



8. How much school did you complete? (check one)

- 1)\_\_\_Less than 6th grade
- 2)\_\_\_Less than high school graduate
- 3)\_\_\_High school graduate
- 4)\_\_\_Less than college graduate
- 5)\_\_\_College graduate
- 6)\_\_\_More than college graduate

9. Which of the following **best** describes your residence? (check one)

- 1)\_\_\_Own house/condominium
- 2)\_\_\_Rent house/apartment/senior housing
- 3)\_\_\_Live with someone in their house
- 4)\_\_\_Retirement hotel
- 5)\_\_\_Board and care
- 6)\_\_\_Other (specify:\_\_\_\_\_)

10. With whom do you live? (check one)

- 1)\_\_\_Alone
- 2)\_\_\_With spouse or partner
- 3)\_\_\_With child or other family
- 4)\_\_\_With other/s, not family
- 5)\_\_\_Other (specify:\_\_\_\_\_)

11. Are you **currently** (check one)

- 1)\_\_\_Married
- 2)\_\_\_Divorced/Separated
- 3)\_\_\_Widowed
- 4)\_\_\_Single/Never married

12. During the **past 12 months**, have you fallen all the way **to the ground or fallen and hit something like a chair or stair**?
- 1)\_\_\_ No. If no, go to question 13.
- 2)\_\_\_ Yes. If yes, please answer the following 3 questions.
- a) During the **past 12 months**, have you had 4 or more falls?
- 1)\_\_\_ Yes
- 2)\_\_\_ No
- b) Did you lose consciousness or black out with any of the falls?
- 1)\_\_\_ Yes
- 2)\_\_\_ No
- c) During any of these falls, did you lie on the ground for five or more minutes before you were able to get up?
- 1)\_\_\_ Yes
- 2)\_\_\_ No
13. During the **past 12 months**, have you ever lost your urine and gotten wet?
- 1)\_\_\_No
- 2)\_\_\_Yes If yes, have you lost urine on at least six separate days?
- a)\_\_\_Yes
- b)\_\_\_No
14. During the past four weeks, have you often felt sad or depressed?
- 1)\_\_\_Yes
- 2)\_\_\_No

We would like to know how **difficult** it was for you to do each of the following physical and social activities, on average, **during the past four weeks**. By difficult, we mean how much **physical effort** it took to do the activity **because of your health**.

15. During the past four weeks, how much physical difficulty did you have taking care of yourself, that is, eating, dressing and bathing?

- 1)\_\_\_Usually did with no difficulty
- 2)\_\_\_Usually did with some difficulty
- 3)\_\_\_Usually did with much difficulty
- 4)\_\_\_Usually did not do **because of health**
- 5)\_\_\_Usually did not do **for other reasons**

16. During the past four weeks, how much physical difficulty did you have moving in and out of a bed or chair?

- 1)\_\_\_Usually did with no difficulty
- 2)\_\_\_Usually did with some difficulty
- 3)\_\_\_Usually did with much difficulty
- 4)\_\_\_Usually did not do **because of health**
- 5)\_\_\_Usually did not do **for other reasons**

17. During the past four weeks, how much physical difficulty did you have walking **several** blocks?

- 1)\_\_\_Usually did with no difficulty
- 2)\_\_\_Usually did with some difficulty
- 3)\_\_\_Usually did with much difficulty
- 4)\_\_\_Usually did not do **because of health**
- 5)\_\_\_Usually did not do **for other reasons**

18. During the past four weeks, how much physical difficulty did you have walking **one** block or climbing **one** flight of stairs?
- 1)\_\_\_Usually did with no difficulty
  - 2)\_\_\_Usually did with some difficulty
  - 3)\_\_\_Usually did with much difficulty
  - 4)\_\_\_Usually did not do **because of health**
  - 5)\_\_\_Usually did not do **for other reasons**
19. During the past four weeks, how much physical difficulty did you have walking indoors, such as around your home?
- 1)\_\_\_Usually did with no difficulty
  - 2)\_\_\_Usually did with some difficulty
  - 3)\_\_\_Usually did with much difficulty
  - 4)\_\_\_Usually did not do **because of health**
  - 5)\_\_\_Usually did not do **for other reasons**
20. During the past four weeks, how much physical difficulty did you have doing work around the house such as cleaning, light yard work or home maintenance?
- 1)\_\_\_Usually did with no difficulty
  - 2)\_\_\_Usually did with some difficulty
  - 3)\_\_\_Usually did with much difficulty
  - 4)\_\_\_Usually did not do **because of health**
  - 5)\_\_\_Usually did not do **for other reasons**
21. During the past four weeks, how much physical difficulty did you have doing errands such as grocery shopping?
- 1)\_\_\_Usually did with no difficulty
  - 2)\_\_\_Usually did with some difficulty
  - 3)\_\_\_Usually did with much difficulty
  - 4)\_\_\_Usually did not do **because of health**
  - 5)\_\_\_Usually did not do **for other reasons**

