

**Appendix B. Senior Companion Program Independent Living Performance
Measure Survey (Sample)**

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**SENIOR COMPANION PROGRAM
INDEPENDENT LIVING PERFORMANCE MEASURE SURVEY**

Thank you for taking the time to complete this survey. We would like to know how the Senior Companion Volunteer who has been assisting you has affected your life.

All information will be kept confidential; please do not disclose your name. You may choose not to answer questions.

This 1st question is about how many hours of service you receive in a typical week from your senior companion.

Tell us how many TOTAL HOURS in a typical week you received services.

Here is an example of how Mrs. Jones would answer question #1:

Her Senior Companion usually spends one hour on Monday with Mrs. Jones and two hours on Wednesday. Therefore, the total hours a week that she receives services is 3 hours a week.

1. In a typical week, my Senior Companion Volunteer is with me for

hours

Please turn the page for the questions 2-13

**SENIOR COMPANION PROGRAM
INDEPENDENT LIVING PERFORMANCE MEASURE SURVEY**

Because I Have a Senior Companion Volunteer ...

	Strongly Disagree	Somewhat Disagree	Somewhat Agree	Strongly Agree
2) ... I feel less lonely.	1	2	3	4
3) ... I feel I have close ties to more people.	1	2	3	4
4) ... I am able to do more of the things I <u>need</u> to do.	1	2	3	4
5) ... I am able to do more of the things I <u>want</u> to do.	1	2	3	4
6) ... I can remain living in my own home.	1	2	3	4
7) ... I am eating regularly scheduled meals.	1	2	3	4
8) ... I am able to get to medical appointments.	1	2	3	4
9) ... I am able to get to the grocery store	1	2	3	4
10) ... I am able to take care of other necessary errands/appointments.	1	2	3	4
11) ... I am more satisfied with my life.	1	2	3	4
12) Overall, I am satisfied with my Senior Companion volunteer.	1	2	3	4
13) Overall, the Senior Companion Program has met my expectations.	1	2	3	4