## NHATS Round 3

Section FQ [FACILITY STAFF QUESTIONNAIRE]
FQ1PRE
QUESTION TEXT:
YOU HAVE SELECTED THE FACILITY STAFF QUESTIONNAIRE (FQ) FOR CASE
\{CASE ID\}, \{SP\}
CONFIRM WITH FACILITY THAT THE SP IS ALIVE BEFORE CONTINUING. IF THE SP IS DECEASED,
BREAKOFF AND COMPLETE THE NHATS INTERVIEW WITH THE FACILITY RESPONDENT.
IF THIS IS THE CORRECT CASE AND \{SP\} IS ALIVE, PRESS 1 AND ENTER TO CONTINUE
TO SELECT ANOTHER CASE OR TASK, BREAKOFF AND SELECT THE CORRECT CASE ID AND TASK FROM
THE IMS
FQ1Consent FQ1Consent NOT ON FILE

QUESTION TEXT:

```
During the course of the study, we would like to record some of the questions and answers for training
and data quality. I'd like to continue now unless you have any questions.
PRESS 1 AND ENTER TO CONTINUE
IF RESPONDENT REFUSES TO ALLOW AUDIO RECORDING, PRESS }7\mathrm{ AND ENTER
```

CODES
1 CONSENT TO RECORDING FQ1A
7 REFUSE CONSENT TO RECORD
5

## FQ1NotRec <br> FQ1NotRec <br> NOT ON FILE

That's fine. The interview will not be recorded.
PRESS 1 AND ENTER TO CONTINUE
FQ1A FQ1A NOT ON FILE

## DISPLAY INSTRUCTIONS:

Display "FIRST" in bold underlined text.
Display FQ1a and FQ1b on the same screen.

## QUESTION TEXT:

First, I would like to confirm your name and contact information.
What is your name?
ENTER FIRST NAME. CONFIRM SPELLING.

## ENTER TEXT

$$
\text { Length } 25
$$

FQ1B FQ1B NOT ON FILE

## DISPLAY INSTRUCTIONS:

Display "LAST" in bold underlined text.
Display FQ1a and FQ1b on the same screen.

## QUESTION TEXT:

ENTER LAST NAME. CONFIRM SPELLING.

## ENTER TEXT

$$
\text { Length } 25
$$

FQ2 FQ2 NOT ON FILE

## QUESTION TEXT:

What is your job title?

## ENTER TEXT

$$
\text { Length } 50
$$

## FQ3A <br> FQ3A <br> NOT ON FILE

## DISPLAY INSTRUCTIONS:

Display FQ3a, 3b, 3c, 3d, and $3 e$ on the same screen. Display "address" as underlined text.

## QUESTION TEXT:

What is the mailing address here?
CONFIRM SPELLING

## ENTER TEXT

$$
\text { Length } 25
$$

## PROGRAMMERS INSTRUCTIONS:

If Breakoff at or before this screen, do not save any FQ data and set FQ task status = 11 (READY).

## FQ3B <br> FQ3B <br> NOT ON FILE

## DISPLAY INSTRUCTIONS:

Display FQ3a, 3b, 3c, 3d, and 3 e on the same screen. Display "address" as underlined text.

## QUESTION TEXT:

[What is the mailing address here?]
CONFIRM SPELLING

IF NO APT/SUITE NUMBER, PRESS ENTER TO CONTINUE

## PROGRAMMERS INSTRUCTIONS:

Allow empty

## FQ3C FQ3C NOT ON FILE

## DISPLAY INSTRUCTIONS:

Display FQ3a, 3b, 3c, 3d, and $3 e$ on the same screen.
Display "city" as underlined text.

## QUESTION TEXT:

[What is the city?]

CONFIRM SPELLING

## ENTER TEXT

$$
\text { Length } 25
$$

FQ3D FQ3D NOT ON FILE

## DISPLAY INSTRUCTIONS:

Display FQ3a, 3b, 3c, 3d, and 3 e on the same screen.
Display "state" as underlined text.

