Rarely **2** Sometimes **3** Most of the time **4** Always

- _____ E1. I can have a bath or shower as often as I want.
- _____ E2. I decide when to get up.
- _____ E3. I decide when to go to bed.
- _____ E4. I can go where I want on the “spur of the moment.”
- _____ E5. I control who comes into my room.
- _____ E6. I decide which clothes to wear.
- _____ E7. I decide how to spend my time.

F. Respect by Staff

Now I’d like to discuss how you feel about staff here. [Refers to F, G, and H.]

For each statement, please answer with one of the following choices:

0 Never **1** Rarely **2** Sometimes **3** Most of the time **4** Always

- _____ F1. I am treated with respect by staff.
- _____ F2. Staff pay attention to me.
- _____ F3. I can express my opinion without fear of consequences.
- _____ F4. Staff respect what I like and dislike.

G. Staff Responsiveness

For each statement, please answer with one of the following choices:

0 Never **1** Rarely **2** Sometimes **3** Most of the time **4** Always

- _____ G1. The care and support I get help me live my life the way I want.
- _____ G2. Staff respond quickly when I ask for assistance.
- _____ G3. _____ [this site] staff respond to my suggestions.
- _____ G4. I get the health services I need.
- _____ G5. Staff have enough time for me.
- _____ G6. Staff know what they are doing.
- _____ G7. My services are delivered when I want them.

H. Staff-Resident Bonding

For each statement, please answer with one of the following choices:

0 Never **1** Rarely **2** Sometimes **3** Most of the time **4** Always

- _____ H1. Some of the staff know the story of my life.
- _____ H2. I consider a staff member my friend.
- _____ H3. I have a special relationship with a staff member.
- _____ H4. Staff take the time to have a friendly conversation with me.
- _____ H5. Staff ask how my needs can be met.
- _____ H6. I have the same nurse assistant on most weekdays.

I. Activities

Now let's look at how you feel about activities.

For each statement, please answer with one of the following choices:

0 Never **1** Rarely **2** Sometimes **3** Most of the time **4** Always

- _____ I1. I have enjoyable things to do here on weekends.
- _____ I2. I have enjoyable things to do here in the evenings.
- _____ I3. I participate in meaningful activities.
- _____ I4. If I want, I can participate in religious activities that have meaning to me.
- _____ I5. I have opportunities to spend time with other like-minded residents.
- _____ I6. I have the opportunity to explore new skills and interests.

J. Personal Relationships

Next, we will talk about your relationships with others.

For each statement, please answer with one of the following choices:

0 Never **1** Rarely **2** Sometimes **3** Most of the time **4** Always

- _____ J1. Another resident here is my close friend.
- _____ J2. People ask for my help or advice.
- _____ J3. I have opportunities for affection or romance.
- _____ J4. It is easy to make friends here.
- _____ J5. I have people who want to do things together with me.

K. Other

Finally, we'd like to know a little more about you. Remember, all this information is completely confidential. Circle the response that reflects your answer.

K1. I am part of a couple.

0 No **1** Yes

K2. My gender is . . .

1 Male **2** Female **3** Other

K3. My age in years is . . .

1 Under 45 **2** 45 to 64 **3** 65 to 74 **4** 75 to 84 **5** 85 or more

K4. My health is . . .

0 Excellent or good **1** Fair or poor

K5. I have lived at _____ [this site / this organization] for . . .

0 Less than one year 1 One year to two years 2 More than two years

L. Comments

Do you have any additional comments you'd like to share?

[illegible]

Thank you for your participation.