22. During the past four weeks, how much physical difficulty did you have driving a car or using public transportation?
- 1)\_\_\_Usually did with no difficulty
  - 2)\_\_\_Usually did with some difficulty
  - 3)\_\_\_Usually did with much difficulty
  - 4)\_\_\_Usually did not do **because of health**
  - 5)\_\_\_Usually did not do **for other reasons**
23. During the past four weeks, how much physical difficulty did you have visiting with relatives or friends?
- 1)\_\_\_Usually did with no difficulty
  - 2)\_\_\_Usually did with some difficulty
  - 3)\_\_\_Usually did with much difficulty
  - 4)\_\_\_Usually did not do **because of health**
  - 5)\_\_\_Usually did not do **for other reasons**
24. During the past four weeks, how much physical difficulty did you have participating in community activities, such as religious services, social activities or volunteer work?
- 1)\_\_\_Usually did with no difficulty
  - 2)\_\_\_Usually did with some difficulty
  - 3)\_\_\_Usually did with much difficulty
  - 4)\_\_\_Usually did not do **because of health**
  - 5)\_\_\_Usually did not do **for other reasons**
25. During the past four weeks, how much physical difficulty did you have taking care of other people such as family members?
- 1)\_\_\_Usually did with no difficulty
  - 2)\_\_\_Usually did with some difficulty
  - 3)\_\_\_Usually did with much difficulty
  - 4)\_\_\_Usually did not do **because of health**
  - 5)\_\_\_Usually did not do **for other reasons**

26. During the past four weeks, how much physical difficulty did you have doing vigorous activities, such as running, lifting heavy objects or participating in strenuous sports?
- 1)\_\_\_Usually did with no difficulty
  - 2)\_\_\_Usually did with some difficulty
  - 3)\_\_\_Usually did with much difficulty
  - 4)\_\_\_Usually did not do **because of health**
  - 5)\_\_\_Usually did not do **for other reasons**
27. How many **prescription** medications do you take **regularly** at this time?
- \_\_\_\_\_ prescription medications
28. Do you belong to an HMO such as Kaiser, FHP or Secure Horizons?
- 1)\_\_\_ Yes
  - 2)\_\_\_ No
29. During the **past four weeks**, did you use any of the following services? (check **all** that apply)
- 1)\_\_\_Help with transportation like taxi vouchers or senior van
  - 2)\_\_\_Homemaker or paid help with chores
  - 3)\_\_\_Help with bathing or dressing
  - 4)\_\_\_Visiting nurse
  - 5)\_\_\_Physical or occupational therapist
  - 6)\_\_\_Psychiatrist or psychologist
  - 7)\_\_\_Social worker
  - 8)\_\_\_Meals-On-Wheels
  - 9)\_\_\_Senior meal site
  - 10)\_\_\_Other (specify:\_\_\_\_\_)

Thank you for completing this form. You will be contacted by someone from Project Safety Net for follow-up, but **only if indicated**.

