Appendix A

Consumer Satisfaction with Aging & Disability Resource Connection Round 4

Note: Not all directions for interviewers and codes for those not participating in the survey are included in this Appendix. Please contact Diana White (dwhi@pdx.edu) for this information.

Project: ADRC_14

Final Survey Script

NTRO2

I'm calling because you or a family member contacted the Aging & Disability Services, also known as the ADRC, during the past 2 months. We're conducting a brief survey about your experiences and opinions with the program. It is very important for us to understand what is working well and how to improve the ADRC. Would now be a good time to talk?

SECTION1

Great, this survey will take about 15 to 20 minutes to complete. Your answers will be kept completely confidential. Your participation is voluntary and will not affect your services or your relationship with the ADRC. You can stop at any time and skip any item you don't want to answer. I would like to begin by asking about your first experience with the ADRC.

Q1			
DO NOT READ OPTIONS			
How did you first learn about the ADRC?			
Choices			
Family	01		
Friend	02		
Hospital/clinic/doctor/nurse	03		
Nursing home/assisted living	04		
Phone book	05		
Recommendation/word of mouth	06		
Brochure/flyer	07		
Media/newspaper/TV/radio	08		
Referral from another agency	09		
Internet	10		
Other (please specify)	11	0	
Don't Know	88		
Refused	99		

READ OPTIONS ONLY IF NEEDED

How did you first come in contact with the ADRC?

IWR Note: If R has only contacted the ADRC through the website, and has had no further contact with anyone from ADRC, you can 'Quit' the survey and code the call as a 'Suspend without callback." Please be sure to describe the situation in the call notes.

Choices		
By telephone	01	
Went to the office, in person	02	
They called me/you	03	
Email	04	
Through the website	05	
Other (please specify)	06 O	
Don't Know	88	
Refused	99	

Q3

Since that time, would you say you've had contact with the ADRC one time, 2 to 3 times, or more than 3 times?

Choices		
1 time	1	
2 to 3 times	2	
More than 3 times	3	
No contact	7	
Don't Know	8	
Refused	9	

Q4

Can you tell me a little about why you were in contact with the ADRC?

IWR Note: If R mentions that they contacted ADRC on behalf of someone else (a family member or friend), make a note of that. Later in the survey, you will be using the "family text" version of the questions.

Choices			
Enter open-ended response	0	DO	
Don't Know	8		
Refused	9		

Q14

When you first contacted the ADRC, did you receive none, some, or all of the information you needed?

Choices		
None	0	
Some	1	
AII	2	
No Information Needed	7	
Don't Know	8	
Refused	9	

Q4A

I am going to read a list of reasons why some people contact the ADRC. Please tell me if any of these were reasons you initially contacted the ADRC. For each reason, please say yes or no.

IWR NOTE: If needed: This series of questions is asking about the issues that were going on when they initially contacted ADRC.

IWR NOTE: This is regardless of if you received services. I will ask about services received later.

IWR NOTE: This list might cover something you just said, but I want to make sure I understand all the possible reasons you may have contacted ADRC.

Choices			
Press enter to continue	0	D	

Q4A_1

Physical health needs?

IWR NOTE: For instance, you were looking for information about a specific condition or disease, rehab services, or medical care. Original Question: This is a list of reasons why some people contact the ADRC. Please tell me if any of these were reasons you initially contacted the ADRC. For each reason, please say yes or no.

Choices		
No	0	
Yes	1	
Don't Know Refused	8	
Refused	9	

Q4A 2

Help with medications?

IWR NOTE: For instance, this could include financial help paying for medications, help managing medications, or taking medications.

Original Question: This is a list of reasons why some people contact the ADRC. Please tell me if any of these were reasons you initially contacted the ADRC. For each reason, please say yes or no.

Choices		
No	0	
Yes	1	
Don't Know	8	
Refused	9	

Q4A_3

Dental care?

Original Question: This is a list of reasons why some people contact the ADRC. Please tell me if any of these were reasons you initially contacted the ADRC. For each reason, please say yes or no.

	· · · · · · · · · · · · · · · · · · ·
Choices	
No	0
Yes	1
Don't Know	8
Refused	9

04A 4

Confusion or memory loss?

Original Question: This is a list of reasons why some people contact the ADRC. Please tell me if any of these were reasons you initially contacted the ADRC. For each reason, please say yes or no.

Choices		
No	0	
Yes Don't Know	1	
Don't Know	8	
Refused	9	

Q4A 5

Help with personal care?

IWR NOTE: This could include things such as help bathing, dressing, and getting around the house. Original Question: This is a list of reasons why some people contact the ADRC. Please tell me if any of these were reasons you initially contacted the ADRC. For each reason, please say yes or no.

Choices		
No	0	
Yes	1	
Don't Know	8	
Refused	9	

Q4A 6

Help with transportation?

IWR NOTE: This could include things like help going to the doctor, going shopping, or to social activities. Original Question: This is a list of reasons why some people contact the ADRC. Please tell me if any of these were reasons you initially contacted the ADRC. For each reason, please say yes or no.

Choices		
No	0	
Yes	1	
Don't Know	8	
Refused	9	

Q4A 7

Help at home, such as help making meals, doing housekeeping and yard work?

Original Question: This is a list of reasons why some people contact the ADRC. Please tell me if any of these were reasons you initially contacted the ADRC. For each reason, please say yes or no.

Choices	
No	0
Yes	1
Don't Know	8
Refused	9

04A 8

Help getting shopping and errands done?

IWR NOTE: Please do not include help with transportation to go shopping or run errands. This question is referring to someone else going shopping for you, or going with you to shop.

