



City and County of San Francisco
Shelter Monitoring Committee

SHELTER MONITORING COMMITTEE SENIOR SURVEY

INSTRUCTIONS: Introduce yourself. Explain the SMC is studying senior citizens living in homeless shelters for the purpose of making recommendations to improve services for seniors who are homeless. State there are 11 questions in this survey but you will also provide them with the opportunity to share any of their concerns. The survey is anonymous and the shelter staff and any others outside of the SMC will not see their specific answers.

1. What is your race/ethnicity? Check all that apply:
Alaskan Native/Native American; Asian; Hispanic or Latino; Native Hawaiian/Other Pacific Islander; Black/African American; White; More than one race; Other
2. What is your current sexual orientation?
Male; Female; Transgender (Female to Male); Transgender (Male to Female);
Don't know; Decline to answer; Other
3. a. How long have you been in this shelter? less than 1 month; 1-2 months;
 2-4 months; 4-6 months; 6-12 months; 1-2 years; Over 2 years
4. Have you been in other shelters? No Yes, how many other shelters ____
5. How long have you been homeless? less than 1 month; 1-2 months;
 2-4 months; 4-6 months; 6-12 months; 1-2 years; Over 2 years
6. How long have you lived in San Francisco? less than 1 month; 1-2 months;
 2-4 months; 4-6 months; 6-12 months; 1-2 years; 2-5 years; more than 5 yrs.
7. How old are you? 55-60 60-65 65-70 70-75 75-80 80-85 85 -90
8. Can you share with me how you became homeless? lost job/unemployed;
 became disabled; relocated to San Francisco; Other
9. Do you have any family? Yes Spouse? Children? Relatives? No
When was the last time you saw them? 1-12 months; 2-4 years; 5 years or more
Where do they live? California Another State Not in United States
10. Do you have a primary care doctor that is taking care of you? Yes No
11. Do you have any medical conditions that are not being treated? No Yes
12. Do you have a Case Manager? Yes; No

13. What type of housing do you want? Independent Living; Assisted Living;
 Nursing Home; Live with family; Senior Citizen Housing

14. OTHER CONCERNS: