

DPD

Designing for People with Dementia

The Environmental Audit Tool – High Care

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Introduction to the Environmental Audit Tool – High Care (EAT-HC)

The Environmental Audit Tool – High Care (EAT-HC) can be used to audit facilities where people with dementia are less mobile or where residents are still very active. (In this way it extends the focus of the original Environmental Audit Tool, first published by NSW Health in the book 'Adapting the Ward'.)

The purpose of the EAT- HC is to provide managers and staff of aged and health care facilities caring for people with dementia with the means to identify the strengths and weaknesses of the physical environments they use. The tool's organization around key design principles encourages structured conversations, and enables modifications to be planned that will assist people with dementia to live at their full potential.

The EAT-HC is based on a set of eight key design principles which are summarised overleaf.

Carrying out the audit

The following steps to carrying out an audit are recommended:

1. Familiarise yourself with the principles underpinning the EAT- HC and the questions.
2. If you do not know the unit well, enlist the help of someone who does and ask them to show you the boundaries of the unit so that you are clear about the area that is to be audited.
3. While you walk around the boundary keep the questions in mind.
4. Sit in a central position and answer the questions in order. When you come to a question that you can't answer from that position move around until you can answer it. In doing this you will find that you look at the unit from a number of different points of view. Some questions are best answered by asking staff, e.g." Is the wardrobe that the resident uses full of a confusing number of clothes?"

The opportunity to describe some items as Not Applicable (in the N/A column) when they are not relevant to the facility being assessed makes the calculation of sub-scale scores difficult. An Excel spread sheet has been developed that will take these into account when calculating sub-scale and total scores. It is highly recommended that you download this from www.dtsc.com.au . You will find that it will help you with analysing and reporting your results. The use of the spread sheet for scoring also enables the EAT- HC to be completed by a number of people and the scores determined by the consensus view. This encourages discussion, familiarizes more people with the principles of good design and facilitates ownership of the results of the audit.



Key Design Principles

An environment that is to be used to provide care aimed at maintaining the abilities of people with dementia should

1. Unobtrusively reduce risks

People with dementia require an internal and external environment that is safe, secure and easy to move around if they are to make the best of their remaining abilities. However, obvious safety features and barriers will lead to frustration, agitation and anger and so potential risks need to be reduced unobtrusively.

2. Provide a human scale

The scale of a building will have an effect on the behaviour and feelings of a person with dementia. The experience of scale is determined by three factors; the number of people that the person encounters, the overall size of the building and the size of the individual components, such as doors, rooms and corridors. A person should not be intimidated by the size of the surroundings or confronted with a multitude of interactions and choices. Rather the scale should help the person feel in control.

3. Allow people to see and be seen

The provision of an easily understood environment will help to minimise confusion. It is particularly important for people with dementia to be able to recognise where they are, where they have come from and what they will find if they head in a certain direction. When they can see key places, such as a lounge room, dining room, their bedroom, kitchen and an outdoor area they are more able to make choices and find their way to where they want to go. Buildings that provide these opportunities are said to have good visual access. Good visual access opens up opportunities for engagement and gives the person with dementia the confidence to explore their environment. It can also enable staff to see residents from where they spend most of their time. This reduces their anxiety and the anxiety of the residents.

4. Manage levels of stimulation

- **Reduce unhelpful stimulation**

Because dementia reduces the ability to filter stimulation and attend to only those things that are important, a person with dementia can become stressed by prolonged exposure to large amounts of stimulation. The environment should be designed to minimise exposure to stimuli that are not helpful. The full range of senses must be considered. Too much visual stimulation, for example, is as stressful as too much auditory stimulation.

- **Enhance helpful stimulation**

Enabling the person with dementia to see, hear and smell things that give them cues about where they are and what they can do, can help to minimise their confusion and uncertainty. Consideration needs to be given to providing redundant cueing ie providing a number of cues to the same thing, recognizing that what is meaningful to one person will not necessarily be meaningful to another. A person may recognize their bedroom, for example, because of a view, the presence of furniture, the colour of the walls, the light fitting and/or the bedspread. Cues need to be carefully designed so that they do not add to clutter and become over-stimulating.