FOR OFFICE USE ONLY

Data Entry ID \_\_\_\_\_

SUBJECT ID# \_\_\_\_\_

Data Entry Date: \_\_\_/\_\_\_/\_\_\_/  
mo dy yr

SCREENER DATE: \_\_\_/\_\_\_/\_\_\_/  
mo dy yr

Site (check site number)

- 1) \_\_\_ Armenian Church
- 2) \_\_\_ Fuller HUD
- 3) \_\_\_ Beth Am Apartments
- 4) \_\_\_ Betty Hill Rec. Ctr.
- 5) \_\_\_ Beverlywood Sr. Ctr.
- 6) \_\_\_ Melrose Sr. Ctr.
- 7) \_\_\_ Claude Pepper Ctr.
- 8) \_\_\_ David S. Cunningham, MPC
- 9) \_\_\_ DST Life Development Ctr.
- 10) \_\_\_ Fairfax Towers
- 11) \_\_\_ Felicia Mahood Sr. Ctr.
- 12) \_\_\_ 1st Presbyterian of Hollyw'd
- 13) \_\_\_ Freda Mohr
- 14) \_\_\_ Gardner/W. Wilshire Rec. Ctr.
- 15) \_\_\_ Culver City Sr. Ctr.
- 16) \_\_\_ Hollywood MPC
- 17) \_\_\_ Werle Building
- 18) \_\_\_ Independent Square
- 19) \_\_\_ Israel Levin Sr. Ctr.
- 20) \_\_\_ Jessie Terry Manor
- 21) \_\_\_ Kings Road
- 22) \_\_\_ Las Palmas Sr. Ctr.
- 23) \_\_\_ Shalom Retirement
- 24) \_\_\_ Mar Vista
- 25) \_\_\_ Pico Robertson
- 26) \_\_\_ Oakwood Rec. Ctr.
- 27) \_\_\_ Ohev Shalom
- 28) \_\_\_ 1156 S. Clark Drive
- 29) \_\_\_ Palms Apartments
- 30) \_\_\_ Penmar Rec. Ctr.
- 31) \_\_\_ Pico Youth Building
- 32) \_\_\_ Plummer Park
- 33) \_\_\_ Westside HUD Apartments
- 34) \_\_\_ Lincoln Park
- 35) \_\_\_ Hollywood Fountain Sr. Ctr.
- 36) \_\_\_ Temple Beth Am
- 37) \_\_\_ Sr. Citizen MPC
- 38) \_\_\_ Roxbury Park
- 39) \_\_\_ Westminster Sr. Ctr.
- 40) \_\_\_ Westside Jewish Comm. Ctr.
- 41) \_\_\_ Westchester Community Ctr.
- 42) \_\_\_ Nat'l Council of Jewish Women
- 43) \_\_\_ Santa Monica Rec. Ctr.
- 44) \_\_\_ Wooster HUD
- 45) \_\_\_ Westwood Horizons
- 46) \_\_\_ OASIS Wilshire
- 47) \_\_\_ OASIS Crenshaw
- 48) \_\_\_ Virginia Park
- 49) \_\_\_ Ken Edwards
- 50) \_\_\_ Cheviot Hills Rec. Ctr.
- 51) \_\_\_ AMIT
- 52) \_\_\_ Kipling Hotel
- 53) \_\_\_ Pico/Arlington Church
- 54) \_\_\_ 1st Baptist Church
- 55) \_\_\_ Blessed Sacrament Meal Site
- 56) \_\_\_ Joan of Arc
- 57) \_\_\_ Retired Public Employees #58
- 58) \_\_\_ Park La Brea
- 59) \_\_\_ S.M. Emeritus College
- 60) \_\_\_ McDonald/Douglas Retirees
- 61) \_\_\_ Retired Teachers
- 62) \_\_\_ Misc.
- 63) \_\_\_ Wilshire Blvd. Sr. Ctr.
- 64) \_\_\_ Trinity Episcopal Church
- 65) \_\_\_ St. Barnabas
- 66) \_\_\_ Inglewood Sr. Ctr.
- 67) \_\_\_ LaFayette Sr. Ctr.
- 68) \_\_\_ Precious Blood Church
- 69) \_\_\_ AARP #58
- 70) \_\_\_ Mount Hollywood
- 71) \_\_\_ Jim Gilliam Rec. Ctr.
- 72) \_\_\_ Rainbow Project
- 73) \_\_\_ Crenshaw Sr. Ctr.
- 74) \_\_\_ Crescent HUD
- 75) \_\_\_ Vineyard
- 76) \_\_\_ Retired Fed. Employees #175
- 77) \_\_\_ Taylor Seniors
- 78) \_\_\_ N. Hollywood Sr. Ctr.
- 79) \_\_\_ Ocean Avenue
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- 99) \_\_\_ Other: specify: