

Health Status (HE) Section

Beta

BOX 01

NOTE: THIS SECTION IS ASKED FOR ALL CURRENT RU MEMBERS AND INSTITUTIONALIZED PERSONS. DO NOT ASK THIS SECTION FOR DECEASED PERSONS.

NOTE: QUESTIONS HE01 THROUGH HE06 ARE ASKED EVERY ROUND.

NOTE: THROUGHOUT THE HEALTH STATUS (HE) SECTION, AGE CATEGORIES ARE REFERENCED WHEN A TRUE AGE WAS NOT OBTAINED. THE AGES FOR THESE AGE CATEGORIES ARE AS FOLLOWS:

- 1 = LESS THAN 1 YEAR OLD
 - 2 = 1-4
 - 3 = 5-15
 - 4 = 16-23
 - 5 = 24-34
 - 6 = 35-44
 - 7 = 45-54
 - 8 = 55-64
 - 9 = 65 YEARS OLD OR OLDER
-

HE01

- Help Enabled (IMPAIRMENT) Comment Enabled Jump Back Enabled

| Variable Name | Label | Size |
|---------------|--|------|
| HOME.FONEHELP | ANYONE GET HELP USING PHONE/PAYING BILLS | 2 |

{STR-DT} {END-DT}

The next few questions are about difficulties people may have with everyday activities such as getting around, bathing or taking medications. We are interested in difficulties due to an impairment or a physical or mental health problem.

{Also, please keep in mind that we are only interested in difficulties family members may have had between (START DATE) and (END DATE).}

Does anyone in the family receive help or supervision using the telephone, paying bills, taking medications, preparing light meals, doing laundry, or going shopping?

| | | |
|------------|----|--------|
| YES | 1 | |
| NO | 2 | {HE04} |
| ----- | | |
| Refused | RF | {HE04} |
| Don't Know | DK | {HE04} |

HELP AVAILABLE FOR DEFINITION OF IMPAIRMENT AND HELP/SUPERVISION.

DISPLAY INSTRUCTIONS:
 DISPLAY '{Also, please keep in mind that we are only interested in difficulties family members may have had between (START DATE) and (END DATE).}' IF ROUND 5. OTHERWISE, USE NULL DISPLAY.

ROUTING INSTRUCTION:
 IF CODED '1' (YES) AND A SINGLE PERSON RU, AUTOMATICALLY CODE PERSON AS 'RECEIVES HELP' AT HE02 BY CAPI AND GO TO LOOP_01
 IF CODED '1' (YES) AND A MULTI-PERSON RU, CONTINUE WITH HE02

HE02

Help Enabled Comment Enabled Jump Back Enabled

| Variable Name | Label | Size |
|---------------|---------------------------------------|------|
| PRND.WHOFONE | WHO GOT HELP USING PHONE/PAYING BILLS | 2 |
| PRND.IADLFLAG | LTC SUPPLEMENT FLAG: IADL SECTION | 2 |

{STR-DT} {END-DT}

HELP OR SUPERVISION USING THE TELEPHONE, PAYING BILLS, TAKING MEDICATIONS, PREPARING LIGHT MEALS, DOING LAUNDRY, OR GOING SHOPPING.

Who is that?

PROBE: Does anyone else receive help or supervision doing these types of activities?

[First Name],[Middle Name],Last Name {LOOP_01}
 [First Name],[Middle Name],Last Name
 [First Name],[Middle Name],Last Name

PROGRAMMER NOTES:
 FLAG ALL SELECTED PERSONS WHO ARE = OR > 13 YEARS OLD OR IN AGE CATEGORIES 4-9 FOR THE LTC SUPPLEMENT: IADL SECTION.

| Roster Details | | |
|-----------------------|---------------|--|
| Title: | RU_Members_1 | |
| Col # | Header | Instructions |
| 1 | NAME | Display RU member's first, middle, and last names PERS.FULLNAME |

Roster Definition:
 This item displays RU-MEMBERS-ROSTER for selection.