## QUESTION TEXT:

[What is the state?]
TYPE THE FIRST LETTER OF THE STATE, THEN USE ARROW KEYS IF NEEDED TO LOCATE STATE, AND PRESS ENTER TO SELECT

## PROGRAMMERS INSTRUCTIONS:

Use lookup file of state names
FQ3E FQ3D NOT ON FILE

## DISPLAY INSTRUCTIONS:

Display FQ3a, 3b, 3c, 3d, and $3 e$ on the same screen.
Display "zip code" as underlined text.

## QUESTION TEXT:

[What is the zip code?]
ENTER A 5-DIGIT ZIP CODE

## ENTER TEXT

Length

## PROGRAMMERS INSTRUCTIONS:

5-digit entry required. If less than 5 digits entered, display Error Message \#11.

## FQ3F

FQ3F
NOT ON FILE

QUESTION TEXT:
What is the phone number here?

ENTER AREA CODE AND PHONE NUMBER

## ENTER TEXT

```
Length 10
REFUSED
```


## PROGRAMMERS INSTRUCTIONS:

Hard edit: if the answer from FQ3f contains less than 10 digits, display error message \#12.
Use number input mask ( $x$ xx-xxx-xxxx) in the response field.
FQ4 FQ4 NOT ON FILE

## QUESTION TEXT:

What is your email address here?
ENTER 97 IF NOT EMAIL ADDRESS

## ENTER TEXT

$$
\begin{array}{ll}
\text { Length } & 50 \\
\text { REFUSED } &
\end{array}
$$

FQ5

## DISPLAY INSTRUCTIONS:

Display "whole" as bold underlined text.

## QUESTION TEXT:

What is the name of this place? If there are different names for certain parts of levels of care in this place, please tell me the name for the whole place.

## ENTER TEXT

$$
\text { Length } 75
$$

## FQ6 <br> fq3dfacdescr <br> R3 FQ6 FACILITY TYPE

## DISPLAY INSTRUCTIONS:

Display text from FQ5 as FACILITY NAME.
Display "whole" as underlined text.

## QUESTION TEXT:

## SHOW CARD FQ1

Now I'm going to show you a list of places.

Which of these BEST describes \{FACILITY NAME FROM FQ5\}? Again, if there are different parts or levels of care in this place, please tell me about the whole place.

PRESS F1 FOR HELP SCREEN

## CODES

1 FREE STANDING NURSING HOME FQ15
2
3
4
FREE STANDING ASSISTED LIVING FACILITY
FQ7
NURSING HOME AND ASSISTED LIVING FACILITY FQ7
CONTINUING CARE RETIREMENT COMMUNITY FQ7
(CCRC)

| 5 | ADULT FAMILY CARE HOME | FQ15 |
| :---: | :---: | :---: |
| 6 | GROUP HOME | FQ15 |
| 7 | BOARD AND CARE HOME | FQ15 |
| 8 | RETIREMENT COMMUNITY OR SENIOR HOUSING (NOT CCRC) | FQ7 |
| 91 | OTHER (SPECIFY) |  |
|  | REFUSED | FQ7 |
|  | DON'T KNOW | FQ7 |
| FQ6A | fq3dosfacd R3 FQ6A OT | IFY FAC TYPE |
| QUESTION TEXT: |  |  |
| SPECIFY TYPE OF PLACE |  |  |
| ENTER TEXT Length |  |  |
|  |  |  |
| FQ7 | FQ7 NOT ON FILE |  |
| QUESTION TEXT: |  |  |
| Next, I need to confirm where $\{S P\}$ is living. |  |  |
| PRESS 1 AND ENTER TO CONTINUE |  |  |
| FQ8 | fq3prtlivnam R3 FQ8 FAC | 4PLC SP LIVES |
| QUESTION TEXT: |  |  |
|  | Does the part of \{PLACE NAME FROM FQ 5$\}$ in which \{SP\} lives have a different name? |  |
| CODES |  |  |
| 1 | YES |  |
| 2 |  | FQ10 |
|  | REFUSED | FQ10 |
|  | DON'T KNOW | FQ10 |
| FQ9 | FQ9 NOT ON FILE |  |
| QUESTION TEXT: |  |  |
| What is the name of \{SP\}'s area? |  |  |
| ENTER TEXT Length 50 |  |  |
|  |  |  |  |
| FQ10 | fq3dfacarea $\quad$ R3 FQ10 FACILITY AREA SP LIVES |  |
| QUESTION TEXT: <br> Is the place where $\{S P\}$ lives considered independent living, assisted living, a special care unit, a nursing home care unit, or something else? |  |  |
| Is the place where \{SP\} lives considered independent living, assisted living, a special care unit, a nursing home care unit, or something else? |  |  |
| CODES |  |  |
| 1 | INDEPENDENT LIVING | FQ12 |
| 2 | ASSISTED LIVING | FQ12 |



