NHATS Round 4 Section FQ [FACILITY STAFF QUESTIONNAIRE] Sequence: 40 FQ1PRE NOT ON FILE 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** NOT ON FILE FQ1Consent **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 AND ENTER CODES CONSENT TO RECORDING 1 FQ1A 7 **REFUSE CONSENT TO RECORD** 5 FQ1NotRec NOT ON FILE FQ1NotRec 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.

EN	TER	TEXT	

	Length	25
FQ1B	FQ1B	NOT ON FILE
	JCTIONS: LAST" in bold underlined text. Q1a and FQ1b on the same screen.	
	: LAST NAME. CONFIRM SPELLING.	
	AST NAME. CONFIRM SELLING.	
ENTER TEXT	Length	25
FQ2	FQ2	NOT ON FILE
QUESTION TEXT	:	
What is	your job title?	
ENTER TEXT	Length	50
FQ3A	FQ3A	NOT ON FILE
	JCTIONS: ² Q3a, 3b, 3c, 3d, and 3e on the same 'address" as underlined text.	screen.
	: the mailing address here? M SPELLING	
CONFIR	MI SPELLING	
ENTER TEXT	Length	25
PROGRAMMERS	5 INSTRUCTIONS:	25 ave any FQ data and set FQ task status = 11 (READY).
	5 INSTRUCTIONS:	
PROGRAMMERS If Breako FQ3B	5 INSTRUCTIONS: ff at or before this screen, do not sa FQ3B	ive any FQ data and set FQ task status = 11 (READY).
PROGRAMMERS If Breako FQ3B DISPLAY INSTRU Display F	5 INSTRUCTIONS: ff at or before this screen, do not sa FQ3B	ive any FQ data and set FQ task status = 11 (READY). NOT ON FILE
PROGRAMMERS If Breako FQ3B DISPLAY INSTRU Display F Display " QUESTION TEXT	FQ3B JCTIONS: FQ3a, 3b, 3c, 3d, and 3e on the same Yaddress" as underlined text.	ive any FQ data and set FQ task status = 11 (READY). NOT ON FILE
PROGRAMMERS If Breako FQ3B DISPLAY INSTRU Display F Display " QUESTION TEXT [What is	FQ3B JCTIONS: ^F Q3a, 3b, 3c, 3d, and 3e on the same 'address" as underlined text.	ive any FQ data and set FQ task status = 11 (READY). NOT ON FILE

ENTER TEXT	Length	25
PROGRAMMERS Allow emp		
FQ3C	FQ3C	NOT ON FILE
DISPLAY INSTRU	CTIONS:	
	Q3a, 3b, 3c, 3d, and 3e on the san city" as underlined text.	ie screen.
QUESTION TEXT: [What is	the city?]	
CONFIRI	M SPELLING	
ENTER TEXT	Length	25
FQ3D	FQ3D	NOT ON FILE
QUESTION TEXT: [What is TYPE TH ENTER T PROGRAMMERS	the state?] E FIRST LETTER OF THE STATE, T O SELECT INSTRUCTIONS:	HEN USE ARROW KEYS IF NEEDED TO LOCATE STATE, AND PRESS
Use looku	ip file of state names FQ3D	NOT ON FILE
DISPLAY INSTRU	CTIONS:	
	Q3a, 3b, 3c, 3d, and 3e on the san zip code" as underlined text.	ie screen.
	the zip code?]	
ENTER TEXT	Length	5
PROGRAMMERS 5-digit ent		entered, display Error Message #11.
FQ3F	FQ3F	NOT ON FILE
QUESTION TEXT: What is t	he phone number here?	

ENTER TEXT

Length REFUSED 10

PROGRAMMERS INSTRUCTIONS:

Hard edit: if the answer from FQ3f contains less than 10 digits, display error message #12.

Use number input mask (xxx-xxx-xxxx) in the response field.

