**NHATS Round 5** 

Section FQ [FACILITY STAFF QUESTIONNAIRE] Sequence: 44

FQ1PRE FQ1PRE NOT ON FILE

#### **DISPLAY INSTRUCTIONS:**

If the NHATS Interview task =11 (READY) and NEWSAMPLE flag <> 1, display "CONFIRM WITH THE FACILITY  $\{SP\}$  IS ALIVE BEFORE CONTINUING" and "AND  $\{SP\}$  IS ALIVE"

### **QUESTION TEXT:**

YOU HAVE SELECTED THE FACILITY STAFF QUESTIONNAIRE (FQ) FOR CASE

{CASE ID}, {SP}

{CONFIRM WITH THE FACILITY { SP} IS ALIVE BEFORE CONTINUING}.

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 AND ENTER

CODES

1 CONSENT TO RECORDING FQ1A

7 REFUSE CONSENT TO RECORD

5

FQ1NotRec FQ1NotRec 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.

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What is your name? ENTER FIRST NAME. CONFIRM SPELLING. **ENTER TEXT** Length 25 FQ<sub>1</sub>B FQ<sub>1</sub>B 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** Length 25 FQ2 FQ2 NOT ON FILE **QUESTION TEXT:** What is your job title? **ENTER TEXT** Length 50 FQ<sub>3</sub>A FQ<sub>3</sub>A NOT ON FILE **DISPLAY INSTRUCTIONS:** Display FQ3a, 3b, 3c, 3d, and 3e on the same screen. Display "address" as underlined text. **QUESTION TEXT:** What is the mailing address here? **CONFIRM SPELLING ENTER 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). FQ<sub>3</sub>B FQ<sub>3</sub>B NOT ON FILE **DISPLAY INSTRUCTIONS:** Display FQ3a, 3b, 3c, 3d, and 3e on the same screen. Display "address" as underlined text.

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**QUESTION TEXT:** 

[What is the mailing address here?]

**CONFIRM SPELLING** 

IF NO APT/SUITE NUMBER, PRESS ENTER TO CONTINUE

**ENTER TEXT** 

Length 25

PROGRAMMERS INSTRUCTIONS:

Allow empty

FQ3C FQ3C NOT ON FILE

**DISPLAY INSTRUCTIONS:** 

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

**QUESTION TEXT:** 

[What is the city?]

**CONFIRM SPELLING** 

**ENTER TEXT** 

Length 25

FQ3D FQ3D NOT ON FILE

**DISPLAY INSTRUCTIONS:** 

Display FQ3a, 3b, 3c, 3d, and 3e 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 (51STATE) of state names.

FQ3E FQ3E NOT ON FILE

**DISPLAY INSTRUCTIONS:** 

Display FQ3a, 3b, 3c, 3d, and 3e 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 5

PROGRAMMERS INSTRUCTIONS:

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

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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 (xxx-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** 

Length 50

**REFUSED** 

FQ5 FQ5 NOT ON FILE

**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** 

Length 75

FQ6 fq5dfacdescr R5 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

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2 3 4 5 6 7 8	FREE STANDING ASSISTED LIVING NURSING HOME AND ASSISTED LIVING CONTINUING CARE RETIREMENT (CCRC) ADULT FAMILY CARE HOME GROUP HOME BOARD AND CARE HOME RETIREMENT COMMUNITY OR SE (NOT CCRC) OTHER (SPECIFY) REFUSED DON'T KNOW	IVING FACILITY FQ7 COMMUNITY FQ7 FQ15 FQ15 FQ15	
FQ6A	fq5dosfacd	R5 FQ6A OTHER SPECIFY F	AC TYPE
QUESTION TEXT:  SPECIFY TY	PE OF PLACE		
ENTER TEXT			
	Length	50	
FQ7	FQ7	NOT ON FILE	
	d to confirm where {SP} is living.  D ENTER TO CONTINUE		
FQ8	fq5prtlivnam	R5 FQ8 FAC NM DIFF4PLC	SP LIVES
QUESTION TEXT:  Does the pa	art of {PLACE NAME FROM FQ5} in which	{SP} lives have a different name?	
CODES	VEC		
1 2	YES NO	FQ10	
	REFUSED DON'T KNOW	FQ10 FQ10	
FQ9	FQ9	NOT ON FILE	
QUESTION TEXT:			
What is the	name of {SP}'s area?		
	name of {SP}'s area?  Length	50	
What is the		50 R5 FQ10 FACILITY AREA SP	LIVES

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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
3	SPECIAL CARE, MEMORY CAF UNIT	RE, OR ALZHEIMER'S FQ11
4	NURSING HOME	FQ12
91	OTHER (SPECIFY)	
	REFUSED DON'T KNOW	FQ12
	DON I KNOW	FQ12
FQ10A	fq5dosfaca	R5 D FQ10A OTHER SPECIFY FAC AREA
QUESTION TEX	т.	
	Y OTHER TYPE OF PLACE	
ENTER TEXT	Length	50
	Lengui	50
<b>PROGRAMMER</b> Go to FC	S INSTRUCTIONS: 212	
FQ11	fq5assdnrsng	R5 FQ11 ASSIST LIV OR NURSG HOME
QUESTION TEXT	Т:	
	special care unit part of an assisted living	facility or is it part of a nursing home?
CODES		
1	ASSISTED LIVING	
2	NURSING HOME	
	REFUSED	
	DON'T KNOW	
FQ12	fq5othrlevIs	Dr. FO42 OTH LEVELS OF CARE AVAIL
. 4	iqyeam.evis	R5 FQ12 OTH LEVELS OF CARE AVAIL
QUESTION TEXT		
	s where {SP} lives, are there other levels ndent living, assisted living, a special care	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
	DOIL LIMON	'40
FQ13	fq5whotlevI1	R5 FQ13 INDEPNDNT LIV CARE AVAIL
	fq5whotlevl2	R5 FQ13 ASSISSTED LVNG CARE AVAIL
	fq5whotlevI3	R5 FQ13 ALZHEIMER CARE AVAIL
	fq5whotlevI4	R5 FQ13 NURSING HOME CARE AVAIL
		DS ELLIS INCID MINE DELIVIE LARE AVAIL

QUESTION TEXT:

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R5 FQ13 OTHR SPECIFY CARE AVAIL

 $fq \\ 5 \\ who tlev \\ l \\ 5$ 

## What other levels of care are available?

### SELECT ALL THAT APPLY

CODES	Code All That Apply	
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	fq5servaval1	R5 FQ15 MEALS AVAIL
	fq5servaval2	R5 FQ15 HELP WITH MEDS AVAIL
	fq5servaval3	R5 FQ15 HELP W BATH DRESS AVAIL
	fq5servaval4	R5 FQ15 LAUNDRY SERVCS AVAIL
	fq5servaval5	R5 FQ15 HOUSEKEEPING SERV AVAIL
	fq5servaval6	R5 FQ15 TRANSPRT MED CARE AVAIL
	fq5servaval7	R5 FQ15 TRANSPRT TO STORE EVENT
	fq5servaval10	R5 FQ15 FITNESS CENTER AVAIL
	fq5servaval11	R5 FQ15 WALKING AREA AVAIL
	fq5servaval8	R5 FQ15 RECREATIONAL FAC AVAIL
	fq5servaval9	R5 FQ15 SOCIAL EVENTS AVAIL
	fq5servaval12	R5 FQ15 ONSITE HEALTH AVAIL
	fq5servaval13	R5 FQ15 MED EMERGENCY SYSTEM 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  $\{SP\}$ 's current level of care. Please look at this list.  $\{]\}$ 

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{[]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 {SP}'s package of services provided by {PLACE NAME from FQ5} or if there is an extra charge for it. {]}

{variable text [a-m]}

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. An indoor fitness center?

RESPONSE [9] i. Areas to walk for pleasure or exercise, like an outdoor walking path?

