

AGE RESTRICTED LIVING SCREENER QUESTIONNAIRE

AMERICAN HOUSING SURVEY

Control Nos.: _____ CASEID: _____

FACILITY INFORMATION

Name: _____
Address: _____

Contact person: _____
Contact phone number: _____

UNIT INFORMATION

Address: _____

Hello. I am _____ from the US Census Bureau.
(Here is my ID card.)

The U.S. Census Bureau is testing a new method for updating its address lists for facilities that may contain housing units designed for an older population. We will use this information to ensure that these types of units will be more accurately represented in future censuses and surveys.

Information you provide will be kept confidential and used for statistical purposes only, as required by Title 13, United States Code, Section 9. The Census Bureau cannot publish or release information that would identify any individual. The Congress has imposed criminal sanctions (up to five years imprisonment and/or up to \$250,000 fine) if any person sworn to uphold the confidentiality of your information violates the provisions of Title 13.

I would like to speak with the person or one of the people who knows where people live or stay at this address. Would that be you, or should I speak with someone else? This voluntary collection should take about 6 minutes. I can provide you with an address at the end of the interview to which written comments or suggestions about this procedure can be directed.

FACILITY AND UNIT INFORMATION

1. May I have your name please? Same as on label OR

2. What is your job title? _____

3a. Is this (read facility name and address on the label)? Yes – Skip to 4 No

3b. Was this address ever (read facility name and address on the label)? Yes – Make necessary corrections on the label
1 No – **End interview. Read thank you statement on the reverse side. Then mark item 13, code 37 "Out of Universe"**

4. The following questions are about the BUILDING that contains (read unit address). **How many living quarters/apartments/residences are there in that building?**

<input type="checkbox"/> One	} Go to 5	<input type="checkbox"/> 5–9	} Skip to 7a
<input type="checkbox"/> 2–4		<input type="checkbox"/> 10–19	
	<input type="checkbox"/> 20–29		
	<input type="checkbox"/> 30–39		
	<input type="checkbox"/> 40–49		
	<input type="checkbox"/> 50 or more		

5. Is there more than one building in this complex? Yes
2 No – **End interview. Read thank you statement on the reverse side. Then mark item 13, code 37 "Out of Universe"**

6. Do any of the buildings have 5 or more units/apartments in them? Yes
3 No – **End interview. Read thank you statement on the reverse side. Then mark item 13, code 37 "Out of Universe"**

7a. Does the BUILDING containing (read unit address) **provide special services? By special services I mean residents live independently and are generally self-sufficient, but CAN get some help with at least some of the following:**

- meals, transportation, or housekeeping within the unit
- managing finances, using the telephone, or shopping, and/or
- personal care such as bathing, eating, moving about, dressing, or toilet use?

<input type="checkbox"/> Yes – Skip to item 8	<input type="checkbox"/> No
<input type="checkbox"/> Yes – Skip to item 8	<input type="checkbox"/> No
<input type="checkbox"/> Yes – Skip to item 8	<input type="checkbox"/> No

b. What is its current use? **4** _____

Continue on the back.

8a. Was the **BUILDING** containing (read unit address) built before 1990?

- Yes
- No – Skip to 9

8b. Was this **BUILDING** originally used as private residential housing?

5 Yes, private – **End interview. Read thank you statement below. Then mark item 13, code 37 “Out of Universe”**

No, something else – Specify ↘

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9. The next questions are about (read unit address) itself. Now I would like to ask about this particular unit. Is (read unit address) a unit for hospice, skilled nursing, dementia, or Alzheimers patients?

6 Yes – **End interview. Read thank you statement below. Then mark item 13, code 14 (Type B – OTHER unit)**

No

10a. Do the residents of this unit live separately from all the other occupants of the building?

Yes

7 No – **End interview. Read thank you statement below. Then mark item 13, code 14 (Type B – OTHER unit)**

10b. Do the residents of this unit have direct access to their unit from the outside or through a common or public hall?

Yes

8 No – **End interview. Read thank you statement below. Then mark item 13, code 14 (Type B – OTHER unit)**

11. Are the residents of this unit free to move about the public areas of the building and to leave the facility anytime they wish?

9 Yes – **Read thank you statement below. Then mark item 13, code 1 (Unit eligible)**

10 No – **Read thank you statement below. Then mark item 13, code 14 (Type B – OTHER unit)**

THANK YOU STATEMENT

Thank you for your help. The Census Bureau uses this type of information to select samples that represent the diversity of conditions in our country. The samples are used to conduct studies on a variety of subjects, such as employment, income, health care, and housing.

INTERVIEW RESULTS

12. Incomplete screening Interview:

2 Partial interview – Specify ↘

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▶ **Type A**

3 Refused

4 Unable to locate (Call office, determine if PV needed.)

5 Other – Specify ↘

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13. Outcome from screening Interview:

1 Unit eligible for AHS interview at time of screening. (Did not get screened out by questions and FR believes it meets all requirements.)

▶ **Type B** (Unit NOT eligible now but status may change in the future.)

12 Permanent or temporary business or commercial storage

14 OTHER unit or staff quarters

15 Occupancy prohibited

16 Interior exposed to the elements

17 Type B not classified above – Specify ↘

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▶ **Type C** (Unit out of universe for AHS sample, will always be INELIGIBLE for AHS interview.)

30 Demolished or disaster loss

31 Building or mobile home moved

37 Out of universe (Describe type of facility in notes.)

NOTES: (Describe any unusual circumstances, explain why you feel unit does not meet requirements for age restricted living even if answers indicate that it does. Conversely, if the unit did not meet the requirements, and you think it should be included, explain why you feel the unit should be included.)

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