| CODES |  |  |
| :---: | :--- | :---: |
| 1 | INDEPENDENT LIVING | FQ15 |
| 2 | ASSISTED LIVING | FQ15 |
| 3 | SPECIAL CARE, MEMORY CARE, OR ALZHEIMER’S | FQ15 |
|  | UNIT |  |
| 4 | NURSING HOME | FQ15 |
| 91 | OTHER (SPECIFY) |  |
|  | REFUSED | FQ15 |
|  | DON'T KNOW | FQ15 |

FQ13A FQ13A NOT ON FILE

## QUESTION TEXT:

## SPECIFY OTHER LEVELS OF CARE

## ENTER TEXT

Length 50

| FQ15 | fq3servaval1 | R3 FQ15 MEALS AVAIL |
| :--- | :--- | :--- |
|  | fq3servaval2 | R3 FQ15 HELP WITH MEDS AVAIL |
|  | fq3servaval3 | R3 FQ15 HELP W BATH DRESS AVAIL |
|  | fq3servaval4 | R3 FQ15 LAUNDRY SERVCS AVAIL |
|  | fq3servaval5 | R3 FQ15 HOUSEKEEPING SERV AVAIL |
|  | fq3servaval6 | R3 FQ15 TRANSPRT MED CARE AVAIL |
|  | fq3servaval7 | R3 FQ15 TRANSPRT TO STORE EVENT |
|  | fq3servaval8 | R3 FQ15 RECREATIONAL FAC AVAIL |
|  | fq3servaval9 | R3 FQ15 SOCIAL EVENTS AVAIL |

## DISPLAY INSTRUCTIONS:

Use "Same Question Stem" display
If at FQ15a, do not display question text in brackets.
Otherwise, display question text in brackets.
Display "at \{SP\}'s current level of care" and "offered" as bold underlined text.

## QUESTION TEXT:

SHOW CARD FQ2
$\{[ \}$ We are interested in the services that are available to people at $\{S P\}$ 's current level of care.
Please look at this list. \{]\}
\{[\}For each service, please tell me if the service is offered to people at \{SP\}'s level of care. If the service is offered, please also indicate whether it is part of $\{S P\}$ 's package of services provided by \{PLACE NAME from FQ5\} or if there is an extra charge for it. $]\}$
\{variable text [a-i]\}
RESPONSE[1] a. Meals (in common dining areas or in resident's own rooms)?
RESPONSE [2] b. Help with medications?
RESPONSE [3] c. Help with bathing and dressing?
RESPONSE [4]d. Laundry services for linens or clothing? RESPONSE [5] e. Housekeeping services?

```
RESPONSE [6] f. A van or shuttle to doctors or other medical care providers?
RESPONSE[7] g. A van or shuttle to stores or events like concerts?
RESPONSE [8] h. Recreational facilities, like swimming pools, game rooms, or tennis courts, for residents?
RESPONSE[9] i. Organized social events and activities?
CODES
    1
    2
    3
```

```
YES, SERVICE PROVIDED AS PART OF PACKAGE
```

YES, SERVICE PROVIDED AS PART OF PACKAGE
YES, SERVICE PROVIDED AT AN EXYTRA CHARGE
YES, SERVICE PROVIDED AT AN EXYTRA CHARGE
NO, SERVICE NOIT PROVIDED
NO, SERVICE NOIT PROVIDED
REFUSED
REFUSED
DON'T KNOW

```
DON'T KNOW
```


