

COMMUNITY CARE SCHEDULE
Patient Section
PART FOUR: The Community Environment

<i>Study Number</i>	03	/01-02
<i>Assignment Number</i>	_____	/03-06
<i>Completion Number</i>	_____	/07-10
<i>Instrument Number</i>	6	/11

I. PRESENT LIVING ARRANGEMENT

INTERVIEWER: Record subject's present address and phone number on SUBJECT DATA SHEET.

A. Type of Housing

- 1. Apartment /12
- 2. Private House
- 3. SRO-rooming House
- 4. Adult Home
- 5. Shelter
- 6. Community Residence
- 7. Halfway House
- 8. Other (Specify) _____

1. How long have you lived here? _____ weeks /13

- 1. two weeks or less
- 2. two weeks to six months /14
- 3. 6 months to 1 year
- 4. 1 - 3 years
- 5. 3 - 7 years
- 6. 7 - 10 years
- 7. over 10 years

B. Household Composition

Who else lives with you now? (Current living arrangement for both shelter and non-shelter housing)

	1	2	
	<u>Yes</u>	<u>No</u>	
1. Mother/step/foster/adoptive	1	2	/15
2. Father/step/foster/adoptive	1	2	/16
3. Spouse	1	2	/17
4. Son	1	2	/18
5. Daughter	1	2	/19
6. Sibling	1	2	/20
7. Other relative	1	2	/21
8. Other person, no kin	1	2	/22
9. Several people, no kin	1	2	/23
10. Communal setting (shelter)/Homless	1	2	/24

INTERVIEWER: If there has been more than one change, record MOST RECENT CHANGE. Use codes below.

What was your previous living arrangement: _____ /38-39

What is your present living arrangement: _____ /40-41

- Types of Living Arrangements:
- 01. Parental Home
 - 02. Sibling/Other relative
 - 03. Spouse/Children
 - 04. Roommate-non-family
 - 05. Solitary Living Situation
 - 06. Halfway House
 - 07. Community Residence
 - 08. Shelter
 - 09. Prison / Jail
 - 10. Other (Specify) _____

F. Reasons for Change

Why did your living arrangement change? (NOTE: Can be more than one reason)

	1	2	
	<u>Yes</u>	<u>No</u>	
01. Getting along with other members of household	1	2	/42
02. Divorce or separation	1	2	/43
03. Your therapist suggested you make new living arrangements	1	2	/44
04. Landlord increased rent	1	2	/45
05. You got evicted for nonpayment of rent	1	2	/46
06. You got evicted for violent or destructive behavior	1	2	/47
07. Apartment was inadequate (e.g., burned down, overcrowded, run-down)	1	2	/48
08. You were re-hospitalized	1	2	/49
09. You got evicted for drinking or drug use	1	2	/50
10. Housing conversion (like into a coop)	1	2	/51
11. Some other reason (Specify) _____	1	2	/52

II. LIVING ARRANGEMENT HISTORY

A. Homelessness

- 1. Before you were 18 years were you ever homeless? (No fixed abode - no place of nighttime shelter other than a shelter for the homeless, an outdoor location, or a public space)

___ 1. Yes

/53

___ 2. No

If No skip to Section III Question #1 at the bottom of the page

- 2. Age when first homeless: _____ years

/54-55

- 3. How long were you homeless then, (first episode) _____ days

/56-59

- 4. During this time did you

	1	2	-9	
	<u>Yes</u>	<u>No</u>	<u>N/A</u>	
a. sleep outdoors? _____	1	2	-9	/60
b. sleep in a shelter? _____	1	2	-9	/61
c. sleep in a public place? _____	1	2	-9	/62

III. HOUSING CHARACTERISTICS (Applicable to All Subjects)

A. Independent Living

Criteria: a. Independence from family.
 b. Ability to support housing.

- 1. Has there ever been a period in your life when you lived on your own away from your parents and away from any other relative providing free food or a free place to live? (Other than living on the streets or in shelters)

___ 1. Yes

/63

___ 2. No, has always lived in parental home or depended on other relatives

If No, Skip To Overall Rating On The Next Page.

2. When was that? FROM _____ TO _____ = ____ months
 FROM _____ TO _____ = ____ months
 FROM _____ TO _____ = ____ months

Total number of months _____

/64-66

3. Was this residence:

- | | 1 | 2 | |
|--|------------|-----------|-----|
| | <u>Yes</u> | <u>No</u> | |
| a. Your own (alone/shared) apartment/home that you paid for with your own earned income
(From _____ to _____) (From _____ to _____) | 1 | 2 | /67 |
| b. Your own (alone/shared) apartment/room that was paid for with welfare or other benefit
(From _____ to _____) (From _____ to _____) | 1 | 2 | /68 |
| c. Group living like a (halfway house, foster family) paid for with state or city funds
(From _____ to _____) (From _____ to _____) | 1 | 2 | /69 |

1. Has been able to sustain living in own home supported with earned income for period of at least one year.
2. Has been able to live in own home supported briefly and sporadically by earned income; most often housing supported by SSI or other entitlement.
3. Has been able to sustain group living for period of at least one year supported by SSI or other entitlement.
4. Has always lived in parental home and been financially dependent on family, SSI, or other entitlement. Efforts to live independently have always met with disaster (i.e., ended up in homeless shelters or on the streets).