FQ4	FQ4	NOT ON FILE		
QUEST	ION TEXT:			_
	What is your email address here?			
	ENTER 97 IF NOT EMAIL ADDRESS			
ENTER	ТЕХТ			
	Length	50		
	REFUSED			
FQ5	FQ5	NOT ON FILE		
DISPLA	Y INSTRUCTIONS: Display "whole" as bold underlined text.			
QUEST	ION TEXT: What is the name of this place? If there are di please tell me the name for the whole place.	fferent names for certain par	ts of levels of care in this place,	
ENTER	ТЕХТ			
	Length	75		
FQ6	fq4dfacdescr			
-	Y INSTRUCTIONS:	R4 FQ6 FACILITY	IYPE	
	Display text from FQ5 as FACILITY NAME. Display "whole" as underlined text.			
QUEST	ION TEXT:			
•	SHOW CARD FQ1			
	Now I'm going to show you a list of places.			
	Which of these BEST describes {FACILITY NAM or levels of care in this place, please tell me al		e are different parts	
	PRESS F1 FOR HELP SCREEN			
CODES				
1	FREE STANDING NURSING		FQ15	
2 3		LIVING FACILITY STED LIVING FACILITY	FQ7 FQ7	
4	CONTINUING CARE RETIRE		FQ7	
-			-	

5	ADULT FAMILY CARE HOME	FQ15
6	GROUP HOME	FQ15
7	BOARD AND CARE HOME	FQ15
8	RETIREMENT COMMUNITY OR SENIOR HOUSING	FQ7
	(NOT CCRC)	
91	OTHER (SPECIFY)	
	REFUSED	FQ7
	DON'T KNOW	FQ7

FQ6A	fq4dosfacd	R4 FQ6A OTHER SPECIFY FAC TYPE	
QUESTION TEXT			
SPECIFY	/ TYPE OF PLACE		
ENTER TEXT	Langth	50	
	Length	20	
FQ7	FQ7	NOT ON FILE	
QUESTION TEXT	r.		
	need to confirm where {SP} is living.		
PRESS 1	AND ENTER TO CONTINUE		
FQ8	fq4prtlivnam	R4 FQ8 FAC NM DIFF4PLC SP LIVES	
QUESTION TEXT			
Does th	e part of {PLACE NAME FROM FQ5} in w	vhich {SP} lives have a different name?	
CODES			
1 2	YES NO	FQ10	
	REFUSED DON'T KNOW	FQ10 FQ10	
	DONTINIOW	1010	
FQ9	FQ9	NOT ON FILE	
QUESTION TEXT	3		
What is	the name of {SP}'s area?		
ENTER TEXT			
	Length	50	
FQ10	fq4dfacarea	R4 FQ10 FACILITY AREA SP LIVES	
QUESTION TEXT	3		
	lace where {SP} lives considered indepen are unit, or something else?	ndent living, assisted living, a special care unit, a nursing	
CODES			
1 2	INDEPENDENT LIVING ASSISTED LIVING	FQ12 FQ12	
2		ΓΥΙΖ	

3	SPECIAL CARE, MEMORY CAP	RE, OR ALZHEIMER'S FQ11
4	UNIT NURSING HOME	FQ12
91	OTHER (SPECIFY)	1 212
	REFUSED	FQ12
	DON'T KNOW	FQ12
FQ10A	fq4dosfaca	R4 D FQ10A OTHER SPECIFY FAC AREA
QUESTION TEX		
SPECIF	Y OTHER TYPE OF PLACE	
ENTER TEXT	_	
	Length	50
PROGRAMMER Go to FC	S INSTRUCTIONS:	
FQ11	fq4assdnrsng	R4 FQ11 ASSIST LIV OR NURSG HOME
QUESTION TEX	Г:	
Is this s	pecial care unit part of an assisted living	facility or is it part of a nursing home?
CODES		
1	ASSISTED LIVING NURSING HOME	
2	REFUSED	
	DON'T KNOW	
FQ12	fq4othrlevIs	R4 FQ12 OTH LEVELS OF CARE AVAIL
QUESTION TEX	Т:	
Besides		of care available at {PLACE NAME FREOM FQ5} such as e unit, or a nursing home care unit?
CODES		
1	YES	FQ13
2	NO	FQ15
	REFUSED DON'T KNOW	FQ15 FQ15
FQ13	fq4whotlevl1	R4 FQ13 INDEPNDNT LIV CARE AVAIL
	fq4whotlevl2	R4 FQ13 ASSISSTED LVNG CARE AVAIL
	fq4whotlevl3	R4 FQ13 ALZHEIMER CARE AVAIL
	fq4whotlevl4	R4 FQ13 NURSING HOME CARE AVAIL
	fq4whotlevI5	R4 FQ13 OTHR SPECIFY CARE AVAIL
QUESTION TEX	I: ther levels of care are available?	
SELECT	ALL THAT APPLY	