## PROGRAMMER INSTRUCTIONS:

```
Array the responses and Variable text columns in the panel.
Display 'variable text' in the a-i sequence until all rows have been displayed.
```


## FQ16PRE <br> FQ16PRE <br> NOT ON FILE

QUESTION TEXT:
These next questions are about the sources of payment for \{SP\}'s care. PRESS 1 AND ENTER TO CONTINUE

| FQ16 | fq3paysourc1 | R3 FQ16 SP OR SP FAMILY PAYMENT |
| :--- | :--- | :--- |
|  | $\mathbf{f q 3 p a y s o u r c 2 ~}$ | R3 FQ16 SOC SEC SSI PAYMENT |
|  | $\mathbf{f q 3 p a y s o u r c 3 ~}$ | R3 FQ16 MEDICAID PAYMENT |
|  | $\mathbf{f q 3 p a y s o u r c 4}$ | R3 FQ16 MEDICARE PAYMENT |
|  | $\mathbf{f q 3 p a y s o u r c 5}$ | R3 FQ16 PRIVATE INSURANCE PAYMNT |
|  | $\mathbf{f q 3 p a y s o u r c 6}$ | R3 FQ16 OTHR GOVT PAYMENT |

## DISPLAY INSTRUCTIONS:

Use "Same Question Stem" display
If at FQ16a, do not display question text in brackets.
Otherwise, display question text in brackets.
If FQ6= 1 (FREE STANDING NURSING HOME) or $\mathrm{FQ} 10=4$ (NURSING HOME), OR FQ11=2 (NURSING HOME), display FQ16d \{Medicare\}.

Display dollar amounts using commas to separate zeroes.

## QUESTION TEXT:

```
SHOW CARD FQ3
    {[}In the last billing month for which you have complete payment information, what did each of
    these sources pay for {SP}'s care?{]}
    {[}For each one, please tell me the total amount paid by each source for this part of {SP}'s care.{]}
    ENTER DOLLAR AMOUNT
    ENTER ZERO IF NO PAYMENT FROM SOURCE
    {variable text [a-f]}
```

```
RESPONSE[1] a. SP OR SP'S FAMILY
RESPONSE[2] b. SOCIAL SECURITY OR SSI
RESPONSE[3]c. MEDICAID
RESPONSE[4]d. MEDICARE
RESPONSE[5] e. PRIVATE INSURANCE
RESPONSE[6] f. OTHER GOVERNMENT SOURCE (VA, STATE, COUNTY)
```


## ENTER NUMBER

Range

| Soft Range | 0 to 26000 |
| :--- | :--- |
| REFUSED | o to 10000 |
| DON'T KNOW |  |

## PROGRAMMER INSTRUCTIONS

Array the responses and Variable text columns in the panel.
Display 'variable text' in the a-f sequence until all rows have been displayed.
BOX FQ17 BOX FQ17 NOT ON FILE

If DK or RF entered at FQ16 for any amount category, go to FQ19.
FQ17 fq3totalpaym R3 FQ17 TOTAL PAYMENT FOR CARE

## DISPLAY INSTRUCTIONS:

Display dollar amounts using comas to separate zeroes.

## QUESTION TEXT:

That adds up to \{TOTAL AMOUNT CALCULATED FROM FQ16\}
Is that the total monthly payment for $\{S P\}$ 's care?

## CODES

| 1 | YES | FQ19 |
| :--- | :--- | :--- |
| 2 | NO |  |
|  | REFUSED | FQ19 |
|  | DON'T KNOW | FQ19 |

## FQ18

fq3tmnthlyamt
R3 FQ18 TOT MTHLY AMT FOR CARE

## DISPLAY INSTRUCTIONS:

Display dollar amounts using comas to separate zeroes.

QUESTION TEXT:
Display dollar amounts using commas to separate zeroes.