Overall Rating _____

/70

Blank 71-77
Deck 611 78-80

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**NOW I AM GOING TO ASK YOU SOME QUESTIONS ABOUT YOUR PRESENT (FOR "HOMED" SUBJECTS)
OR MOST RECENT HOUSING THAT WAS NOT A SHELTER (FOR "HOMELESS" SUBJECTS)**

B. Over-crowdness

Criteria:

- a. Own room.
- b. Facilities in household.
- c. Perceived adequacy of physical space in household.

1. Including kitchen and living room how many rooms are (were) in your household? _____ /121
2. How many people live(d) in your household? _____ /122
3. Do (Did) you have your own room (to share with mate, if applicable)? /123
 - ___ 1. Yes
 - ___ 2. No

If No Probe: Is it because you sleep in the living room or because you share a bedroom with others? (Specify: _____)

4. Do (Did) you have enough space in your household? /124
 - ___ 1. Yes
 - ___ 2. No
5. Do (Did) you have a kitchen inside your home? /125
 - ___ 1. Yes
 - ___ 2. No
6. Do (Did) you have a bathroom inside your home? /126
 - ___ 1. Yes
 - ___ 2. No

1. Adequate
Subject has (had) own room and appropriate facilities in household (e.g., bathroom, a kitchenette if needed); physical space perceived as sufficient.
2. Fair
Subject has (had) own room; but amount of space is perceived as insufficient. Bathroom and kitchen facilities are located in household.
3. Poor
Subject has (had) to share room with others or bathroom or kitchen facilities are located outside of household; amount of space is perceived as insufficient. Subject has to share room with others in inadequate amount of space.
4. Grossly Inadequate
Subject has to share room and bathroom and kitchen facilities are (were) communal and located outside of household.
8. Not enough information to rate

Overall Rating _____ /12

C. Housing Conditions

Criteria:

- a. **Provision of utilities.**
- b. **Crime rate.**
- c. **Health and safety hazards.**

1. What is (was) the conditions of your building? _____ /131
 1= good 2= fair 3 = poor 4 = grossly inadequate
2. Do (Did) you have enough heat in the winter? /132
 1. Yes
 2. No
3. Is (Was) the building usually clean? /133
 1. Yes
 2. No

4. Do (Did) you have any problems with electricity or plumbing? (Like leaks or backed up pipes) /134

___ 1. Yes

___ 2. No

5. Is (Was) your building relatively safe? /135

___ 1. Yes

___ 2. No

6. Does (did) the apartment or building have obvious health or safety hazards? For example: (Pause between probes) No window gates, No smoke detector, broken elevators, no heat in the winter, backed up toilets, peeling walls or ceilings, lead or asbestos poisoning, gas leaks, mice or roaches. *If YES*, Specify : _____ /136

___ 1 = Yes ___ 2 = No

7. Have you or anyone else in the building had problems with crime? For example drug use or sales, robbery, murder, rape or graffiti. *If YES*, Specify: _____ /137

___ 1 = Yes ___ 2 = No

INTERVIEWER: In making rating, take note of the appearance of the apartment and the building.

1. Adequate
No problems with utilities, crime or building violations.
2. Fair
Occasional problems with utilities, crime or building violations.
3. Poor
Frequent problems with utilities or severe crime or severe health or safety violations.
4. Grossly Inadequate
Two of the following:
a) frequent problems with utilities.
b) serious crime.
c) severe health and safety hazards.
8. Not enough information to rate.

Overall Rating _____

/13

D. Socio-emotional Atmosphere

If you can have it your way, where or with whom would you most like to live?
(Pause, Read list only if necessary)

- 01. Your own apartment or room
- 02. Share apartment but not with a relative
- 03. A community residence - Where? _____
- 04. An adult home - Where? _____
- 05. With foster family
- 06. At home with parent(s)
- 07. With brothers, sisters, or similar age relative
- 08. With other relatives (Specify) _____
- 09. Some other situation (Specify) _____

/14-15

1. Subject Commitment to Present Living Arrangement (For Homeless Subjects: ask about Most Recent Non-Shelter Living Arrangement)

- Criteria:**
- a. Satisfaction with living arrangement.
 - b. Wish for alternative living arrangement.

(Ask about most recent non-shelter living arrangement)

a. How do (did) you feel about the place and the people you live(d) with. What (else) do you like about it? What (else) don't you like about it?

b. Do (did) you prefer to live elsewhere?

- 1. Yes
- 2. No

/16

Despite response did S seem unsure about moving or was mixed (yes and no) about it. Specify _____

If No, Skip To Overall Rating On The Next Page

c. If YES, ask why (or why else)?

	1	2	
	<u>Yes</u>	<u>No</u>	
1. Getting along -- problems at home	1	2	/17
2. Desire for independence (on your own)	1	2	/18
3. Apartment is inadequate, e.g., overcrowded, run-down, burned down	1	2	/19

- | | | | |
|---|---|---|-----|
| 4. Rules too strict--cannot come and go as please | 1 | 2 | /20 |
| 5. Foster family | 1 | 2 | /21 |
| 6. Drugs/alcohol not allowed | 1 | 2 | /22 |
| 7. Other (Specify) _____ | 1 | 2 | /23 |

d. What (is preventing /prevented) you from finding another place to live?

Pause (Provide choices below only after S responds)

- | | 1 | 2 | |
|---|------------|-----------|-----|
| | <u>Yes</u> | <u>No</u> | |
| Is it: | | | |
| 1. No satisfactory alternative available
Specify _____ | 1 | 2 | /24 |
| 2. Lack of money to go elsewhere | 1 | 2 | /25 |
| 3. Family pressure to stay | 1 | 2 | /26 |
| 4. Family resistance to accept you back home | 1 | 2 | /27 |
| 5. You cannot gain admission due to drug or alcohol problem | 1 | 2 | /28 |
| 6. You cannot gain admission due to prison or crime history | 1 | 2 | /29 |

1. Adequate
Subject satisfied with living arrangement and has no wish for alternative.
2. Fair
Subject somewhat satisfied with present situation. In spite of some difficulties there are some benefits as well. Subject may desire an alternative but staying is also okay.
3. Poor
Although difficulties aren't overwhelming, no benefits exist. Subject is not satisfied with living arrangement. Subject would consider an alternative if opportunity became available.
4. Grossly Inadequate
Subject very dissatisfied with living situation and does not want to stay. Overwhelming difficulties.
8. Not enough information to rate.

Overall Rating _____

/30

2. Support for Treatment (if applicable) - in present (or most recent non-shelter) living arrangement

a. In the *(past 30 days/30 days before being hospitalized)*, was anyone available where you live to remind you to take your prescribed medications and/or keep clinic appointments? Who? How?

- 1. No
- 2. Yes, family member
- 3. Yes, fellow resident/roommate
- 4. Yes, mental health worker
- 5. Yes, house parent or staff of group/adult home
- 6. Other (Specify) _____
- 9. Inapplicable

/31

3. Substance Use in present living (or most recent non-shelter) arrangement

Criteria:

- a. Frequency amount of alcohol/drug use by other residents.**
- b. Frequency of intoxication.**

a. In the *(past 30 days/30 days before being hospitalized)* did others where you were living use drugs or alcohol? Who? _____
 What did they use? _____

- 1. Yes
- 2. No

/32

If No, Skip To Overall Rating

b. How often per week? _____ *If necessary ask:*

- 1. Many times
- 2. Few times
- 3. Once or twice
- 4. Never

/32b

c. How much?

- 1. A lot
- 2. Moderate
- 3. A little

/32c

Name of Person	Relationship to you	Type of Substance Used	Frequency of Use (b)	Amount Of Use (c)
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____

d. Were you influenced to use drugs or alcohol?

___ 1. Yes

/33

___ 2. No

If YES, how so? _____

e. Would you prefer (have preferred) to live somewhere else because you were influenced to use drugs or/and alcohol

___ 1. Yes

/34

___ 2. No

f. Would you prefer (have preferred) to live somewhere else because (people named) started fights or arguments with other people in your household?

___ 1. Yes

/35

___ 2. No

g. Would you prefer (have preferred) to live somewhere else because (people named) started fights or arguments with you?

___ 1. Yes

/36

___ 2. No

h. Did anyone become violent because of drug or alcohol use?

___ 1. Yes

/37

___ 2. No

If YES, how so? _____

1. Abstinent

Alcohol/drug use rare or non-existent.

2. Mild

Members use drugs or alcohol weekly or less frequently. Intoxication rare.

3. Moderate

Members use drugs or alcohol several times a week, but not daily. Intoxication does occur but not often.

4. Heavy

Members use drugs or alcohol daily or intoxication occurs frequent.

Overall Rating _____

/38