RESPONSE [10]. j. Other recreational facilities, like swimming pools, game rooms, or tennis courts,

for residents?

RESPONSE [11] k. Organized social events and activities?

RESPONSE [12] I. Onsite health and wellness programs?

RESPONSE [13] m. A medical emergency system to call someone for help?

#### **CODES**

1 YES, SERVICE PROVIDED AS PART OF PACKAGE

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-m sequence until all rows have been displayed.

FQ16PRE	FQ16PRE	NOT ON FILE
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#### **QUESTION TEXT:**

These next questions are about the sources of payment for {SP}'s care.

PRESS 1 AND ENTER TO CONTINUE

FQ16	fq5paysourc1	R5 FQ16 SP OR SP FAMILY PAYMENT
	fq5paysourc2	R5 FQ16 SOC SEC SSI PAYMENT
	fq5paysourc3	R5 FQ16 MEDICAID PAYMENT
	fq5paysourc4	R5 FQ16 MEDICARE PAYMENT
	fq5paysourc5	R5 FQ16 PRIVATE INSURANCE PAYMNT
	fq5paysourc6	R5 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  $\{Medicare\}$ .

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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. SPOR 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 0 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 FQ18.

FQ17

fq5totalpaym

R5 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 {SP}'s care?

## **CODES**

1	YES	FQ19
2	NO	
	REFUSED	FQ19
	DON'T KNOW	FQ19

FQ<sub>18</sub>

fq5tmnthlyamt

R5 FQ18 TOT MTHLY AMT FOR CARE

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Display dollar amounts using comas to separate zeroes.

#### **QUESTION TEXT:**

Display dollar amounts using commas to separate zeroes.

**ENTER AMOUNT** 

### **ENTER NUMBER**

Range 0 to 26000

REFUSED DON'T KNOW

FQ19

fq5primpayer

R5 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 fq5govsource R5 FQ20 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

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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 {SP}'s full name? {FIRST NAME} {MIDDLE NAME} {LAST NAME} CORRECT FIRST NAME. CONFIRM SPELLING. **ENER 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 {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:** 

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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 r5dgender R5 D GENDER OF SP

**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 MALE2 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 FROM {PRELOADED CMS GENDER MALE/FEMALE} TO {FEMALE/MALE FROM FQ22} DID YOU INTEND TO DO THAT?

CODES

1 YES

2 NO FQ22

#### PROGRAMMER INSTRUCTIONS:

If FQ22A = 2 (NO), display hard error message "SELECT "GO TO" TO RETURN TO IS4A AND RE-ENTER RESPONSE."

FQ23 FQ23 NOT ON FILE

**DISPLAY INSTRUCTIONS:** 

Display preloaded CMS DOB in the question text.

SPELL OUT MONTH WHEN DISPLAYING {BIRTH MONTH BIRTH DAY, BIRTH YEAR}.

FORMAT AS MM/DD/YYYY WHEN DISPLAYING ({BIRTH MM/BIRTH DD/BIRTH YEAR}).

**QUESTION TEXT:** 

I also want to confirm {SP}'s birth date is {BIRTH MONTH, BIRTH DAY, BIRTH YEAR} ({BIRTH MM/BIRTHDD/BIRTH YEAR}). Is that correct?

**CODES** 

1 YES BOX FQ26

2 NO

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BOX FQ26 **REFUSED** DON'T KNOW BOX FQ26

FQ24 FQ24 NOT ON FILE

**DISPLAY INSTRUCTIONS:** 

Display preloaded CMS DOB.

**QUESTION TEXT:** 

What is {SP}'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 r5d2intvrage R5 D SP CAT AGE AT INTVW

**DISPLAY INSTRUCTIONS:** 

COMPUTE AGE AS (CURRENT DATE - FQ24 DOB).

**QUESTION TEXT:** 

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

CODES

YES 1

NO FQ24 2

> **REFUSED** DON'T KNOW

**BOX FQ26** NOT ON FILE **BOX FQ26** 

If NEWSAMPLE flag=1 (YES), go to FQ26.

