

Check one box on each line:

Living Space Compatibility:	No problem	Its manageable	I changed my behavior	Its difficult	It feels dangerous	N/A
Are the stairs in my home an obstacle?						
Can I get into the tub or shower myself?						
Does flooring in my home impact my mobility?						
Do doors and furniture limit my mobility?						
Is the laundry accessible to me?						
Do I know when someone rings at my door?						
Financial Compatibility:	No problem	Its manageable	I cut back on spending	I make late payments	I'm in arrears	N/A
Can I pay the monthly expenses of my home?						
Can I pay the annual taxes and expenses of my home?						
Size Compatibility:	All or most	More than half	About half	Less than half	Just a few	N/A
How many of my home's rooms do I use regularly?						
How often do I use my home's amenities?	Often	Seasonally	Occasionally	Only with guests	Never	N/A
Fireplace						
Pool						
Outdoor space						
Garage						
Finished Basement						
Home Maintenance:	Regularly	Periodically	As needed	Infrequently	Neglected	N/A
How often is my home cleaned?						
When is preventative or repair work done?						
Social Engagement:	Daily	Weekly	Monthly	Yearly	Special events	N/A
How often do I see my closest family?						
How often do I socialize with friends?						
How often do I pursue interests outside my home?						
How do I get where I'm going?	Drive myself	Drive only in daytime	Use mass transit or a car service	Rely on paratransit	I don't go out	N/A
Medical appointments						
Shopping						
Volunteer work						
Entertainment						
Recreation						
TOTALS:						
	Column 1	Column 2	Column 3	Column 4	Column 5	N/A

If the highest number of check marks are in . . .

Column 1: You might choose to continue living in your current home.

Column 2: You might choose to continue living in your current home with minor accommodations.

Column 3: You might need to make some changes to continue living comfortably in your current home.

Column 4: You may be sacrificing too much safety and comfort to continue living in your current home.

Column 5: Your health and quality of life are at risk by continuing to live in your current home