Family Interview Checklist

About This Checklist: This questionnaire is to be used to interview a family member about their loved one. By using the TSOLife mobile app, the information captured in this conversation will be used to create a resident profile for the resident.

Introducing the Conversation to Family Members: Thank you for taking the time to help me get to know your loved one. I'm going to ask you some questions about their life story, preferences, hobbies and interests. This information will be used to help us provide your loved one with the best experience possible in our communities.

Tip for the Interview: Think of these questions as guidelines to help you along the way, and let the in-depth conversations flow. Have fun!

1. THE BASICS

- ☐ What is your loved one's full name?
- ☐ Do they have any nicknames?
- ☐ What do they prefer to be called?
- ☐ What is your [resident name]'s primary language?
- ☐ Tell me a little about [resident name].

2. GROWING UP

- ☐ When and where was [resident name] born?
- ☐ What was their experience like growing up?
- ☐ What places did they live and what were they like?

3. FAMILY

- ☐ Tell me a little about [resident name]'s family.
- ☐ Talk about their parents.
  - ○ What are their names?
  - ○ What were they like?
- ☐ Does [resident name] have siblings?
  - ○ What are their names?
- ☐ Is [resident name] married?
  - ○ If yes, what is their spouse's name?
  - ○ When is their anniversary?
  - ○ How did they meet?
- ☐ Does [resident name] have any children?
  - ○ What are their children's names?
  - ○ Does [resident name] have any grandkids/great-grandkids?

4. CAREER & MILITARY SERVICE

- ☐ What did [resident name] do for work?
  - ○ Companies
  - ○ Years of service
  - ○ Year retired
- ☐ Was [resident name] in the military?
  - ○ Years served
  - ○ Rank
  - ○ Service during war?
  - ○ Awards and recognition received?
- ☐ Did [resident name]'s spouse serve in the military?

5. EDUCATION

- ☐ Tell me about [resident name]'s education.
  - ○ Education level
  - ○ Names of schools
  - ○ Degrees

6. DAILY ACTIVITIES & INTERESTS

- [ ] What does a typical day look like for [resident name]?
    - Morning, daytime, and bedtime routines

Hobbies/Activities

- [ ] What kinds of hobbies or interests does [resident name] have?
- [ ] Does [resident name] enjoy watching sports?
    - Favorite sport(s) and team(s)
- [ ] Does [resident name] like movies or television?
    - Favorite movie(s) and TV show(s)
- [ ] What board games or card games does [resident name] enjoy?
- [ ] Are they a member of any clubs?
- [ ] What kinds of physical activities does [resident name] like to do now?

Creativity/Arts

- [ ] Is [resident name] interested in any arts?
- [ ] Does [resident name] have any musical interests?
    - Play an instrument?
    - Favorite kind of music?

Learning

- [ ] What does [resident name] enjoy studying or what would they like to learn about?
- [ ] Does [resident name] speak any other languages?
- [ ] Does [resident name] like to read?
    - Favorite reading materials
    - Favorite author(s)
- [ ] What kind of activities does [resident name] like to participate in?
- [ ] Is [resident name] technology savvy?
    - Technology used
    - Names of websites visited or apps used

7. FAITH & RELIGION

- [ ] Do you consider [resident name] a religious person?
    - What religion or denomination?
    - Do they regularly attend a place of worship?
- [ ] Has [resident name] held any roles like choir member, pastor, deacon, Sunday school teacher, etc.?
- [ ] What kinds of personal faith activities does [resident name] enjoy?
    - Bible Study, Prayer, Hymn singing
    - Meditation, Music, Nature
- [ ] What could we provide to support [resident name]'s spiritual journey?
    - Access to any services or groups?
    - Any dietary restrictions?

8. LOOKING BACK & WITHIN

- [ ] What does [resident name] find fulfilling or gives them a sense of purpose?
    - Community/charity work/volunteering
    - Creative activities
- [ ] What kinds of things are important to [resident name]?
- [ ] What are some places [resident name] has traveled?

9. TAKING CARE OF YOU

- [ ] What is [resident name]'s personal care routine?
    - Makeup?
    - Manicures?
    - Pedicures?
    - Hair?
- [ ] Is there anything that we can do to help keep [resident name] comfortable?
- [ ] What calms and/or reassures [resident name] in times of stress?

10. DINING

- [ ] What kinds of foods does [resident name] like?
- [ ] Any foods that [resident name] doesn't like?
- [ ] What does [resident name] typically eat for breakfast?
- [ ] What does [resident name] typically eat for lunch?
- [ ] What does [resident name] typically eat for dinner?
- [ ] What snacks does [resident name] typically enjoy?
- [ ] Does [resident name] like to cook?

11. OTHER LIKES, DISLIKES, & ITEMS OF NOTE

- [ ] Does [resident name] have any pets?
    - Type of pet
    - Pet name
- [ ] Has [resident name] ever had or worked with any other animals?
- [ ] Are there any animals that [resident name] is afraid of?
- [ ] Why did [resident name] choose to move into a community?
- [ ] Where did [resident name] move from?
    - Location or address
    - Rent or own?
- [ ] Why did [resident name] choose this community?

12. FRIENDSHIPS

- [ ] What are some things you would like others to know about [resident name]?
- [ ] If someone wanted to get to know [resident name] and become a friend, what would be the best way?