Original Question: This is a list of reasons why some people contact the ADRC. Please tell me if any of these were reasons you initially contacted the ADRC. For each reason, please say yes or no.

Choices		
No	0	
Yes Don't Know	1	
Don't Know	8	
Refused	9	

Q4A 9

Help modifying a home or apartment?

IWR NOTE: This could include modifications like installing ramps, or grab bars in the bathroom, or having kitchen counters lowered, or doorways expanded.

Original Question: This is a list of reasons why some people contact the ADRC. Please tell me if any of these were reasons you initially contacted the ADRC. For each reason, please say yes or no.

Choices		
No	0	
Yes	1	
Don't Know	8	
Refused	9	

Q4A 10

Help moving into an assisted living residence, adult foster home, or nursing home?

IWR NOTE: Please do not include help finding subsidized housing (this will be asked next). Original Question: This is a list of reasons why some people contact the ADRC. Please tell me if any of these were reasons you initially contacted the ADRC. For each reason, please say yes or no.

Choices		
No	0	
Yes	1	
Don't Know	8	
Refused	9	

Q4A_11

Help finding subsidized housing?

IWR NOTE: Please do not include help finding assisted living, adult foster home, or nursing home. Original Question: This is a list of reasons why some people contact the ADRC. Please tell me if any of these were reasons you initially contacted the ADRC. For each reason, please say yes or no.

Choices		
No	0	
Yes	1	
Don't Know	8	
Refused	9	

Q4A 12

Help getting food stamps?

Original Question: This is a list of reasons why some people contact the ADRC. Please tell me if any of these were reasons you initially contacted the ADRC. For each reason, please say yes or no.

Choices	
No	0
Yes	1
Don't Know	8
Refused	9

Q4A 13

Help with Medicaid or paying for medical care?

Original Question: This is a list of reasons why some people contact the ADRC. Please tell me if any of these were reasons you initially contacted the ADRC. For each reason, please say yes or no.

Choices		
No	0	
Yes Don't Know	1	
Don't Know	8	
Refused	9	

Q4A 14

Help paying for energy bills?

Original Question: This is a list of reasons why some people contact the ADRC. Please tell me if any of these were reasons you initially contacted the ADRC. For each reason, please say yes or no.

Choices	
No	0
	1
Yes Don't Know	0
	8
Refused	9

04A 15

Help getting caregiver respite?

IWR Note: 'Caregiver Respite' is short-term, temporary relief for those people who are caring for family members or friends. Respite is receiving help with caring for someone.

Original Question: This is a list of reasons why some people contact the ADRC. Please tell me if any of these were reasons you initially contacted the ADRC. For each reason, please say yes or no.

Choices	
No	0
Yes	1
Don't Know	8
Refused	9

Q4A_16

Help getting general information or advice?

Original Question: This is a list of reasons why some people contact the ADRC. Please tell me if any of these were reasons you initially contacted the ADRC. For each reason, please say yes or no.

Choices		· •	
No	0		
Yes	1		
Don't Know	8		
Refused	9		

Q4A 17

Did you contact ADRC to get help with anything else that we did not already cover?

Choices			
No	0	==> Q5	
Yes	1		
Don't Know	8	==> Q5	
Refused	9	==> Q5	

04A 17A

What else did you contact ADRC for?

mat cibe and you contact his			
Choices			
Please Specify	0	DO	
Don't Know	8		
Refused	9		

Q5

READ OPTIONS 1-3

When you called the ADRC, was the phone answered by...

==> SKIP +1 IF NOT O2=01 (01=By telephone)

==> 3KII 1 II 10 Q2 01 01 D) (C)	ерпопеу	
Choices		
A person	1	
An answering machine	2	
An automated message system	3	
Don't Know	8	
Refused	9	

READ OPTIONS 1-4

When did someone from the ADRC get back to you?

=> SKIP +2 IF NOT (Q2=04 OR Q5=2,3)

(04=Email, 2=An answering machine, 3=An automated message system)

Choices		
On the same day	1	
The next day	2	
2 to 4 days	3	
5 or more days	4	
Don't Know	8	
Refused	9	

Q7

READ OPTIONS 1-3

Do you think that the ADRC's response time was...

Choices		
Prompt and timely	1	
Some wait, but was reasonable	2	
Much too long	3	
Don't Know	8	
Refused	9	

Q8

READ OPTIONS 1-4

How easy was it to find information on the website? Would you say it was...

==> SKIP TO Q9 IF NOT Q2=05 (05=Through the website)

Choices	
very difficult	1
a little difficult	2
somewhat easy	3
very easy	4
Don't Know	8
Refused	9

Q8A

What made it <Q8>?

==> SKIP +1 IF O8=8.9

==> 3KIP +1 IF Q0=0,9			
Choices			
Enter open-ended response	0	DO	
Don't Know	8		
Refused	9		

Did you ever go to the ADRC building?

[Family Text: Did you ever go to the ADRC building with your family member?]

==> SKIP TO Q10 IF Q2=02

· 3:11: 13		
Choices		
No	0	
Yes	1	
Don't Know	8	
Refused	9	

Q10

READ OPTIONS 1-4

How easy was it to find the ADRC building?

==> SKIP TO Q15 IF NOT (Q9=1 OR Q2=02) (02=Went to the office, in person)

Choices			
Very difficult	1		
A little difficult	2		
Somewhat easy	3		
Very easy	4		
Don't Know	8		
Refused	9		

Q11

READ OPTIONS 1-4

How convenient was it for you to go to the ADRC?

Choices	
not at all convenient	1
not that convenient	2
somewhat convenient	3
very convenient	4
Don't Know	8
Refused	9

Q11A

What made it <Q11>?

==> SKIP +1 IF Q11=8,9

Choices			
Enter open-ended response	0	DO	
Don't Know	8		
Refused	9		

Q12 READ OPTIONS 1-5 IF NEEDED When you first went to the ADRC, how long did you have to wait to see someone? Choices Less than 5 minutes 01 02 Between 5 and 20 minutes Longer than 20 minutes 03 I had to arrange another time to come back 04 I did not see anyone 05 Do not remember/unsure 88

99

Refused

Q13		
READ OPTIONS 1-3		
Do you think that your wait time to se	e someone was	
==> SKIP +1 IF NOT (Q12=01,02,03,04)		
Choices		
Short and timely	1	
Some wait, but was reasonable	2	
Much too long	3	
Don't Know	8	
Refused	9	

Q15	
READ OPTIONS IF NEEDED	
Do you think that the perso concerns?	n at the ADRC spent enough time with you to understand your
Choices	
No	0
Yes (Somewhat)	1
Don't Know	8
Refused	9

Q17A		
Did you receive written ma	terials?	
Choices		
No	0	
Yes	1	
Don't Know	8	
Refused	9	

017B Were the materials relevant to your concerns? ==> SKIP +1 IF NOT Q17A=1 Choices No 0 Yes 1 Don't Know 8 9

Q18

Refused

Did someone from the ADRC come to your home?

[Family Text:] Did someone from the ADRC go to your family member's home?

IWR Note: Use the 'Original Q Text' if the R has contacted the agency on their own behalf or because they need assistance with caregiving support.

Use the 'Family Text' of the survey if the R contacted the ADRC to address the needs of a family member or friend.

Choices		
No	0=>SECTION2	
Yes	1	
Don't Know	8=>SECTION2	
Refused	9=>SECTION2	

Q19 (Options Counseling Question)

READ OPTIONS 1-3 UNTIL STOPPED

How long did it take from the time you talked to someone from the ADRC to the time someone visited your home?

[Family Text:] How long did it take from the time you talked to someone from the ADRC to the time someone visited your family member's home?

==> SKIP TO SECTION2 IF Q18=0,8,9 (Non-Options Counseling)

Choices		
2 days or less	1	
3 to 7 days	2	
More than a week	3	
Don't Know	8	
Refused	9	

020

READ OPTIONS 1-3

Considering the time you had to wait for the appointment to occur, do you think that the wait time was...

Choices		
Short and timely	1	
Some wait, but reasonable	2	
Much too long	3	
Don't Know	8	
Refused	9	

READ OPTIONS 1-4

How helpful was the visit to your home in addressing your concerns? [Family Text:] How helpful was the visit to your family member's home in addressing concerns?

Choices		
Not at all helpful	1	
Not too helpful	2	
Somewhat helpful	3	
Very helpful	4	
Don't Know	8	
Refused	9	

Q22

READ OPTIONS 1-4

How comfortable did you feel with the person who came to your home? [Family Text:] How comfortable did you feel with the person who went to your family member's home?

Choices		
Very uncomfortable	1	
A little uncomfortable	2	
Somewhat comfortable	3	
Very comfortable	4	
Don't Know	8	
Refused	9	

Q23

Did the person identify any other types of help that might be needed?

IWR Note: This is asking about the person who came to their home.

Choices		
No	0	
Yes	1	
Don't Know	8	
Refused	9	

Q23A

What types of help were identified?

==> SKIP TO Q25 IF NOT Q23=1

/ 3KIF TO Q23 II NOT Q23-I			
Choices			
Enter open-ended response	0	DO	
Don't Know	8		
Refused	9		

Did you agree with them that you had additional needs?

[Family Text:] Did you agree with them that your family member had additional needs?

	 		-
Choices			
No		0	
Yes		1	
Don't Know		8	
Refused		9	

Q25

Were family members or others involved with the discussion when the person from the ADRC came to your home?

[Family Text:] Were you or others involved with the discussion when the person from the ADRC went to your family member's home?

Choices		
No	0	
Yes	1	
Don't Know	8	
Refused	9	

Q26

READ OPTIONS 1-4

How closely did everyone involved agree about your circumstances, such as having the same concerns and looking for the same kinds of help?

[Family Text:] How closely did you and others agree with your family member about their circumstances, such as having the same concerns and looking for the same kinds of help?

IWR Note: "Everyone" means all people that participated in the family meeting.

==> SKIP TO SECTION2 IF NOT Q25=1

Choices		
We agreed on almost everything	1	
We agreed more than we disagreed	2	
We disagreed more than we agreed	3	
We disagreed on almost everything	4	
Don't Know	8	
Refused	9	

Q27

Did the person from the ADRC help you resolve these differences?

==> SKIP +1 IF NOT O26=3,4

Choices		
No	0	
Yes (Somewhat)	1	
Don't Know	8	
Refused	9	

READ OPTIONS 1-4

How helpful was meeting together with the person from the ADRC?

	, together than the person from the re-
Choices	
Not at all helpful	1
Not too helpful	2
Somewhat helpful	3
Very helpful	4
Don't Know	8
Refused	9

SECTION2

You may have worked with more than one person at the ADRC. For the next questions I would like you to think about the person from the ADRC that you worked with the most.

[Family Text:] You may have worked with more than one person at the ADRC. For the next questions I would like you to think about the person from the ADRC that you or your family member worked with the most.

IWR NOTE: If family member and consumer talked to two different people from ADRC, focus on the person from ADRC that the R worked with.

Choices			
Press enter to continue	0	D	

Q29

READ OPTIONS 1-4

How respectful was the person with whom you worked the most?

Choices		
Not at all respectful	1	
Not that respectful	2	
Somewhat respectful	3	
Very respectful	4	
Don't Know	8	
Refused	9	

Q30

READ OPTIONS 1-4

How knowledgeable was this person about helpful resources and services?

IWR NOTE: This question is asking about the person they worked with the most from the ADRC.

Choices		
Not at all knowledgeable	1	
Not that knowledgeable	2	
Somewhat knowledgeable	3	
Very knowledgeable	4	
Don't Know	8	
Refused	9	

Q31 (OPTIONS COUNSELING QUESTION)

READ OPTIONS 1-4

How would you rate this person in helping you explore choices available to you? [Family Text:] How would you rate this person in helping your family member explore the choices available to them?

IWR NOTE: This question is asking about the person they worked with the most from the ADRC.

==> SKIP +1 IF SAMPLE=2 AND Q18=0,8,9

Choices		
Poor	1	
Fair	2	
Good	3	
Excellent	4	
Not Applicable	7	
Not Applicable Don't Know	8	
Refused	9	

Q32 (OPTIONS COUNSELING QUESTION)

READ OPTIONS 1-4

How good of a job did this person do considering your opinions, likes and dislikes before recommending services?

[Family Text:] How good of a job did this person do considering your family member's opinions, likes and dislikes before recommending services?

IWR NOTE: This question is asking about the person they worked with the most from the ADRC.

==> SKIP +1 IF SAMPLE=2 AND Q18=0,8,9

Choices		
Poor	1	
Fair Good Excellent	2	
Good	3	
Excellent	4	
Don't Know	8	
Refused	9	

Q34 (OPTIONS COUNSELING QUESTION)

READ OPTIONS IF NEEDED

Did this person work with you to develop a plan listing your goals and next steps? [Family Text:] Did this person work with your family member to develop a plan listing their goals and next steps?

IWR NOTE: This question is asking about the person they worked with the most from the ADRC.

==> SKIP +1 IF SAMPLE=2 AND Q18=0,8,9

Choices		
No	0	
Yes (Some)	1	
Don't Know	8	
Refused	9	

Q35 (OPTIONS COUNSELING QUESTION)

READ OPTIONS 1-4

How would you rate this person in supporting your decisions?

[Family Text:] How would you rate this person in supporting your family member's decisions?

IWR NOTE: This question is asking about the person they worked with the most from the ADRC.

==> SKIP +1 SAMPLE=2 AND Q18=0,8,9

Choices		
Poor	1	
Fair Good Excellent	2	
Good	3	
Excellent	4	
Don't Know	8	
Refused	9	

Q36 (OPTIONS COUNSELING QUESTION)

Did you ever feel that this person was trying to talk you into things you did not want? [Family Text:] Did you ever feel that this person was trying to talk your family member into things they did not want?

IWR NOTE: This question is asking about the person they worked with the most from the ADRC.

==> SKIP +1 SAMPLE=2 AND Q18=0,8,9

Choices		
No	0	
Yes (Some) Don't Know	1	
Don't Know	8	
Refused	9	

Q37

READ OPTIONS 1-4

How would you rate this person on explaining how to get the help or information you needed? [Family Text:] How would you rate this person on explaining how to get the help or information your family member needed?

IWR NOTE: This question is asking about the person they worked with the most from the ADRC.

Choices		
Poor	1	
Fair	2	
Good	3	
Excellent	4	
Not Applicable	7	
Not Applicable Don't Know	8	
Refused	9	

Q38 (OPTIONS COUNSELING QUESTION)

READ OPTIONS 1-4

How would you rate this person on helping you understand the service system? [Family Text:] How would you rate this person on helping your family member understand the service system?

IWR NOTE: This question is asking about the person they worked with the most from the ADRC.

==> SKIP +1 SAMPLE=2 AND Q18=0,8,9

Choices		
Poor	1	
Fair	2	
Fair Good Excellent	3	
Excellent	4	
Don't Know	8	
Refused	9	

Q33 (OPTIONS COUNSELING QUESTION)

Compared to your understanding about available options before you contacted the ADRC, what is your understanding now? Would you say you have a better understanding, your understanding is about the same, or you are more confused and understand less?

IWR NOTE: This would be comparing your level of understanding before and then after talking with the person from the ADRC.

==> SKIP +1 SAMPLE=2 AND Q18=0,8,9

Choices		
Better understanding	1	
Understanding is about the same	2	
More confused and understand less	3	
Don't Know	8	
Refused	9	

Q39

What decisions did you make as a result of your involvement with the ADRC?
[Family Text:] What decisions did your family member make as a result of their involvement with the ADRC?

IWR NOTE: This could include a decision to follow the recommendations made by others, including the person from the ADRC.

Choices			
Enter open-ended response	0	DO	
No decisions	7		==> Q43_A1
Don't Know	8		==> Q43_A1
Refused	9		==> Q43_A1

Did these decisions result in you receiving services or benefits?

[Family Text:] Did these decisions result in your family member receiving services or benefits?

L. a.m., rext.] Dia thicse act	iolono i coale in your rainin, incino	
Choices		
No	0	==> Q43_A1
Yes	1	
Don't Know	8	==> Q43_A1
Refused	9	==> Q43_A1

Q41

Did the person from the ADRC help you complete paperwork needed to get services or benefits? [Family Text:] Did the person from the ADRC help your family member complete paperwork needed to get services or benefits?

==> SKIP TO Q43_A1 IF NOT Q40=1

> SKII 10 Q 15_/KI II NOT C	210-1	
Choices		
No	0	
Yes (A little)	1	
Don't Know	8	
Refused	9	

Q42SECT

I'm going to read a list of services that are available. First, I would like to know if you (or your family member) actually used this service and then for each service used, I will then ask about how timely it occurred and how helpful it was.

Choices			
Press enter to continue	0	D	

Q42A

Did you use housekeeping services or receive help around the house?

[Family Text:] Did your family member use housekeeping services or receive help around the house?

Choices		
No	0	
Yes	1	
Don't Know	8	
Refused	9	

Q42ATIME		
READ OPTIONS 1-3		
How quickly did the service begin?		
==> SKIP +2 IF NOT Q42A=1		
Choices		
Right away	1	
Had to wait, but it was reasonable	2	
Had to wait much too long	3	
Don't Know	8	
Refused	9	

Q42AHELP		
READ OPTIONS 1-4		
How helpful has this service been	n?	
Choices		
Not at all helpful	1	
A little helpful	2	
Somewhat helpful	3	
Very helpful	4	
Don't Know	8	
Refused	9	

Q42B	
Did you receive home modification services? [Family Text:] Did your family member receive home modification services?	
Choices	
No	0
Yes	1
Don't Know	8
Refused	9

Q42BTIME		
READ OPTIONS 1-3		
How quickly did the service begin?		
==> SKIP +2 IF NOT Q42B=1		
Choices		
Right away	1	
Had to wait, but it was reasonable	2	
Had to wait much too long	3	
Don't Know	8	
Refused	9	

Q42BHELP		
READ OPTIONS 1-4		
How helpful has this service be	een?	
Choices		
Not at all helpful	1	
A little helpful	2	
Somewhat helpful	3	
Very helpful	4	
Don't Know	8	
Refused	9	

Q42C		
Did you receive help with personal care such as bathing? [Family Text:] Did your family member receive help with personal care such as bathing?		
Choices		
No	0	
Yes	1	
Don't Know	8	
Refused	9	

Q42CTIME		
READ OPTIONS 1-3		
How quickly did the service begin?		
==> SKIP +2 IF NOT Q42C=1		
Choices		
Right away	1	
Had to wait, but it was reasonable	2	
Had to wait much too long	3	
Don't Know	8	
Refused	9	

Q42CHELP	
READ OPTIONS 1-4	
How helpful has this service been?	
Choices	
Not at all helpful	1
A little helpful	2
Somewhat helpful	3
Very helpful	4
Don't Know	8
Refused	9

Q42D

Did you receive meals delivered to the home or to a meal site?

[Family Text:] Did your family member receive meals delivered to the home or to a meal site?

L. a.m., rextra pra year it	
Choices	
No	0
Yes	1
Don't Know	8
Refused	9

Q42DTIME

READ OPTIONS 1-3

How quickly did the service begin?

==> SKIP +2 IF NOT Q42D=1

· • • • • • • • • • • • • • • • • • • •		
Choices		
Right away	1	
Had to wait, but it was reasonable	2	
Had to wait much too long	3	
Don't Know	8	
Refused	9	

Q42DHELP

READ OPTIONS 1-4

How helpful has this service been?

Choices	
Not at all helpful	1
A little helpful	2
Somewhat helpful	3
Very helpful	4
Don't Know	8
Refused	9

Q42E

Did you receive information about or help managing your health?

[Family Text:] Did your family member receive information about or help managing their health?

Choices		
No	0	
Yes	1	
Don't Know	8	
Refused	9	

Q42ETIME READ OPTIONS 1-3 How quickly did the service begin? ==> SKIP +2 IF NOT Q42E=1 Choices Right away 1 Had to wait, but it was reasonable 2 Had to wait much too long 3 Don't Know 8 Refused 9

Q42EHELP

READ OPTIONS 1-4

How helpful has this service been?

Choices		
Not at all helpful	1	
A little helpful	2	
Somewhat helpful	3	
Very helpful	4	
Don't Know	8	
Refused	9	

Q42F

Did you receive help getting benefits or financial assistance, such as health insurance, food stamps, Medicaid, or help with heating bills?

[Family Text:] Did your family member receive help getting benefits or financial assistance, such as health insurance, food stamps, Medicaid, or help with heating bills?

Choices		
No	0	
Yes	1	
Don't Know	8	
Refused	9	

Q42FTIME

READ OPTIONS 1-3

How quickly did the service begin?

==> SKIP +2 IF NOT 042F=1

- 51(11 12 11 1(5) Q 12) 1		
Choices		
Right away	1	
Had to wait, but it was reasonable	2	
Had to wait much too long	3	
Don't Know	8	
Refused	9	

Q42FHELP READ OPTIONS 1-4 How helpful has this service been? Choices Not at all helpful 1 A little helpful 2 Somewhat helpful 3 Very helpful 4

8

9

042 NEW

Don't Know

Refused

Did you receive help managing your money or assets?

[Family Text:] Did your family member receive help managing money or assets?

IWR NOTE: For instance, this could include help with financial planning, reverse mortgages, long-term care insurance, or wills.

Choices		
No	0	
Yes	1	
Don't Know	8	
Refused	9	

Q42TIMEN

READ OPTIONS 1-3

How quickly did the service begin?

IWR NOTE: For instance, this could include help with financial planning, reverse mortgages, long-term care insurance, or wills.

==> SKIP +2 IF NOT Q42 NEW=1

Choices		
Right away	1	
Had to wait, but it was reasonable	2	
Had to wait much too long	3	
Don't Know	8	
Refused	9	

Q42HELPN

READ OPTIONS 1-4

How helpful has this service been?

now neighbor has this service seen.		
Choices		
Not at all helpful	1	
A little helpful	2	
Somewhat helpful	3	
Very helpful	4	
Don't Know	8	
Refused	9	

Q42G Did you use transportation services? [Family Text:] Did your family member use transportation services? Choices No 0 Yes 1 Don't Know 8 Refused 9

Q42GTIME		
READ OPTIONS 1-3		
How quickly did the service begin?		
==> SKIP +2 IF NOT Q42G=1		
Choices		
Right away	1	
Had to wait, but it was reasonable	2	
Had to wait much too long	3	
Don't Know	8	
Refused	9	

Q42GHELP		
READ OPTIONS 1-4		
How helpful has this service been?		
Choices		
Not at all helpful	1	
A little helpful	2	
Somewhat helpful	3	
Very helpful	4	
Don't Know	8	
Refused	9	

Q42H		
Did you receive legal assistar [Family Text:] Did your famil	nce or advice? y member receive legal assistance or advice?	
Choices		
No	0	
Yes	1	
Don't Know	8	
Refused	9	

Q42HTIME READ OPTIONS 1-3 How quickly did the service begin? ==> SKIP +2 IF NOT Q42H=1 Choices Right away 1 Had to wait, but it was reasonable 2 Had to wait much too long 3 Don't Know 8 Refused 9

Q42HHELP		
READ OPTIONS 1-4		
How helpful has this service be	en?	
Choices		
Not at all helpful	1	
A little helpful	2	
Somewhat helpful	3	
Very helpful	4	
Don't Know	8	
Refused	9	

Q42J Did you receive access to other benefits or information about other benefits? [Family Text:] Did your family member receive access to other benefits or information about other benefits?

Choices		
No	0	
Yes	1	
Don't Know	8	
Refused	9	

Q42JTIME		
READ OPTIONS 1-3		
How quickly did the service begin? (Hov	v quickly did you receive information?)	
==> SKIP +2 IF NOT Q42J=1		
Choices		
Right away	1	
Had to wait, but it was reasonable	2	
Had to wait much too long	3	
Don't Know	8	
Refused	9	

Q42JHELP

READ OPTIONS 1-4

How helpful has this service been? (How helpful has the information been?)		
Choices		
Not at all helpful	1	
A little helpful	2	
Somewhat helpful	3	
Very helpful	4	
Don't Know	8	
Refused	9	

Q42K

Did you receive any other services?

[Family Text:] Did your family member receive any other services?

Choices				
No	0			
Yes (What services were received?)	1	0		
Don't Know	8			
Refused	9			

Q43_A1 (New Question Wording 2014)

During the past 12 months, have you experienced confusion or memory loss that is happening more or is getting worse?

[Family Text: During the past 12 months, has your family member experienced confusion or memory loss that is happening more or is getting worse?]

Choices		
No	0	==> SECTION3
Yes	1	
Don't Know	8	==> SECTION3
Refused	9	==> SECTION3

Q43_A2 (New Question Wording 2014)

Have you received a diagnosis of Alzheimer's or a related dementia?

[Family text: Has your family member received a diagnosis of Alzheimer's or a related dementia?]

==> SKIP +1 Q43_A1=0,8,9

Choices		
No	0	
Yes	1	
Don't Know	8	
Refused	9	

SECTION3 (OPTIONS COUNSELING QUESTION)

Thinking about the information and any services received from the ADRC, please tell me how much you agree or disagree with the following statements.

==> SKIP TO Q51 IF SAMPLE=2 AND Q18=0,8,9

Choices			
Press enter to continue	0	D	

Q45 (OPTIONS COUNSELING QUESTION)

READ OPTIONS 1-4

The services or information have allowed me to live in the place I most desire. Do you... [Family Text:] The services or information have allowed my family member to live in the place they most desire. Do you...

Choices		
Strongly disagree	1	
Disagree	2	
Agree	3	
Strongly agree	4	
Don't Know	8	
Refused	9	

Q46 (OPTIONS COUNSELING QUESTION)

READ OPTIONS 1-4

I am receiving enough support to meet my needs and preferences.

[Family Text:] My family member is receiving enough support to meet their needs and preferences.

IWR Note: "Support" could be services such as meals, housekeeping, personal care, assistance with paperwork, assistance obtaining medical insurance, or transportation services. Support could also be the presence of family members or neighbors to make sure things are going all right.

Choices		
Strongly disagree	1	
Disagree	2	
Agree	3	
Strongly agree	4	
Don't Know	8	
Refused	9	

Q47 (OPTIONS COUNSELING QUESTION)

READ OPTIONS 1-4 IF NEEDED

I believe I am safer in my home as a result of the information and services I received.
[Family Text:] I believe my family member is safer in their home as a result of the information and services they received.

Choices		
Strongly disagree	1	
Disagree	2	
Agree	3	
Strongly agree	4	
Don't Know	8	
Refused	9	

Q48 (OPTIONS COUNSELING QUESTION)

READ OPTIONS 1-4 IF NEEDED

I believe I am more independent as a result of the information and services I received.
[Family Text:] I believe my family member is more independent as a result of the information and services they received.

Choices		
Strongly disagree	1	
Disagree	2	
Agree	3	
Strongly agree	4	
Don't Know	8	
Refused	9	

Q49 (OPTIONS COUNSELING QUESTION)

READ OPTIONS 1-4 IF NEEDED

The services or information received have allowed me to expand or maintain activities outside of my home.

[Family Text:] The services or information received have allowed my family member to expand or maintain activities outside of their home.

Choices		
Strongly disagree	1	
Disagree	2	
Agree	3	
Strongly agree	4	
Don't Know	8	
Refused	9	

Q50A (OPTIONS COUNSELING QUESTION)

READ OPTIONS 1-4

One of the goals of the ADRC program is to help people avoid running out of money or avoid needing to use Medicaid. How much do you agree with the following statement: "The services or information received have helped make the most of personal money and resources?"

Choices		
Strongly disagree	1	
Disagree	2	
Agree	3	
Strongly agree	4	
Don't Know	8	
Refused	9	

Q50B (OPTIONS COUNSELING QUESTION)

READ OPTIONS 1-4

How much do you agree with the following statement: "I was eventually able to find help that I could afford."

[Family Text:] How much do you agree with the following statement: "My family member was eventually able to find help that they could afford."

Choices		
Strongly disagree	1	
Disagree	2	
Agree	3	
Strongly agree	4	
Don't Know	8	
Refused	9	

Q51

What do you think your circumstances would be now if you had not received information or services through the ADRC?

[Family Text:] What do you think your family member's circumstances would be now if they had not received information or services through the ADRC?

IWR NOTE: Use following probes if R is having difficulty answering. PROBES: How well would [you/they] be able to manage [your/their] personal needs? Where do you think [you/they] would be living? What about in a nursing home or assisted living facility?

Choices		
Enter open-ended response	0	DO
Don't Know	8	
Refused	9	

Q56 (OPTIONS COUNSELING QUESTION)

READ OPTIONS 1-4

How much control did you have in making decisions about what you would do next? [Family Text:] How much control did your family member have in making decisions about what they would do next?

==> SKIP +1 SAMPLE=2 AND Q18=0,8,9

Choices		
No control	1	
A little control	2	
Most of the control	3	
Total control	4	
Don't Know	8	
Refused	9	

Q52 (OPTIONS COUNSELING QUESTION)

Has the person you worked with at the ADRC called you to see how you are doing? [Family Text:] Has the ADRC called to see how your family member is doing?

==> SKIP +1 SAMPLE=2 AND Q18=0,8,9

Choices		
No	0	
Yes	1	
Don't Know	8	
Refused	9	

Q53 (OPTIONS COUNSELING QUESTION)

Since your first contact with the ADRC, have you contacted them again?

==> SKIP +1 SAMPLE=2 AND O18=0.8.9

7 ST(11 1 1 S) (1 11 EE E) (, 4 ₂₀ 0/0/5	
Choices		
No	0	
Yes	1	
Don't Know	8	
Refused	9	

Q54

READ OPTIONS 1-4

If you needed to contact ADRC, how easy would that be?

Choices		
Very difficult	1	
Somewhat difficult	2	
Somewhat easy	3	
Very easy	4	
Don't Know	8	
Refused	9	

Q57		
READ OPTIONS 1-4		
Overall, how helpful was the ADRC?		
Choices		
Not at all helpful	1	
Only a little helpful	2	
Somewhat helpful	3	
Very helpful	4	
Don't Know	8	
Refused	9	

Q58			
Do you have concerns that the ADRC has not addressed?			
Choices			
No	0		
Yes (Could you briefly describe those concerns?)	1 0		
Don't Know	8		
Refused	9		

Q59		
Would you recommend the ADRC to a friend or family member?		
Choices		
No	0	
Yes (Maybe) Don't Know	1	
Don't Know	8	
Refused	9	

Q60				
What recommendations do you have for improving the services of the ADRC?				
Choices				
Enter open-ended response	0	DO		
No Recommendations	7			
Don't Know	8			
Refused	9			

DO NOT READ OPTIONS, SELECT ONLY ONE

What is the best way the ADRC can provide you information?

Choices		
Face to face or in-person	0	
Written materials (e.g., brochures)	1	
Personal contact (e.g., telephone, email)	2	
Internet	3	
Local media (e.g., TV, newspapers, etc.)	4	
Presentations at social gatherings (e.g., meal sites, churches, senior centers, civic organizations)	5	
Other (please specify)	6	0
In the mail	7	
Don't Know	8	
Refused	9	

Q61A

Have you used the ADRC website?

==> SKIP +1 Q2=05

Choices		
No	0	
Yes	1	
Yes Don't Know	8	
Refused	9	

Q61B

DO NOT READ OPTIONS

How many times have you used the ADRC website?

==> SKIP TO DEMO IF NOT (Q61A=1 OR Q2=05)

Choices		
1 time	1	
2 to 3 times	2	
More than 3 times	3	
Don't Know	8	
Refused	9	

Q61C READ OPTIONS 1-4 How easy was it to use? Choices Very difficult 1 A little difficult 2 Somewhat easy 3 4 Very easy Don't Know 8 9 Refused

DEMO

We are almost done; the next few questions are for demographic purposes only.

IWR NOTE: If you are speaking to a friend or family member, please tell them: "The following questions are about you."

Choices			
Press Enter to Continue	0	D	

Q62				
Do you own or have easy access to a computer?				
Choices				
No	0			
Yes	1			
Don't Know	8			
Refused	9			

Q63		
READ OPTIONS 1-4		
How would you rate your com	puter skills?	
Choices		
Poor	1	
Fair	2	
Good	3	
Excellent	4	
Don't Know	8	
Refused	9	

RACE

READ OPTIONS 0-5; SELECT ALL THAT APPLY

Which of the following groups best identifies you?

IWR Note: Asian or Asian American includes Chinese, Filipino, Japanese, Asian Indian, Korean, and Vietnamese. IWR Note: Please only use the "Other" code if R refuses to choose a race/ethnicity category listed above.