5. Support movement and engagement

Aimless wandering can be minimised by providing a well-defined pathway, free of obstacles and complex decision points, that guides people past points of interest and gives them opportunities to engage in activities or social interaction. The pathway should be both internal and external, providing an opportunity and reason to go outside when the weather permits.

6. Create a familiar place

The person with dementia is more able to use and enjoy spaces and objects that were familiar to them in their early life. The environment should afford them the opportunity to maintain their competence through the use of familiar building design (internal and external), furniture, fittings and colours. This will involve an understanding of the personal background of the people living in the environment. The involvement of the person with dementia in personalising the environment with their own familiar objects should be encouraged.

7. Provide opportunities to be alone, with other residents or with others from the community

People with dementia need to be able to choose to be on their own or spend time with others. This requires the provision of a variety of spaces, some for quiet conversation with one or two others and some for larger groups, as well as spaces where people can be by themselves. These internal and external spaces should have a variety of characters, e.g. a place for reading, looking out of the window or talking, to cue the person to what is available and stimulate different emotional responses.

Without constant reminders of who they were, a person with dementia will lose their sense of identity. Frequent Interaction with friends and relatives can help to maintain that identity. This is made easier when the person is admitted from the local community as friends and relatives are able to drop in easily.

The environment must include spaces for the resident and their visitors to use within the unit and in its immediate surrounds. These need to be attractive and comfortable to encourage visitors to come and spend time. Stigma remains a problem for people with dementia so the unit should be designed to blend with the existing buildings and not stand out as a 'special' unit. Where possible a 'bridge' should be built between the unit and the community by providing a space that is used by both the community and people with dementia. Where the unit is a part of a larger site, there should be easy access around the site so people with dementia, their families and friends can interact with other people who live there.

8. Support the values and goals of care

An environment that embodies the values and goals of care, e.g. provides opportunities for engagement with the ordinary activities of daily living to support rehabilitation goals, will assist the patient with dementia to respond appropriately and the staff to deliver the desired care. The values and goals need to be clearly stated and the building designed both to support them and to make them evident to the person with dementia and staff. The building becomes the embodiment of the philosophy of care, constantly reminding the staff of the values and practices that are required while providing them with the tools they need to do their job.



UNOBTRUSIVELY REDUCE RISKS		N/A	NO	YES	Add 1 if Unobtrusive	Score
1	Can people who live in the unit be prevented from leaving the garden/outside area by getting over or under the perimeter? (NA=no outside area)	N/A	0	1	1	
2	Can people who live in the unit be prevented from leaving the garden/outside area through the gate? (NA= no outside area)	N/A	0	1	1	
3	Can the front door leading out of the unit be secured?	N/A	0	1	1	
4	Outside, is there step free access to all areas? (NA=No outside area)	N/A	0	1		
5	Outside, are all floor surface materials safe from being slippery when wet? (NA=No outside area)	N/A	0	1		
6	Outside, is the path surface even? (NA=No outside area)	N/A	0	1		
7	Outside, are the paths clear of obstacles (eg trees, thorny plants) along and over the path? (NA=No outside area)	N/A	0	1		
8	Outside, are the paths wide enough to allow two wheelchairs to pass? (Minimum width is 1.8 metres). (NA=No outside area)	N/A	0	1		
9	Outside, are all ramps of a gradient suitable for wheelchair use? (Gradient 1 in 14 or less). (NA= no outside area)	N/A	0	1		
10	Is there a way to keep residents out of the kitchen(s) if required? (NA = no resident accessible kitchen(s))	N/A	0	1	1	
11	Can appliances be locked away in the kitchen(s) the residents use? (NA = no resident accessible kitchen(s))	N/A	0	1	1	
12	Is there a switch to turn off electricity to power points in the kitchen(s) the residents use? (NA= no resident accessible kitchen(s))	N/A	0	1	1	
13	Inside, are all floor surfaces safe from being slippery when wet?		0	1		
14	Inside, is contrast between floor surfaces avoided (eg sharp distinction between bedroom floor and corridor)?		0	1		
15	Inside, are all ramps of a gradient suitable for wheelchair use? (Gradient 1 in 14 or less) (No ramps =1)		0	1		
16	Is it easy to transfer a non-ambulant person from their bed to the ensuite/WC (using appropriate equipment)?		0	1		