Otherwise, go to FQ29.

FQ<sub>2</sub>6 fq5yourrace1 (Sensitive) R5 FQ26 SP RACE OF SP-WHITE

> R5 FQ26 SP RACE OF SP-AFRICN AMERICN fq5yourrace2 (Sensitive) R5 FQ26 SP RACE OF SP-AMERICAN INDIAN fq5yourrace3 (Sensitive) R5 FQ26 SP RACE OF SP-ALASKA NATIVE

fq5yourrace4 (Sensitive) R5 FQ26 SP RACE OF SP-ASIAN

fq5yourrace5 (Sensitive) R5 FQ26 SP RACE OF SP-NATIVE HWAIIAN

fq5yourrace7 (Sensitive) R5 FQ26 SP RACE OF SP PACIFIC ISLANDR

**QUESTION TEXT:** 

SHOW CARD FQ4

What race does {SP} consider {himself/herself} to be: White, Black or African American, American Indian, Alaska Native, Asian, Native Hawaiian, Pacific Islander, or something else?

SELECT ALL THAT APPLY

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CODES	Code All That Apply	
1	WHITE/CAUCASIAN	BOX FQ27
2	BLACK/AFRICAN AMERICAN	BOX FQ27
3	AMERICAN INDIAN	BOX FQ27
4	ALASK NATIVE	BOX FQ27
5	ASIAN	BOX FQ27
6	NATIVE HAWAIIAN	BOX FQ27
7	PACIFIC ISLANDER	BOX FQ27
91	OTHER (SPECIFY)	
	REFUSED	BOX FQ27
	DON'T KNOW	BOX FQ27

### PROGRAMMER INSTRUCTIONS:

Allow select all that apply.

FQ26A FQ26A NOT ON FILE

QUESTION TEXT:

SPECIFY OTHER RACE

**ENTER TEXT** 

Length 75

BOX FQ27 BOX FQ27 NOT ON FILE

If more than one response category selected at FQ26, go to FQ27.

Otherwise, go to FQ28

FQ27 fq5primarace (Sensitive) R2 FQ27 RACE CONSID SP PRIMRLY

### **DISPLAY INSTRUCTIONS:**

Display "or" between each race in question text.

In question text, display only response categories selected at FQ26.

# QUESTION TEXT:

SHOW CARD FQ4

Does SP consider {himself/herself} primarily {RESPONSE CATEGORIES SELECTED AT FQ26}?

## **CODES**

1	WHITE/CAUCASIAN
2	BLACK/AFRICAN AMERICAN
3	AMERICAN INDIAN
4	ALASK NATIVE
5	ASIAN
6	NATIVE HAWAIIAN
7	PACIFIC ISLANDER
91	OTHER RACE SPECIFIED AT FQ26A
	REFUSED

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#### DON'T KNOW

FQ<sub>2</sub>8 fq5hisplatno (Sensitive) R5 FQ28 CNSDR SP HSPAN OR LATNO

**QUESTION TEXT:** 

Does {SP} consider {himself/herself} Hispanic or Latino?

CODES

YES NO 2

> **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 FQ8=1 (YES), FACILITY NAME = text from FQ9.

Else FACILITY NAME = text from FQ5.

IMS will pull FACILITY NAME from NHATS Facility Task once task status = 20 (COMPLETE).

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 NEWSAMPLE flag=1 (YES) and 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 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); 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).

Page 15 of 15 NHATS Round 5 :: FQ IMS will pull FACILITY TYPE flag and FACILITY flag from NHATS Facility Task once task status = 20 (COMPLETE) if the NHATS Interview Task=11 (READY).

Set IRQ Facility Task=code 11 (READY).

Derived Variables From Items in FQ Section		
fq5dlocsp	R5 D FQ6 6A 10 10A FOR SAMP WGT	
r5dgender	R <sub>5</sub> D GENDER OF SP	
r5d2intvrage	R5 D SP CAT AGE AT INTVW	

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