## Vital Care Final Questions Administered at Study Timepoints, Updated 12/23/20

		Vital Care Time Points			
Description	Items	Month 0	Month 1	Month 3	Month 6
Vital Signs (n=4)	Blood Pressure- Systolic	х	x**	х	х
	Blood Pressure- Diastolic	x	x	х	x
	Pulse (Heart Rate)	x	x	x	x
	Body Weight	х	x	x	x
Demographics					
	First Name	x	x*	x*	x*
	Last Name	x	x*	x*	x*
	Phone Number	x	x*	x*	x*
	Secondary Phone	x	x*	x*	x*
	Gender	x			
	Date of Birth	x	x*	x*	x*
	Language	x			
	Primary Care Doctor	x	x*	x*	x*
	Name or Address of Primary Care Doctor's Clinic	x	x*	x*	x*
	If you use an Emergency Room, which one do you usually go to?	x	x*	x*	х*
	Has any information changed on your demographic enrollment form?		х	х	x
	Emergency Contact(s)	x	x*	x*	х*
	Emergency Contact(s) Phone	х	x*	x*	x*
Quetionnaires	Did you show your last blood pressure readings to your healthcare provider?		,	,	.,
· · · · · · · · · · · · · · · · · · ·	Do you plan to show today's blood pressure readings to your healthcare provider?	v	X	X	X
	Did you take all your scheduled medications today?	X	X	X	X
	Have you fallen in the past 1-year?	X	X	X	Х
	Have you been hospitalized in the last 12 months	X	v	v	v
		X	X	X	X
	Have you fallen since your last visit		X	X	X
	Have you been hospitalized since your last visit?		X	Х	х

## Legend:

\*question is asked if they answer "Yes" to has any information changed in your demographic enrollment form?

<sup>\*\*</sup>primary outcome measure

## **Summary of Validated ACL DASH Instruments**

Survey	Link	Comment
BRFSS Questionnaire:	https://www.cdc.gov/brfss/questionnaires/index.htm	8 questions were picked from the Demographics Section of this instrument and slightly modified to improve participants' understanding
USDA Food Security Survey Module:	https://www.ers.usda.gov/topics/food-nutrition-assistance/food-security-in-the-us/survey-tools/#household	Food Insecurity_Hager et. al. 2013_Food Insecurity IHS_ 2 item screener- this publication discusses the validation of picking only 2 questions from this entire instrument
Healthcare Utilization: NYC Department of Health and Mental Hygiene Community Health Survey	https://www1.nyc.gov/site/doh/data/data-sets/community-health-survey-public-use-data.page	Healthcare Utilization Survey- we picked 3 questions from two instruments. See Access section, pg. 17.
Healthcare Utilization: National Health Interview Survey	Reference: Gindi RM, Cohen RA, Kirzinger WK. Emergency room use among adults aged 18–64: Early release of estimates from the National Health Interview Survey, January–June 2011. National Center for Health Statistics. May 2012. Available from: <a href="http://www.cdc.gov/nchs/nhis/releases.htm">http://www.cdc.gov/nchs/nhis/releases.htm</a>	Healthcare Utilization Survey- we picked 3 questions from two instruments
National Health Interview Survey: Blood Pressure Medications-	https://www.cdc.gov/nchs/nhis/data-questionnaires-documentation.htm	We picked 3 questions from this instrument. See Hypertension section.

## **Summary of Validated ACL DASH Instruments**

Adherence USCF	https://prevention.ucsf.edu/resources/survey-instruments- and-scales	The ACTG Adherence Baseline Questionnaire was modified from HIV to Hypertension
NHANES Physical Activity	https://wwwn.cdc.gov/nchs/nhanes/continuousnhanes/questionnaires.aspx?BeginYear=2017	We picked 3 questions from the Physical Activity and Physical Fitness section
Global Tobacco Surveillance System (GTSS)	https://www.cdc.gov/tobacco/global/gtss/index.htm	We picked 3 questions from Section 3: Measuring Tobacco Smoking Prevalence of the GTSS. See page 6 of the attachment.
Alcohol Use Audit	https://auditscreen.org/ https://auditscreen.org/cmsb/uploads/drink less questionn aire.pdf	We picked 2 questions from this instrument
Promis Social Isolation	https://www.healthmeasures.net/index.php?option=com_ins truments&view=measure&id=209	Also available in Redcap shared library
Patient Health Questionnaire (PHQ-2)	https://www.hiv.uw.edu/page/mental-health-screening/phq-2 https://www.phgscreeners.com/select-screener	The PHQ-2 is the first two questions of the PHQ-9
Charlson Comorbidity Survey	http://www.sbcdb.ch/download/HSM Suppl 8 charlson.pdf	This is the validated version. See link for the validated version from publication. We adapted the questions for self-administration in a community-based setting. See Methods in the Final Report.
Food Behavior Checklist	https://snaped.fns.usda.gov/library/materials/food-behavior-checklist	