ENTER AMOUNT

## ENTER NUMBER

| Range | o to 26000 |
| :--- | ---: |
| REFUSED |  |
| DON'T KNOW |  |

## DISPLAY INSTRUCTIONS:

If FQ6= 1 (FREE STANDING NURSING HOME) or FQ10=4 (NURSING HOME), OR FQ11=2 (NURSING HOME), display \{Medicare, $\}$ and response category 4

## QUESTION TEXT:

Would you say the primary payer for \{SP\}'s care is \{SP\} or \{his/her\} family, Social Security, Medicaid, \{Medicare,\} or some other source?

CODES
1 SP/FAMILY FQ21
2 SOCIAL SECURITY/SSI FQ2
3 MEDICAID FQ2
4 MEDICARE FQ21
5 OTHER SOURCE REFUSED FQ21
DON'T KNOW FQ21
FQ20 fq3govsource R3 FQ2o GOVERNMENT SOURCE

```
QUESTION TEXT:
    Is that a government source?
CODES
    1 YES
    2 NO
        REFUSED
        DON'T KNOW
```

FQ21 FQ21 NOT ON FILE

QUESTION TEXT:
I would like to confirm that \{SP\}'s name is \{SP'S MIDDLE NAME\} \{SP'S LAST NAME\}. Is that correct?

```
CODES
    1 YES FQ22
    2
                NO
                REFUSED
                DON'T KNOW
```


## FQ21A

FQ21A
NOT ON FILE
DISPLAY INSTRUCTIONS:
Display preloaded SP name in the response fields.

Display "FIRST" in bold underlined text.

Display SP first name in fill as bold underlined

## QUESTION TEXT:

What is the correct spelling of $\{S P\}$ 's full name?
\{FIRST NAME\} \{MIDDLE NAME\} \{LAST NAME\}

CORRECT FIRST NAME. CONFIRM SPELLING.

## ENER TEXT

$$
\text { Length } 25
$$

PROGRAMMER INSTRUCTIONS:
Display FQ21a, 21b, and 21c on the same screen.

## FQ21B

FQ21B
NOT ON FILE
DISPLAY INSTRUCTIONS:
Display "MIDDLE" in bold underlined text.
Display SP middle name in fill as bold underlined

## QUESTION TEXT:

What is the correct spelling of $\{\mathrm{SP}\}$ 's full name?
\{FIRST NAME\} \{MIDDLE NAME\} \{LAST NAME\}
CORRECT MIDDLE NAME. CONFIRM SPELLING.
PRESS ENTER IF NO MIDDLE NAME OR INITIAL

## ENER TEXT

Length
25

PROGRAMMER INSTRUCTIONS:
Allow empty.

Display FQ21a, 21b, and 21c on the same screen.

```
FQ21C FQ21C NOT ON FILE
DISPLAY INSTRUCTIONS:
    Display "LAST" in bold underlined text.
Display SP last name in fill as bold underlined
```

QUESTION TEXT:
What is the correct spelling of \{SP\}'s full name?
\{FIRST NAME\} \{MIDDLE NAME\} \{LAST NAME\}
CORRECT LAST NAME. CONFIRM SPELLING.
ENER TEXT
Length
25

## PROGRAMMER INSTRUCTIONS:

Display FQ21a, 21b, and 21c on the same screen.

Set flag to indicate SP name was updated.
FQ22 FQ22 NOT ON FILE

## QUESTION TEXT:

THE SP IS LISTED AS A \{MALE/FEMALE\}

```
IF GENDER IS OBVIOUS, CODE WITHOUT ASKING
OTHERWISE ASK: Is {SP} male or female?
```

CODES
1 MALE
2 FEMALE
BOX FQ22A BOX FQ22A NOT ON FILE

```
Compare preloaded CMS gender of SP with FQ22 value just entered.
If they are the same, go to FQ23.
Otherwise, go to FQ22a
```

FQ22A FQ22A NOT ON FILE

QUESTION TEXT:

```
YOU JUST CHANGED SP'S GENDER FROMN {PRELOADED CMS GENDER MALE/FEMALE} TO
{FEMALE/MALE FROM FQ22} DID YOU INTEND TO DO THAT?
```

CODES

| 1 | YES |  |
| :--- | :--- | :--- |
| 2 | NO | FQ22 |



## DISPLAY INSTRUCTIONS:

Display preloaded CMS DOB.