CODES		
1	INDEPENDENT LIVING	FQ15
2	ASSISTED LIVING	FQ15
3	SPECIAL CARE, MEMORY CARE, UNIT	OR ALZHEIMER'S FQ15
4	NURSING HOME	FQ15
91	OTHER (SPECIFY)	
	REFUSED	FQ15
	DON'T KNOW	FQ15
FQ13A	FQ13A	NOT ON FILE
QUESTION	TEXT:	
SP	ECIFY OTHER LEVELS OF CARE	
ENTER TEX	т	
	Length	50
FOIE		
FQ15	fq4servavalı	R4 FQ15 MEALS AVAIL
	fq4servaval2	R4 FQ15 HELP WITH MEDS AVAIL
	fq4servaval3	R4 FQ15 HELP W BATH DRESS AVAIL
	fq4servaval4	R4 FQ15 LAUNDRY SERVCS AVAIL
	fq4servaval5	R4 FQ15 HOUSEKEEPING SERV AVAIL
	fq4servaval6	R4 FQ15 TRANSPRT MED CARE AVAIL
	fq4servaval7	R4 FQ15 TRANSPRT TO STORE EVENT
	fq4servaval8	R4 FQ15 RECREATIONAL FAC AVAIL
	fq4servaval9	R4 FQ15 SOCIAL EVENTS AVAIL
	ISTRUCTIONS:	
Use	e "Same Question Stem" display	
	t FQ15a, do not display question text in brackets. herwise, display question text in brackets.	
Dis	play "at {SP}'s current level of care" and "offered	d" as bold underlined text.
QUESTION	TEXT:	
SH	OW CARD FQ2	
	We are interested in the services that are availab ease look at this list. {]}	le to people at {SP}'s current level of care.
ser	For each service, please tell me if the service is of vice is offered, please also indicate whether it is ACE NAME from FQ5} or if there is an extra char	part of {SP}'s package of services provided by
{va	riable text [a-i]}	
RE RE	SPONSE [1] a. Meals (in common dining areas or i SPONSE [2] b. Help with medications? SPONSE [3] c. Help with bathing and dressing? SPONSE [4]d. Laundry services for linens or cloth	

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

- 2 YES, SERVICE PROVIDED AT AN EXYTRA CHARGE
- 3 NO, SERVICE NOIT PROVIDED
 - REFUSED
 - 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	FQ16PRE	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	fq4paysourc1	R4 FQ16 SP OR SP FAMILY PAYMENT
	fq4paysourc2	R4 FQ16 SOC SEC SSI PAYMENT
	fq4paysourc3	R4 FQ16 MEDICAID PAYMENT
	fq 4 paysourc4	R4 FQ16 MEDICARE PAYMENT
	fq4paysourc5	R4 FQ16 PRIVATE INSURANCE PAYMNT
	fq4paysourc6	R4 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 FQ10=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]}

			_
RESPONS	E[1]a. SPOR SP'S FAMILY		
	E[2] b. SOCIAL SECURITY OR SSI		
	E[3] c. MEDICAID E[4] d. MEDICARE		
RESPONS	E [5] e. PRIVATE INSURANCE		
RESPONS	E[6] f. OTHER GOVERNMENT SOURC	E (VA, STATE, COUNTY)	
ENTER NUMBER	Devide		
	Range Soft Range	o to 26000	
	REFUSED	o to 10000	
	DON'T KNOW		
PROGRAMMER IN	ISTRUCTIONS:		
Array the res	ponses and Variable text columns in t	he panel.	
Display 'varia	ble text' in the a-f sequence until all r	ows have been displayed.	
BOX FQ17	BOX FQ17	NOT ON FILE	
If DK or R	F entered at FQ16 for any amount cate	gory, go to FQ19.	
FQ17	fq4totalpaym	R4 FQ17 TOTAL PAYMENT FOR CARE	
	iq q totalpayin	N4 I QIV I OTALI ATMENTI ON CANE	
QUESTION TEXT: That adds	s up to {TOTAL AMOUNT CALCULATED	FROM FQ16}	
Is that the	e total monthly payment for {SP}'s car	2?	
CODES			
1	YES	FQ19	
2	NO REFUSED	FQ19	
	DON'T KNOW	FQ19	
FQ18	fq4tmnthlyamt	R4 FQ18 TOT MTHLY AMT FOR CARE	
DISPLAY INSTRUC	TIONS:		
	lar amounts using comas to separate	zeroes.	
QUESTION TEXT: Display do	ollar amounts using commas to separa	te zeroes.	
ENTER AN	MOUNT		
ENTER NUMBER			
	Range	o to 26000	
	Range REFUSED	0 to 26000	
		o to 26000	
	REFUSED DON'T KNOW		
FQ19	REFUSED	o to 26000 R4 FQ19 PRIMARY PAYER FOR CARE	

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	FQ21
3	MEDICAID	FQ21
4	MEDICARE	FQ21
5	OTHER SOURCE	
	REFUSED	FQ21
	DON'T KNOW	FQ21

FQ20

fq4govsource

FQ21

R4 FQ20 GOVERNMENT SOURCE

QUESTION TEXT:

Is that a government source?

