

Running head: A QUALITY IMPROVEMENT STUDY ON EARLY RECOGNITION AND INTERVENTION OF CAREGIVER BURDEN IN A TERTIARY HOSPITAL

### Appendix 1: Questionnaire

Date: \_\_\_\_\_ Number: \_\_\_\_\_

#### Part 1: Caregiver Demographic (circle the answer):

Question	Answer	Note
Age	0= < 40 years 1= 41 to 60 years 2= 61 to 80 years 3= >80 years	
Gender	0=Male 1=Female	
Race	0=Chinese 1=Indian 2=Malay 3=Others	
Marital status	0=Single 1=Married 2= Separated / Divorced 3=Widowed	
Highest educational level	0= No formal education 1=Primary school 2=Secondary school 3= >Tertiary (College/ Polytechnic/ University)	
Employment status	0=Looking for job (unemployed) 1=Working part time 2=Working full time 3 = Home-maker 4= Retired	
Living arrangement with patient	0= Living together 1= Living apart	
Duration of caregiving	0= less than 1 month 1= 1 to 12 months 2=more than 1 year 3=more than 2 years	
Relationship between caregiver and recipient	0=Spouse 1= Daughter/ Son 2=In-law	

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	3=Grandchild 4= Relative or close friend	
Foreign Domestic Worker as Additional help	0=Yes 1=No	
Other responsibilities	0=None 1=Work commitments 2=Taking care of another ill or elderly person at home 3=Taking care of your own family with small children 4=Others: _____	

**Part 2: Zarit Burden Interview (ZARIT BURDEN INTERVIEW)**

Score: 0=Never, 1=Rarely, 2=Sometimes, 3=Quite Frequently, 4=Nearly Always

Question	Admission	At 30 days post discharge follow up
1. Do you feel that because of the time you spend with your relative that you don't have enough time for yourself?		
2. Do you feel stressed between caring for your relative and trying to meet other responsibilities for your family or work?		
3. Do you feel angry when you are around your relative?		
4. Do you feel your relative currently affects your relationship with other family members or friends in a negative way?		
5. Do you feel strained when you are around your relative?		
6. Do you feel your health has suffered because of your involvement with your relative?		
7. Do you feel that you don't have as much privacy as your like because of your relative?		
8. Do you feel that your social life has suffered because you are caring for your relative?		
9. Do you feel you have lost control of your life since your relative's illness?		
10. Do you feel uncertain about what to do about your relative?		

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11. Do you feel you should be doing more for your relative?		
12. Do you feel you could do a better job in caring for your relative?		
<b>Total Score</b>		

**Part 3: Patient Demographic**

Question	Answer	Note
Age	0= < 40 years 1= 41 to 60 years 2= 61 to 80 years 3= >80 years	
Gender	0=Male 1=Female	
Race	0=Chinese 1=Indian 2=Malay 3=Others	
Modified Barthel Index Score	0=<15 (moderate disability) 1=<10 (severe disability) 2=>16 ( independent)	
Number of co-morbidities	0= Less than 2 1=2 to 5 2=More than 5	
Abbreviated Mental Test Score	0=0-3 (Severe Impairment) 1=4-6 (Moderate Impairment) 2=>6 (Normal)	
Number of medications	0=Less than 5 1=5 to 10 2=More than 10	
Clinical Frailty Score	1=Very Fit 2=Well 3=Managing Well 4=Vulnerable 5=Mildly Frail 6=Moderately Frail 7=Severely Frail 8=Very Severely Frail 9=Terminally Ill	