PROVIDE A HUMAN SCALE						Score
Number of people						
1	How many people live in the unit?	10 or less Score 3	11-16 Score 2	17-19 Score 1	30+ Score 0	
Scale of building						
2	Does the scale (height and width) of the common areas allow a person to feel comfortable (and not uneasy because it is/they are too big or too small)?			No Score 0	Yes Score 1	

ALLOW PEOPLE TO SEE AND BE SEEN						Score
1	What proportion of residents can see the inside of a lounge room as soon as they leave their bedroom?	25% or less Score 0	26% - 50% Score 1	51% - 75% Score 2	76% or more Score 3	
2	What proportion of residents can see their bedroom entry as soon as they leave a lounge room? (Bedroom entry includes bedroom door, architrave or other feature specific to a particular bedroom)	25% or less Score 0	26% - 50% Score 1	51% - 75% Score 2	76% or more Score 3	
3	What proportion of residents can see the inside of a dining room as soon as they leave their bedroom?	25% or less Score 0	26% - 50% Score 1	51% - 75% Score 2	76% or more Score 3	
4	Can the exit to a garden or outside area be seen from the lounge or dining room(s) that is used by most residents? (NA=no lounge, dining room or outside area)		N/A	NO Score 0	YES Score 1	
5	Can the dining room(s) be seen into from the lounge room(s)? (Answer with reference to lounge and dining room used by most residents) (NA=no lounge or dining room)		N/A	NO Score 0	YES Score 1	
6	Can a toilet be seen from the lounge room(s) that is used by most residents? (NA=no lounge room)		N/A	NO Score 0	YES Score 1	
7	Can a toilet be seen from the dining room(s) that is used by most residents? (NA=no dining room)		N/A	NO Score 0	YES Score 1	
8	Can the lounge room(s) that is used by most residents be seen into from where staff spend most of their time? (NA=no lounge room)		N/A	NO Score 0	YES Score 1	
9	Can the dining room(s) that is used by most residents be seen into from where staff spend most of their time? (NA=no dining room)		N/A	NO Score 0	YES Score 1	
10	Can a garden or outside area for the residents be seen from where staff spend most of their time? (NA=no outside area)		N/A	NO Score 0	YES Score 1	



MANAGE LEVELS OF STIMULATION						
Reduce Unhelpful Stimulation			NO	YES		Score
1	Are doors to cleaner's cupboards, storerooms and other areas where residents may find danger easily seen?		1	0		
2	Is the wardrobe (or cupboard) that the resident uses full of a confusing number of clothes and/or irrelevant objects?		1	0		
3	Is there a public address, staff paging or call system with bells, loudspeakers or flashing lights in use?		1	0		
4	Does the noise from closing doors disturb residents, eg flapping kitchen doors, noisy automatic doors?		1	0		
5	Is there a lot of visual clutter in the unit (ie notices, objects, furniture that are either irrelevant to residents or make it hard for them to interpret their environment)?		1	0		
6	Inside, can glare be avoided by using curtains and blinds?		1	0		
Enhance helpful stimulation						Score
7	Does each room have a distinctive character and feel? ie is it easy to identify a room as a dining room or a lounge room?		NO Score 0	YES Score 1		
8	Is the dining room(s) clearly recognizable from outside the room ? (NA= no dining room)	NA	NO Score 0	YES Score 1		
9	What percentage of residents have a clearly defined path from their room to the dining room, for example by using colour objects and signage, or can see the dining room from their room?		25% or less Score 0	26% - 50% Score 1	51% - 75% Score 2	76% or more Score 3
10	Is the lounge room(s) clearly recognizable from outside the room? (NA= no lounge room)	NA	NO Score 0	YES Score 1		
11	Are different corridors clearly recognisable so residents can identify where they are? (NA = no corridor)	NA	NO Score 0	YES Score 1		
12	Are personalized signs, symbols or displays prominently displayed to identify bedrooms?		NO Score 0	YES Score 1		
13	Are shared ensuites/bathrooms/toilets clearly marked with a sign (text and symbol) or colour coded door? (NA = no shared ensuite, bathroom or toilet)	NA	NO Score 0	YES Score 1		