## QUESTION TEXT:

What is $\{S P\}$ 's date of birth?
ENTER MONTH, DAY, AND YEAR (MM-DD-YYYY)

## PROGRAMMER INSTRUCTIONS:

Use mask to collect DOB. Separate mm/dd/yyyy with hyphens for data entry.
MONTH range: 1-31

DAY range 1-31
YEAR range: (CURRENT YEAR-65 - FQ24 DOB).

| FQ25 | FQ25 | NOT ON FILE |
| :---: | :---: | :---: |
| DISPLAY INSTRUCTIONS: |  |  |
| COMPUTE AGE AS (CURRENT DATE - FQ24 DOB). |  |  |
| QUESTION TEXT: |  |  |
| I would like to confirm that $\{S P\}$ is $\{C A L C U L A T E D ~ A G E\} ~ y e a r s ~ o l d ~ t o d a y . ~ I s ~ t h a t ~ c o r r e c t ? ~$ |  |  |
| CODES |  |  |
| 1 | YES |  |
| 2 | NO | FQ24 |
|  | REFUSED |  |
|  | DON'T KNOW |  |
| FQ29 | FQ29 | NOT ON FILE |
| QUESTION TEXT: |  |  |
| YOU HAVE COMPLETED THE FACILITY STAFF QUESTIONNAIRE. THANK RESPONDENT. |  |  |
| PRESS 1 AND ENTER TO CONTINUE |  |  |

FQ30 FQ30 NOT ON FILE

## DISPLAY INSTRUCTIONS:

If (LAST INT disposition code $=61$ (Final NH Complete) or LAST INT disposition code $=64$ (Final FQ complete, SP INT NOT COMPLETE) ) and CMS DODFLAG <> 1 (SP ALIVE), display "NO ADDITIONAL DATA COLLECTION REQUIRED FOR THIS CASE."

## QUESTION TEXT:

\{NO ADDITIONAL DATA COLLECTION REQUIRED FOR THIS CASE.\}
PRESS 1 AND ENTER TO RETURN TO IMS SCREEN

## PROGRAMMER INSTRUCTIONS:

If $F Q 8=1$ (YES), FACILITY NAME $=$ text from FQ9.
Else FACILITY NAME = text from FQ5.
Write FACILITY NAME to Management file for use in the NHATS Interview task and the IMS.

If FQ6 $=1$ or [(FQ6 $=2$ or 3 or 4 or 8 or 91 or RF or DK $)$ and FQ10 $=4]$ or FQ11 $=2$, set FACILITY TYPE flag $=1$
(NURSING HOME).
Otherwise, set FACILITY TYPE flag $=2$ (OTHER FACILITY).

If LAST INT final disposition code was code 61 (Final NH complete) and if FACILITY TYPE flag $=1$ (NURSING
HOME) , set NHATS Interview Task=code 24 (FINAL NOT REQUIRED) and IRQ SP Task=code 24 (FINAL
NOT REQUIRED) and set the final case status to code 61, "Complete, NH Facility".

Else if R1 final disposition code was code 64 (Final FQ complete, SP not complete), set NHATS Interview Task=code 24 (FINAL NOT REQUIRED) and IRQ SP Task=code 24 (FINAL NOT REQUIRED); set the final case status to code 61, "Complete, NH Facility" if the FACILITY TYPE flag $=1$ (NURSING HOME); set the final case status to code 64 (FINAL FQ, SP INTERVIEW NOT COMPLETED) if the FACILITY TYPE flag=2
(OTHER FACILITY).

If FACILITY TYPE flag $=1$ or 2 , set FACILITY flag $=1$ (YES).

Write FACILITY TYPE flag and FACILITY flag to Management file for use in the IMS and for use in the NHATS Interview task if the SP Interview Task=11 (READY).

Set IRQ Facility Task=code 11 (READY).

| Derived Variables From Items in FQ Section |  |
| :--- | :--- |
| fq3dlocsp | R3 D FQ6 6A 10 10A FOR SAMP WGT |

