Questionnaire:  
Business

Businesses can become dementia friendly by training employees on how to recognize the signs of dementia, how to communicate effectively with people who have dementia and their families and by creating welcoming physical environments.

The information gathered in this questionnaire is part of the full Community Needs Assessment. Each question is cross-referenced to a corresponding question in the full assessment. This interview can be completed by anyone on the action team, particularly someone with contacts in business associations or the chamber of commerce.

Interviewing Businesses

1. Develop a list of all for profit businesses in your community. Business associations and chambers of commerce can help you identify them. Some examples include banks, retail, restaurants, hair salons, dentists, vision and hearing professionals, chiropractors, pharmacies, insurance agents, grocery stores, etc.
2. Prioritize and determine which businesses to contact.
3. Identify the appropriate contact(s) in each business.
4. Keep track of your data sources, including who you interview and their responses to the questions.
5. Create a code for each questionnaire, using the sector abbreviation and a number. For example, business questionnaires would be B1 for the first interviewee, B2 for the second, etc.
6. Use the Pre-Interview Email Template or Call Script to introduce yourself and the project and to schedule an interview.
7. Gather and familiarize yourself with the materials you will share at the interview: questionnaire, dementia-friendly community infographic, Know the 10 Signs and Dementia-Friendly Business guide.
8. Conduct the interviews.
9. After your interview, submit the completed questionnaire to the action team member coordinating the synthesis.
10. Send a thank you to the interviewee.

**Interviewer/Your Name Date of Interview**

**Community Member/Interviewee Interviewee Code: B**

**Name**

**Title**

**Address**

**Phone**

**Email**

Awareness

Question 1

Have you had personal experience with someone with dementia? \_\_\_ Yes \_\_\_ No

(Q1a in full assessment)

Question 2

Have you had professional experience with someone with dementia? \_\_\_ Yes \_\_\_ No

(Q1b in full assessment)

*Interviewer Tip: Share the dementia-friendly community infographic and describe the dementia- friendly efforts occurring in your community.*

Question 3

What do you see as our community’s main strengths for addressing the needs of people living with dementia and their families? (Q2 in full assessment)

Question 4

What do you see as our community’s main gaps for addressing the needs of people living with dementia and their families? (Q3 in full assessment)

Question 5

What resources and organizations would you suggest to individuals who may show signs of dementia? (Q4 in full assessment)

Question 6

This question asks about awareness of the resources and organizations that can help support people with dementia and their families. (Q5 in full assessment)

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| --- | --- |
| **Level of Current Activity** | **Priority for Action** |
| Indicate your level of agreement with this statement: Our community currently has adequate awareness of the resources and organizations available to support people with dementia and their families. | Indicate your level of agreement with this statement: Raising community awareness of the resources and organizations that can help support people with dementia and their families should be a priority for action in our community. |
| 1. Strongly disagree  2. Disagree  3. Neither agree or disagree  4. Agree  5. Strongly agree  0. Do not know | 1. Strongly disagree  2. Disagree  3. Neither agree or disagree  4. Agree  5. Strongly agree  0. Do not know |

*Interviewer Tip: Distribute education on Alzheimer’s disease and dementia; e.g., Know the 10 Signs. Share listing of the resources and organizations that can help support people with dementia and their families in your community.*

Question 7

This question asks about your level of knowledge of the warning signs of dementia.

10 warning signs: 1) Memory loss that disrupts daily life. 2) Challenges in planning or solving problems. 3) Difficulty completing familiar tasks at home, at work or at leisure. 4) Confusion with time or place. 5) Trouble understanding visual images and spatial relationships. 6) New problems with words in speaking or writing. 7) Misplacing things and losing the ability to retrace steps. 8) Decreased or poor judgment. 9) Withdrawal from work or social activities. 10) Changes in mood and personality. (Q6 in full assessment)

|  |  |
| --- | --- |
| **Level of Dementia Knowledge** | **Priority for Action** |
| Indicate your level of knowledge of the 10 warning signs of dementia. | Indicate your level of agreement with this statement: Increasing our community members’ knowledge about the warning signs of dementia should be a priority for action in our community. |
| 1. Very low  2. Low  3. Moderate  4. High  5. Very high  0. Do not know | 1. Strongly disagree  2. Disagree  3. Neither agree or disagree  4. Agree  5. Strongly agree  0. Do not know |