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14	Is, or can, the bed be placed so that it possible to see the toilet pan from the bed when lying down?		NO Score 0		YES Score 1		
15	Do the toilet seats contrast with the background?		25% or less Score 0	26% - 74% Score 1	75% or more Score 2		
16	What percentage of residents have a window that provides an attractive view to the outside from their bed?		25% or less Score 0	26% - 50% Score 1	51% - 75% Score 2	76% or more Score 3	
17	Inside, are contrasting materials used so that edges of surfaces and objects can be easily seen? (eg coloured borders, different floor, wall and ceiling colour)		NO Score 0		YES Score 1		
18	Inside, are olfactory cues (such as perfumed flowers, or kitchen smells) used to provide a variety of experiences for a person with dementia and help them know where they are?		NO Score 0		YES Score 1		
19	Inside, have tactile cues been used to provide a variety of experiences for a person with dementia and help them know where they are?		NO Score 0		YES Score 1		
20	Inside, have auditory cues been used to provide a variety of experiences for a person with dementia and help them know where they are? (eg music, sound of a water feature)		NO Score 0		YES Score 1		
21	Outside, are contrasting materials used so that edges of surfaces and objects can be easily seen? (eg coloured borders on paths, different colours and materials for seats and ground surfaces) (NA=no outside area)	NA	NO Score 0		YES Score 1		
22	Outside, are a variety of materials and finishes used to create an interesting and varied environment for a person with dementia and help them know where they are? (eg brick, timber stone, grass) (NA=no outside area)	NA	NO Score 0		YES Score 1		
23	Outside, are olfactory cues (such as perfumed plants) used to provide a variety of experiences for a person with dementia and help them know where they are? (NA=no outside area)	NA	NO Score 0		YES Score 1		
24	Outside, have auditory cues been used to provide a variety of experiences for a person with dementia and help them know where they are? (eg wind chimes) (NA=no outside area)	NA	NO Score 0		YES Score 1		
25	Inside, is there an attractive view to outside from the lounge and/or dining room for a person seated or lying down?		NO Score 0		YES Score 1		



SUPPORT MOVEMENT AND ENGAGEMENT		N/A	NO	YES	Score
1	Is there a clearly defined accessible (ie no locked exit) path that avoids dead ends and locked exits and guides the resident from inside to outside and back to their starting point? (NA= no outside area)	N/A	0	1	
2	Outside, is there a path that guides residents passed areas that might invite participation in an appropriate activity? (NA= no outside area)	N/A	0	1	
3	Outside, is there a choice of activities for residents to participate in (such as sorting tools, seeing birds, checking the clothesline)? (NA= no outside area)	N/A	0	1	
4	Outside, are there chairs or benches at frequent intervals so people can sit and enjoy the fresh air? (NA= no outside area)	N/A	0	1	
5	Outside, are there both shady and sunny areas along the path? (NA= no outside area)	N/A	0	1	
6	Outside, does the path allow residents to be taken past a range of activities that they can passively participate in (such as looking at plants, watching birds)? (NA= no outside area)	N/A	0	1	
7	Are there verandahs or shaded seating areas in close proximity to the building?		0	1	
8	Inside, is there a path that guides residents passed areas that might invite participation in an appropriate activity (such as folding clothes, listening to music)?		0	1	
9	Inside, does the path take residents passed chairs that provide opportunities for rest and/or conversation?		0	1	

CREATE A FAMILIAR PLACE		N/A	None	A Few	Many	Score
1	Are there any pieces of furniture in the lounge room(s) that are of a design that are not familiar to the majority of residents? (NA=no lounge room)	N/A	2	1	0	
2	Are there any pieces of furniture in bedrooms that are of a design that are not familiar to the majority of residents?		2	1	0	
3	Have most of the residents decorated their bedrooms (eg with photos, pictures, objects)?		0	1	2	
4	Do residents have their own furniture in their own bedrooms?		0	1	2	



PROVIDE OPPORTUNITIES TO BE ALONE, WITH OTHER RESIDENTS OR WITH OTHERS FROM THE COMMUNITY						
From the unit						Score
1	Within the unit, are there places where a small group of people can gather?	NO Score 0	1 Score 1	2 or more Score 2		
2	Within the unit, are there places where a person can be on their own and/or in private conversation (eg nooks, sitting areas)?	NO Score 0	1 Score 1	2 Score 2	3 or more Score 3	
3	How many different characters are there within the unit (eg cosy lounge, TV room, sunroom)?	1 Score 0	2 or 3 Score 1	4 or more Score 2		
4	Does the dining room allow for a choice to eat alone?	NO Score 0		YES Score 1		
5	Does the lounge room provide opportunities for people to be in private conversation?	NO Score 0		YES Score 1		
6	Outside, are there places in the garden or outdoor area where a person can be on their own and/or in private conversation?	NO Score 0		YES Score 1		
From the community						Score
7	Is there easy access to place(s) which encourage interaction and engagement with the wider community (eg children, knitting groups, church groups)?	NO Score 0		YES Score 1		
8	Is there a room where families can share meals and/or celebrations with their relatives?	NO Score 0		YES Score 1		
9	Is there an easily accessible place where families and friends can feel comfortable while taking a break from visiting, eg when visiting a very sick person?	NO Score 0		YES Score 1		

SUPPORT THE VALUES AND GOALS OF CARE		Score
<p>What is the vision/purpose of the unit for people with dementia? To provide:-</p> <ul style="list-style-type: none"> a) A homelike environment b) A hotel like environment with hotel like services c) A medical care facility d) A lifestyle environment focusing on recreation, exercise or another aspect of lifestyle e) Be a center of excellence for people with dementia f) Other . . . 	Circle one option	
<p>How well does the built environment enable this to happen? (Ask the manager or their representative for their view)</p> <p>1 = not at all well 5 = extremely well</p>	<p>Circle one option</p> <p>1 2 3 4 5</p>	



EAT-HC Additional items

Here are some additional questions you may wish to consider.

These are questions that did not meet measurement requirements for inclusion in the EAT-HC, but may nonetheless be useful for consultation purposes.

UNOBTRUSIVELY REDUCE RISK		N/A	NO	YES	Add 1 if Unobtrusive	Score
1	Can people who don't live in the unit be prevented from getting in through the gate to the garden/outside area? (NA= no outside area)	N/A	0	1	2	
2	Can all side doors leading out of the unit be secured? (This does not refer to side doors leading to a secure garden/outdoor area.)		0	1	2	
3	Can bedroom windows (and/or doors) be restricted in the extent to which they open so that people cannot climb in or out?	N/A	0	1	2	
4	Is there a lockable knife draw in the kitchen(s) the residents use (NA = no resident accessible kitchen(s))	N/A	0	1	2	
5	Is the cook top in the kitchen(s) the residents use a gas cooktop? (NA= no resident accessible kitchen(s) or no cooktop)	N/A	0	1		
6	Are rooms large enough to allow for the use of mobility aids (wheelchairs, frames)?		0	1		
On the whole, how well do you think this facility responds to the principle of 'Unobtrusively reduce risk'?				Circle one option		
1 = not at all well 5 = extremely well				1 2 3 4 5		



PROVIDE A HUMAN SCALE		N/A	NO	YES	Score
1	Does the detailing of the unit inside (eg use of different finishes and materials) focus on the human scale?		0	1	
2	Does the detailing of the unit outside (eg window finishes, variety of materials) focus on the human scale? (Is a person not dwarfed or intimidated by the facility when outside?) (NA=No outside area)		0	1	
On the whole, how well do you think this facility responds to the principle of 'Provide a human scale'?		Circle one option			
1 = not at all well 5 = extremely well		1 2 3 4 5			

ALLOW PEOPLE TO SEE AND BE SEEN					Score
1	What proportion of residents can see their bedroom entry as soon as they leave a dining room? (Bedroom entry includes bedroom door, architrave or other feature specific to a particular bedroom)	25% or less Score 0	26%-50% Score 1	51%-75% Score 2	76% or more Score 3
On the whole, how well do you think this facility responds to the principle of 'Allow people to see and be seen'?					
1 = not at all well 5 = extremely well					

MANAGE LEVELS OF STIMULATION					
Reduce Unhelpful Stimulation		N/A	NO	YES	Score
1	Is the noise from any kitchen disturbing for residents?		1	0	
2	Are deliveries of food, linen etc taken through resident areas such as lounge or dining rooms?		1	0	
3	Is there any constant source of noise that could be confusing or disturbing for residents (eg loud TV/radio left on regardless of people watching/listening)?		1	0	
4	Is the front door to the unit easily visible to residents?		1	0	
5	Is the service entry (where food linen etc is delivered) easily visible to residents?		1	0	
6	Are there mirrors that could be confusing or disturbing for residents?		1	0	
7	Are there unpleasant smells or odours?		1	0	