CODES

1	YES
2	NO
	REFUSED
	DON'T KNOW

FQ21

QUESTION TEXT:

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

CODES

FQ21A

YES
NO
REFUSED
DON'T KNOW

FQ22

NOT ON FILE

NOT ON FILE

DISPLAY INSTRUCTIONS:

Display preloaded SP name in the response fields.

FQ21A

Display "FIRST" in bold underlined text.

Display SP first name in fill as bold underlined

QUESTION TEXT:

What is the correct spelling of {SP}'s full name?

{FIRST NAME} {MIDDLE NAME} {LAST NAME}

ENER TEXT	L an eth	25	
	Length	25	
	IER INSTRUCTIONS: FQ21a, 21b, and 21c on the same screen.		
FQ21B	FQ21B	NOT ON FILE	
	TRUCTIONS:		
	ay "MIDDLE" in bold underlined text.		
Displa	ay SP middle name in fill as bold underlined		
QUESTION T	EXT: at is the correct spelling of {SP}'s full name?		
	ST NAME} {MIDDLE NAME} {LAST NAME}		
	RRECT MIDDLE NAME. CONFIRM SPELLING.		
ENER TEXT	SS ENTER IF NO MIDDLE NAME OR INITIAL		
ENER IEAI	Length	25	
Allow e	IER INSTRUCTIONS:	25	
Allow e	IER INSTRUCTIONS: mpty.	25 NOT ON FILE	
Allow en Display FQ21C DISPLAY INS	FQ21a, 21b, and 21c on the same screen. FQ21C		
Allow er Display FQ21C DISPLAY INS Displa	TER INSTRUCTIONS: mpty. FQ21a, 21b, and 21c on the same screen. FQ21C STRUCTIONS: ay "LAST" in bold underlined text.		
Allow er Display FQ21C DISPLAY INS Displa Displa	THER INSTRUCTIONS: mpty. FQ21a, 21b, and 21c on the same screen. FQ21C STRUCTIONS: ay "LAST" in bold underlined text. ay SP last name in fill as bold underlined		
Allow en Display FQ21C DISPLAY INS Displa Displa QUESTION T	THER INSTRUCTIONS: mpty. FQ21a, 21b, and 21c on the same screen. FQ21C STRUCTIONS: ay "LAST" in bold underlined text. ay SP last name in fill as bold underlined		
Allow er Display FQ21C DISPLAY INS Displa Displa QUESTION T Wha	THER INSTRUCTIONS: mpty. FQ21a, 21b, and 21c on the same screen. FQ21C STRUCTIONS: ay "LAST" in bold underlined text. ay SP last name in fill as bold underlined EXT:		
Allow er Display FQ21C DISPLAY INS Displa Displa QUESTION T Wha {FIR	IER INSTRUCTIONS: mpty. FQ21a, 21b, and 21c on the same screen. FQ21C STRUCTIONS: ay "LAST" in bold underlined text. ay SP last name in fill as bold underlined EXT: at is the correct spelling of {SP}'s full name?		
Allow er Display FQ21C DISPLAY INS Displa Displa QUESTION T Wha {FIR	AER INSTRUCTIONS: mpty. FQ21a, 21b, and 21c on the same screen. FQ21C STRUCTIONS: ay "LAST" in bold underlined text. ay SP last name in fill as bold underlined EXT: at is the correct spelling of {SP}'s full name? SST NAME} {MIDDLE NAME} {LAST NAME}		
Allow er Display FQ21C DISPLAY INS Displa Displa QUESTION T Wha {FIR COF	AER INSTRUCTIONS: mpty. FQ21a, 21b, and 21c on the same screen. FQ21C STRUCTIONS: ay "LAST" in bold underlined text. ay SP last name in fill as bold underlined EXT: at is the correct spelling of {SP}'s full name? SST NAME} {MIDDLE NAME} {LAST NAME}		
Allow en Display FQ21C DISPLAY INS Displa Displa QUESTION T What {FIR COP ENER TEXT	AER INSTRUCTIONS: mpty. FQ21a, 21b, and 21c on the same screen. FQ21C STRUCTIONS: ay "LAST" in bold underlined text. ay SP last name in fill as bold underlined EXT: at is the correct spelling of {SP}'s full name? AST NAME} {MIDDLE NAME} {LAST NAME} RECT LAST NAME. CONFIRM SPELLING.	NOT ON FILE	
Allow er Display FQ21C DISPLAY INS Displa Displa QUESTION T Wha {FIR COF ENER TEXT PROGRAMM Display	HER INSTRUCTIONS: mpty. FQ21a, 21b, and 21c on the same screen. FQ21C STRUCTIONS: ay "LAST" in bold underlined text. ay SP last name in fill as bold underlined EXT: at is the correct spelling of {SP}'s full name? SST NAME} {MIDDLE NAME} {LAST NAME} RECT LAST NAME. CONFIRM SPELLING. Length MER INSTRUCTIONS:	NOT ON FILE	
Allow er Display FQ21C DISPLAY INS Displa Displa QUESTION T Wha {FIR COF ENER TEXT PROGRAMM Display	HER INSTRUCTIONS: mpty. FQ21a, 21b, and 21c on the same screen. FQ21C STRUCTIONS: ay "LAST" in bold underlined text. ay SP last name in fill as bold underlined EXT: at is the correct spelling of {SP}'s full name? AST NAME} {MIDDLE NAME} {LAST NAME} ARECT LAST NAME. CONFIRM SPELLING. Length HER INSTRUCTIONS: FQ21a, 21b, and 21c on the same screen.	NOT ON FILE	