Question 8

This question asks about your skills for interacting with people who have dementia. (Skills for interacting with people with dementia include knowing when to repeat information or suggesting a family member should participate in conversations.) (Q7 in full assessment)

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| --- | --- |
| **Level of Interaction Skills** | **Priority for Action** |
| Indicate your level of agreement with this statement: I have good skills for interacting with people with dementia. | Indicate your level of agreement with this statement: Increasing our community members’ skills for interacting with people with dementia should be a priority for action in our community. |
| 1. Strongly disagree  2. Disagree  3. Neither agree or disagree  4. Agree  5. Strongly agree  0. Do not know | 1. Strongly disagree  2. Disagree  3. Neither agree or disagree  4. Agree  5. Strongly agree  0. Do not know |

Question 9

Our community may have diverse and underserved populations that would benefit from having resources tailored for people with dementia and their families (meaning programs or services that meet the needs of diverse populations). (Question 8 in full assessment)

*Interviewer Tip: Share relevant community demographic information.*

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| --- | --- |
| **Level of Current Activity** | **Priority for Action** |
| Indicate your level of agreement with this statement: Our community currently has adequate dementia-related resources tailored to our diverse and underserved populations. | Indicate your level of agreement with this statement: Increasing dementia-related resources tailored to our diverse and underserved populations should be a priority for action in our community. |
| 1. Strongly disagree  2. Disagree  3. Neither agree or disagree  4. Agree  5. Strongly agree  0. Do not know | 1. Strongly disagree  2. Disagree  3. Neither agree or disagree  4. Agree  5. Strongly agree  0. Do not know |

Question 10

Does your business provide its employees with education and training about recognizing dementia and effective dementia-friendly communication skills? (Q9 in full assessment)

\_\_\_ Yes \_\_\_ No \_\_\_ Unsure

If yes, list the trainings and briefly describe (title, content).

|  |
| --- |
| Inventory of education and trainings offered (title, content) |
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| --- | --- |
| **Level of Current Activity** | **Priority for Action** |
| Indicate your level of agreement with this statement: Our business currently provides our employees with education and training on recognizing dementia and effective dementia-friendly communication skills. | Indicate your level of agreement with this statement: Increased education and training on dementia and effective dementia-friendly communication skills should be a priority for action in our community. |
| 1. Strongly disagree  2. Disagree  3. Neither agree or disagree  4. Agree  5. Strongly agree  0. Do not know | 1. Strongly disagree  2. Disagree  3. Neither agree or disagree  4. Agree  5. Strongly agree  0. Do not know |

Question 11

Has your business assessed whether its physical environment is dementia friendly?   
(Q10 in full assessment)

\_\_\_ Yes \_\_\_ No \_\_\_ Unsure

|  |  |
| --- | --- |
| **Level of Current Activity** | **Priority for Action** |
| Indicate your level of agreement with this statement: Our business currently ensures that its physical environment is dementia friendly. | Indicate your level of agreement with this statement: Making the physical environment of a business dementia-friendly should be a priority for action in our community. |
| 1. Strongly disagree  2. Disagree  3. Neither agree or disagree  4. Agree  5. Strongly agree  0. Do not know | 1. Strongly disagree  2. Disagree  3. Neither agree or disagree  4. Agree  5. Strongly agree  0. Do not know |

Question 12

Would you be interested in helping us create a dementia-friendly community? (Q26 in full assessment, track in Master Contact List)

\_\_\_ Yes \_\_\_ No \_\_\_ Unsure

Suggestions:

* Serve on the action team
* Public endorsement/testimonial
* Donate resources, e.g., meeting space, advertising, personnel, funds, etc.
* Other:

Question 13

What other organizations/groups in our community should take part in creating a dementia-friendly community? (Q27 in full assessment, track in Master Contact List)

Question 14

Should I get in touch with you again to let you know how the project is progressing and how you can best help to ensure our community is becoming dementia friendly? (Q28 in full assessment, track in Master Contact List)

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

Thank you for your time and support.