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## Section 5—Social

In order to evaluate the cost-effectiveness of the intervention, the following questions help us to calculate the total cost of the treatment.

1. Are you receiving any of the benefits below? Yes  No

If No, go to Question 2

If Yes, can you please tick all benefits you currently receive and how much you currently receive in benefits each week?

Benefit	Tick	£ per week	Benefit	Tick	£ per week
Attendance Allowance	<input type="checkbox"/>		Income Support	<input type="checkbox"/>	
Carer's Allowance	<input type="checkbox"/>		Jobseeker's Allowance	<input type="checkbox"/>	
Child Tax Credit	<input type="checkbox"/>		Pension Credit	<input type="checkbox"/>	
Council Tax Benefit	<input type="checkbox"/>		Statutory Sick Pay	<input type="checkbox"/>	
Disability Living Allowance—caring	<input type="checkbox"/>		State Pension	<input type="checkbox"/>	
Disability Living Allowance—mobility	<input type="checkbox"/>		Other.....	<input type="checkbox"/>	
Employment and Support Allowance	<input type="checkbox"/>		Other.....	<input type="checkbox"/>	
Housing Benefit	<input type="checkbox"/>		Other.....	<input type="checkbox"/>	

2. How would you best describe your living arrangements? (Tick one box only)

- |                                |                          |                             |                          |
|--------------------------------|--------------------------|-----------------------------|--------------------------|
| Live alone                     | <input type="checkbox"/> | Care home                   | <input type="checkbox"/> |
| Live with relatives            | <input type="checkbox"/> | Other (please specify)..... | <input type="checkbox"/> |
| Live with wife/husband/partner | <input type="checkbox"/> |                             |                          |
| Live with friends              | <input type="checkbox"/> |                             |                          |

Research Associate signature .....

Date completed (dd/mmm/yyyy):

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