IF GENDER IS	OBVIOUS, CODE WITHOUT A	SKING
OTHERWISE	ASK: Is {SP} male or female?	
CODES 1 2	MALE FEMALE	
BOX FQ22A	BOX FQ22A	NOT ON FILE
	eloaded CMS gender of SP wit le same, go to FQ23. lo to FQ22a	h FQ22 value just entered.
FQ22A	FQ22A	NOT ON FILE
	IANGED SP'S GENDER FROMN LE FROM FQ22} DID YOU INTI	I {PRELOADED CMS GENDER MALE/FEMALE} TO END TO DO THAT?
CODES 1 2	YES NO	FQ22
FQ23	FQ23	NOT ON FILE
	DNS: aded CMS DOB in the question	tout
		RTH MONTH BIRTH DAY, BIRTH YEAR}.
		NG ({BIRTH MM/BIRTH DD/BIRTH YEAR}).
	o confirm {SP}'s birth date is {E D/BIRTH YEAR}). Is that correc	BIRTH MONTH, BIRTH DAY, BIRTH YEAR} ({BIRTH t?
CODES	VEC	50 4
1 2	YES NO	FQ26
FQ24	FQ24	NOT ON FILE
DISPLAY INSTRUCTIO	DNS:	
Display preloa	aded CMS DOB.	
QUESTION TEXT: What is {SP}':	s date of birth?	
ENTER MON	TH, DAY, AND YEAR (MM-DD-	(YYY)
PROGRAMMER INST		ww.with.hynhens.for.data.entry

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

FQ25

NOT ON FILE

DISPLAY INSTRUCTIONS:

COMPUTE AGE AS (CURRENT DATE – FQ24 DOB).

FQ25

QUESTION TEXT:

I would like to confirm that {SP} is {CALCULATED AGE} years old today. Is that correct?

CODES

1	YES	
2	NO	FQ24
	REFUSED	
	DON'T KNOW	

FQ29	FQ29	NOT ON FILE	
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QUESTION TEXT:

YOU HAVE COMPLETED THE FACILITY STAFF QUESTIONNAIRE. THANK RESPONDENT.

PRESS 1 AND ENTER TO CONTINUE

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

FQ30

PROGRAMMER INSTRUCTIONS:

If FQ8=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 $[(FQ6 = 2 \text{ or } 3 \text{ or } 4 \text{ or } 8 \text{ or } 91 \text{ or } RF \text{ or } DK) \text{ and } FQ10 = 4] \text{ or } FQ11 = 2, \text{ set } FACILITY TYPE flag = 1 (NURSING HOME).}$

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

fq4dlocsp

R4 D FQ6 6A 10 10A FOR SAMP WGT