

**Questionnaire for BASICS In-service:**

Looking at the Quality of Life of Individual Residents With Dementia

Name \_\_\_\_\_ Date \_\_\_\_\_

1. What kind of a person do you see yourself as? List the qualities that describe the way you see yourself:

a) \_\_\_\_\_

b) \_\_\_\_\_

c) \_\_\_\_\_

d) \_\_\_\_\_

e) \_\_\_\_\_

f) \_\_\_\_\_

2. Do you have other qualities that are displayed more often in certain situations and with different types of people? List them for each setting:

Family: \_\_\_\_\_

Friends: \_\_\_\_\_

Work: \_\_\_\_\_

Play: \_\_\_\_\_

3. Who or what in your life supports these qualities in you?

\_\_\_\_\_

4. How does that make you feel?

\_\_\_\_\_

5. What do you need help with at home?

\_\_\_\_\_

a) What do you like or need help with?

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6. At work, what do you prefer to do without help?

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a) What do you like or need help with at work?

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7. How do you feel when someone treats you as if you don't know how to do something that you do know how to do?

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a) How do you feel when this happens at home?

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b) At work?

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8. How do you care for each level of your needs on the BASICS Hierarchy? What are your preferred ways of satisfying needs on each level of BASICS listed below:

a) Biological - (feeling safe and physically comfortable):

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b) Activities of Daily Living - (experience a feeling of control):

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c) Societal - (feel unique among others):

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d) Inter-personal - (feel valued as a person):

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e) Creative - (experience optimal stimulation-live up to highest possible level):

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f) Symbolic - (experience pleasure and hopefulness):

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9. Has the way you meet your needs in BASICS changed as you have grown older?

Yes \_\_\_\_ No \_\_\_\_ How \_\_\_\_\_

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10. If you were to go into a nursing facility, what would you like the staff to remember when caring for you?

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a) Which preferred ways of satisfying your needs in BASICS would you like to continue in the nursing facility?

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b) How could staff support you to do this in the facility?

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c) What would you miss the most if you were in a nursing facility?

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