Survey results - January 2024, Sunrise Caring Association Residential Needs

1 Clients greatest needs

6.44%	Employment Skills
5.11%	Basic Academic Skills
4.66%	Household Chores
5.44%	Community Safety
5.66%	Communication Skills
2.55%	Substance Abuse education
6.55%	Decision Making
5.22%	Friendship and social relationships
6.10%	Meal Planning Preparation and Clean up
6.88%	Money Management skills
3.55%	Personal Care Needs (grooming, shaving, dressing skills etc.)
4.77%	Disability knowledge / self advocacy
4.66%	recreational / leisure skills
4.77%	Safe Sexual Behavior/sexual health education
7.10%	Shopping skills (comparison shopping / handling money)
4.11%	Assistive technology
5.33%	travel skills
5.55%	vocational and career exploration
3.66%	Health care management
1.89%	Toileting
0.00%	Other

2 5 years from now where will client live

41.94%	at home
9.68%	with family - not parents
19.35%	in apartment on their own
12.90%	in apartment with room mate
3.23%	in supported apartment / living program alone
6.45%	in supprted apartment living program with room mates
6.45%	in group home with onsite care provider

no problem with (client name) living at home,

will support his personal preference

Concerns about Client living on their own 12.99% can't shop independently

12.99%	can't shop independently
19.48%	cant manage money
9.09%	health related concerns
7.79%	has been too dependent
9.09%	wont take good care of self (eat, hygiene etc)
10.39%	will be lonely
16.88%	wil be exploited (sexual/physical/financial)
9.09%	will not take medication
2.60%	will be drawn to illegal drug use
2.60%	will be drawn to crime

4 Guardianship / financial Supports /trusts

20.51%	NAU
17.95%	Other Family Support
2.56%	Individual Formal Trust
28.21%	His/her own wages
28.21%	Your Finanacial Support
0.00%	Other
2.56%	I don't know

5 Do you think your client could be their own legal guardian

25.00%	YES
75.00%	NO

Do they

28.33%	6 Need a Guardian/conservator for financial decisions
20.00%	Need a Guardian/ conservator for medical decisions
18.33%	Need an advocate or personal representation for day to day decision
8.33%	need a medical proxy
10.00%	6 need a power of attorney
13.33%	6 need a legal guardian appointed
1.67%	Not Sure/ Don't know

6 Have you prepared a trust fund managed investment account for future Support

31.25%	YES
68.75%	NO

7 Have you prepared a will that inlcudes plans for your Client

38.10%	YES
61.90%	NO

8 Do you think your Clients will achieve / do they have a drivers license

45.00%	YES
55.00%	NO

9 **Does your client travel by**

7.14%	Bicycle
11.90%	Walk
16.67%	public transportation
4.76%	His/Her own car
4.76%	Taxi
45.24%	Get rides in the family car or with friends
9.52%	Other Sunrise Bus

10	Bank Accou	nt
	0.00%	would client have own bank account
	26.23%	YES
	6.56%	NO
	0.00%	would they have debit or credit card access
	21.31%	YES
	13.11%	NO PoA eventually to sibling to oversee
	0.00%	would they understand a bank statement
	9.84%	YES
	22.95%	NO
11	Food	Does client:
	. 000	know how to shop for groceries and household items
	36.84%	YES
	63.16%	NO
	03.1070	do meal planning and grocery lists
	25.00%	YES
	75.00%	NO
	73.0070	know how to store foods correctly?
	68.42%	YES
	31.58%	NO
	32.3070	Clean food prep surfaces and equipment/dishes safely
	55.56%	YES
	44.44%	NO
		Benefit from food purchase and prep assistance at
	31.25%	each meal
	25.00%	Daily
	25.00%	Weekly
	18.75%	no need
		travel to and transport groceries from the store on their own
	15.79%	YES
	84.21%	NO
12	Household I	Maintenance
12	riouserioia i	Is client able to shop for clothing and household items on their own?
	15.79%	YES
	84.21%	NO
	04.2170	Are they able to travel to and transport purchases from the store on
	21.05%	YES
	78.95%	NO
	70.5570	Is your client able to keep their room clean and tldy?
	61.90%	YES
	38.10%	NO
	30.1070	Can they keep their clothing in good clean condition (place in drawer
	76.19%	YES
	23.81%	NO
	23.3270	Are they able to keep shared living spaces clean and tidy?
	71.43%	YES
	28.57%	NO
		Can the Client recognize household maintenance issues and call for I
	25.00%	YES
	75.00%	NO

13 Medical Upkeep

	Would client be able to make appointment for themselves for doctor
15.00%	YES
85.00%	NO
	Would client know to ask for assistance from someone like a PSW or
52.63%	YES
47.37%	NO
	Would they need an advocate to assist in defining their issue and de
84.21%	YES
56.25%	NO
	Once at an appointment would they need a person to speak on their
75.00%	YES
25.00%	NO
	IS this client able to consent to a procedure?
63.16%	YES
36.84%	NO
	Is the client technically authorized to give consent at the moment (N
68.42%	YES
31.58%	NO

14 Who would you want to help with medical upkeep

20.00%	The Client
37.50%	You
30.00%	Other family member of the client
7.50%	residential staff/Personal Support Worker
2.50%	Government Nurse
2.50%	Court appointed legal guardian

15 If you were not available, how dependent is this client on someone else for day to

27.78%	Constant contact
0.00%	Hourly contact
50.00%	daily contact
22.22%	weekly contact
0.00%	monthly contact

16 This client is involved in

23.40%	recreational activity they do alone
17.02%	integrated activities (team members with and without disabilities)
12.77%	Classes (develop hobbies)
10.64%	Sports as a team member
14.89%	Sports as an individual
17.02%	art classes - dance painting music
2.13%	mindfulness sessions
2.13%	other

needs to be more involved for social skills

was doing special olympics - will start back soon activities at home

17 In the next 5 years this client will probably

22.39%	do activities with friends
20.90%	make friends with disabilities

22.39%	make friends without disabilities
16.42%	join organized recreational activities (clubs, team sports)
1.49%	get married
1.49%	have children
5.97%	have a boy/girlfriend, but no marriage
5.97%	have very little romantic or social contact with a boy/girlfiriend
2.99%	have a committed relationship / life partner

AGE groups respresented

28.57%	<20
38.10%	<30
28.57%	<45
4.76%	>45