Enhance helpful stimulation		N/A	NO	YES	Score
8	Are different parts of a long corridor clearly recognizable so residents can identify where they are? (NA = no long corridor)	N/A	0	1	
9	In the daytime, when standing in the middle of the lounge room(s), can you (the observer) read this question using only daylight? (NA= no lounge room)	N/A	0	1	
10	In the daytime, when standing in the middle of the dining room(s), can you (the observer) read this question using only daylight? (NA= no lounge room)	N/A	0	1	
11	In the daytime, when standing in the middle of a (typical) corridor, can you (the observer) read this question using only daylight? (NA= no corridor)	N/A	0	1	
12	In the daytime, when standing in the middle of the resident accessible kitchen(s), can you (the observer) read this question using only daylight? (NA = no resident accessible kitchen)	N/A	0	1	
13	In the daytime, when standing in the middle of the lounge room(s), can you (the observer) read this question using artificial light? (NA= no dining room)	N/A	0	1	
14	In the daytime, when standing in the middle of the dining room(s), can you (the observer) read this question using artificial light? (NA= no dining room)	N/A	0	1	
15	In the daytime, when standing in the middle of a (typical) corridor, can you (the observer) read this question using artificial light? (NA= no corridor)	N/A	0	1	
16	In the daytime, when standing in the middle of the resident accessible kitchen(s), can you (the observer) read this question using artificial light? (NA = no resident accessible kitchen)	N/A	0	1	
17	Inside, are a variety of materials and finishes used to create an interesting and varied environment for a person with dementia and help them know where they are? (eg timber flooring, vinyl, carpet, exposed roof beams, wall paneling)		0	1	
18	Outside, have tactile cues been used to provide a variety of experiences for a person with dementia and help them know where they are? (eg timber deck and concrete paths) (NA=no outside area)	N/A	0	1	
On the whole, how well do you think this facility responds to the principle of 'Manage levels of stimulation'?			Circle one option		
1 = not at all well 5 = extremely well			1 2 3 4 5		



SUPPORT MOVEMENT AND ENGAGEMENT		NO	YES	Score
1	Inside, is there a choice of activities for residents to participate in?	0	1	
2	Inside, does the route allow residents to be taken past a range of activities that they can passively participate in (such as enjoying a view, listening to music)?	0	1	
On the whole, how well do you think this facility responds to the principle of 'Support movement and engagement'?		Circle one option 1 2 3 4 5		
1 = not at all well 5 = extremely well				

CREATE A FAMILIAR PLACE		N/A	None	A Few	Many	Score
1	Are there colours in the furnishings or the decoration of the lounge room(s) that are not familiar to the majority of residents? (NA=no lounge room)	N/A	2	1	0	
2	Are there fittings and fixtures (eg taps, light switches) in the unit that are of a design that are not familiar to the majority of residents?		None or 1 Score 2	1	0	
	On the whole, how well do you think this facility responds to the principle of 'Create a familiar place'?			Circle one option		
	1 = not at all well 5 = extremely well			1 2 3 4 5		



PROVIDE OPPORTUNITIES TO BE ALONE, WITH OTHER RESIDENTS OR WITH OTHERS FROM THE COMMUNITY						
From the unit		N/A	NO	YES		Score
1	Near or within the unit, are there easily accessible places, other than the main lounge, where a group of more than 8 people can gather?		0		2 or more Score 2	
2	Outside, are there places in the garden or outdoor area where a small group of people can gather?		0	1	1 Score 1	
From the community						
3	Is there easy access to place(s) which encourage interaction and engagement with residents who live elsewhere on the site? (NA = no other residents living on site)	N/A	0	1		
4	Does the building blend into the streetscape?		0	1		
5	Is there a place for residents to go to if they do not wish to take part in an activity involving visitors from the community?		0	1		
On the whole, how well do you think this facility responds to the principle of 'Provide opportunities to be alone, with other residents or with others from the community'?				Circle one option 1 2 3 4 5		
1 = not at all well 5 = extremely well						