Choices			
White or Caucasian	0		
Black or African-American	1		
Asian or Asian-American	2		
American-Indian or Alaskan Native	3		
Native Hawaiian or other Pacific Islander	4		
Spanish, Hispanic, or Latino	5		
Other (Please Specify)	7	0	
Don't Know	8	X	
Refused	9	Χ	

YEAR

ENTER YEAR 1900-2011

What year were you born?

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			ш		=	_
$\overline{}$		$\mathbf{\mathbf{\mathcal{U}}}$	ш	_	u	_

enoices	
Don't Know	8888
Refused	9999

ZIP

What is your home zip code?

Choices		
Don't Know	88888	
Refused	99999	

EDUC

READ OPTIONS IF NEEDED

What is the highest level of education you have completed?

what is the highest level of education you have completed:		
Choices		
Less than 12th Grade (not a high school graduate)	01	
High School Graduate or GED	02	
Some College or Other Post-Secondary Education	03	
Associates Degree or Technical Degree (AA or AS)	04	
Bachelor's Degree (BA, AB, BS)	05	
Some Post-Graduate	06	
Master's Degree	07	
Other Professional or Doctoral Degree	08	
Don't Know	88	
Refused	99	

INCOME

READ OPTIONS UNTIL STOPPED

Please stop me when I reach the category that best describes your yearly total household income from all sources before taxes in 2013.

IF NEEDED: Your best estimate is fine.

Choices		
Less than \$10,000	0	
\$10,000 to less than \$20,000	1	
\$20,000 to less than \$30,000	2	
\$30,000 to less than \$40,000	3	
\$40,000 to less than \$50,000	4	
\$50,000 to less than \$60,000	5	
\$60,000 to less than \$70,000	6	
\$70,000 or more	7	
Don't Know	8	
Refused	9	

GENDER

Record R'S gender, as observed. If you can't tell, ask:

"Because the quality of phone connections sometimes makes it difficult to tell, I have to ask you your gender. Are you male or female?"

Choices		
Male	0	
Female	1	
Refused	9	

THEND

Thank you very much for your time. Do you have any questions or comments about the survey?

Choices		
No	0	
Yes (Type in Comments)	1	0

INT99

Thank you again for your time. Good Bye.

Your time for this survey was: \$T If R has questions about the survey:

You may contact the survey director, Diana White at 503-725-2725.

Dr. Debi Elliott, the Director of the Survey Research Lab at Portland State University, at 503-725-5198 Survey Research Lab website at www.srl.pdx.edu.

PSU Human Subjects Research Review Committee, at 503-725-4288

Choices		
COMPLETE	CO	D

10			
*****Hang up with Respondent, the	n continue with next five	questions*****	
Do you have any comments, for the C	LIENT, about how the in	terview went?	
Choices			
No Comments	0		
Yes (Please Specify)	1	0	

I1		
Overall, how much difficulty did R	R have in understanding the questions?	
Choices		
No Difficulty	1	
A Little Difficulty	2	
Moderate Difficulty	3	
A Great Deal of Difficulty	4	

12		
How engaged was the R?		
Choices		
Not at All	1	
A Little	2	
Moderately	3	
Very	4	

15		
How distracted did R seem by other people or things (e.g. television) during the interview?		
Choices		
Not at All	1	
A Little	2	
Moderately	3	
Very	4	

I 4			
Who did you conduct the interview with?			
Choices			
Care Recipient	1	==> /END	
Family Member (or Caregiver)	2	==> /END	
Don't Know	8	==> /END	

F9 (Special Study Information)

REFUSAL CONVERSION: The results of this survey will be used by the ADRC to help improve its services. The survey is completely confidential and voluntary and takes about 15 to 20 minutes to complete. Can we ask you some questions now or would there be a more convenient time?

SPECIAL STUDY INFO:

If you have any questions about this survey, you may contact the survey director, Diana White at 503-725-2725.

If you have questions about the validity of the study or the Survey Research Lab you may call Dr. Debi Elliott, the Director of the Survey Research Laboratory at Portland State University, at 503-725-5198 or visit the Survey Research Lab website at www.srl.pdx.edu.

If you have concerns or questions about your rights as a research subject or your privacy protection, please contact the PSU Human Subjects Research Review Committee at 503-725-4288 or 1-877-480-4400.

PURPOSE: This survey is being done to help improve services offered through the Aging and Disability Resource Center. This is a new program for Oregon and is only being offered in some communities. The state wants to improve the way they work with older adults and people with disabilities. They also want to expand the ADRC statewide. We want to learn from you what is going well, and what needs to be changed.

Use these references throughout the survey if needed:

Call Date: <CALLDATE>

ADRC Staff Member: <AGENT>

Local ADRC Agency Name: <AGENCY>

If R asks how their phone number was selected, say: Your number was randomly selected from a list of all people who have had contact with the ADRC or received a service called "Options Counseling."

IF YOU ARE SPEAKING TO A FAMILY MEMBER, CAREGIVER, OR FRIEND OF THE CONSUMER: Make a note of this. Later in the survey you will be using the "Family Text" version of the questions. For these questions, insert whatever language makes sense, this is most likely the way the respondent is referring to the care recipient (i.e. my family member, friend, husband, wife, son, daughter, etc.).

IF R ASKS WHAT 'OPTIONS COUNSELING' MEANS SAY: Options counseling is where someone from the ADRC learns about your needs, provides you information about services that are available to you, helps you weigh the pros and cons of these services, and supports your choices. Options counselors will also help you get connected to the services you choose.

IWR Note: If R has only contacted the ADRC through the website, and has had no further contact with anyone from ADRC, you can 'Quit' the survey and code the call as a 'Suspend without callback." Please be sure to describe the situation in the call notes.

Choices			
Press Enter to Continue	0	D	