Roster Behavior:
 1. Multiple select allowed.
 2. Add, delete, and edit disallowed

Roster Filter:

| Display all RU members excluding deceased RU members. |
|-----|

LOOP 01

FOR EACH ELEMENT IN THE RU-MEMBERS-ROSTER, ASK BOX_01A - END_LP01

LOOP DEFINITION: LOOP_01 DETERMINES IF PERSONS RECEIVE HELP OR SUPERVISION WITH INSTRUMENTAL ACTIVITIES OF DAILY LIVING BECAUSE OF AN IMPAIRMENT OR PHYSICAL OR MENTAL HEALTH PROBLEM. THIS LOOP CYCLES ON RU MEMBERS WHO MEET THE FOLLOWING CONDITIONS:

- PERSON IS NOT DECEASED
- PERSON RECEIVES HELP WITH INSTRUMENTAL ACTIVITIES OF DAILY LIVING (I.E., PERSON SELECTED AT HE02)

BOX 01A

IF THE RU MEMBER BEING LOOPED ON IS < 13 YEARS OF AGE OR IN AGE CATEGORIES 1-3, CONTINUE WITH HE03

OTHERWISE, GO TO HE03A

HE03

Help Enabled (IMPAIRMENT) Comment Enabled Jump Back Enabled

| Variable Name | Label | Size |
|---------------|--|------|
| PRND.PHONPROB | DID PERSON GET HELP FOR HEALTH REASONS | 2 |
| PRND.IADLFLAG | LTC SUPPLEMENT FLAG: IADL SECTION | 2 |

{PERSON'S FIRST MIDDLE AND LAST NAME} {STR-DT} {END-DT}

(Do/Does) (PERSON) receive help or supervision using the telephone, paying bills, taking medications, preparing light meals, doing laundry or going shopping **because of an impairment or a physical or mental health problem?**

| | | |
|------------|----|------------|
| YES | 1 | {HE03A} |
| NO | 2 | {END_LP01} |
| ----- | | |
| Refused | RF | {END_LP01} |
| Don't Know | DK | {END_LP01} |

HELP AVAILABLE FOR DEFINITION OF HELP/SUPERVISION AND IMPAIRMENT.

PROGRAMMER NOTES:
IF CODED '1' (YES), FLAG PERSON FOR THE LTC SUPPLEMENT: IADL SECTION.

HE03A

Help Enabled Comment Enabled Jump Back Enabled

| Variable Name | Label | Size |
|---------------|-------------------------------------|------|
| PRND.HLPACTIV | HELP OR SUPERVISION WITH ACTIVITIES | 2 |

{PERSON'S FIRST MIDDLE AND LAST NAME} {STR-DT} {END-DT}

Do you expect that (PERSON) will need help or supervision with these activities for at least three more months?

| | | |
|------------|----|------------|
| YES | 1 | {END_LP01} |
| NO | 2 | {END_LP01} |
| ----- | | |
| Refused | RF | {END_LP01} |
| Don't Know | DK | {END_LP01} |

END_LP01

CYCLE ON NEXT PERSON IN THE RU-MEMBERS-ROSTER WHO MEETS THE CONDITIONS STATED IN THE LOOP DEFINITION

IF NO OTHER PERSONS MEET THE STATED CONDITIONS, END LOOP_01 AND CONTINUE WITH HE04

HE04

Help Enabled (HE04Help) Comment Enabled Jump Back Enabled

| Variable Name | Label | Size |
|---------------|------------------------------------|------|
| HOME.PERSHLP | ANYONE GET HELP WITH PERSONAL CARE | 2 |

{STR-DT} {END-DT}

Does anyone in the family receive help or supervision with personal care such as bathing, dressing, or getting around the house?

| | | |
|------------|----|----------|
| YES | 1 | |
| NO | 2 | {BOX_02} |
| ----- | | |
| Refused | RF | {BOX_02} |
| Don't Know | DK | {BOX_02} |

HELP AVAILABLE FOR DEFINITION OF HELP/SUPERVISION.

PROGRAMMER NOTES:
IF CODED '1' (YES) AND A SINGLE-PERSON RU, AUTOMATICALLY CODE PERSON AS 'RECEIVES HELP' AT HE05 BY CAPI.

ROUTING INSTRUCTION:
IF CODED '1' (YES) AND A SINGLE-PERSON RU, GO TO LOOP_02
IF CODED '1' (YES) AND MULTI-PERSON RU, CONTINUE WITH HE05

HE05

Help Enabled Comment Enabled Jump Back Enabled

| Variable Name | Label | Size |
|---------------|----------------------------------|------|
| PRND.WHOPERS | WHO GOT HELP WITH PERSONAL CARE | 2 |
| PRND.ADLFLAG | LTC SUPPLEMENT FLAG: ADL SECTION | 2 |

{STR-DT} {END-DT}

HELP OR SUPERVISION WITH PERSONAL CARE SUCH AS BATHING, DRESSING OR GETTING AROUND THE HOUSE.

Who is that?

PROBE: Does anyone else receive help or supervision with personal care?

[First Name],[Middle Name],Last Name {LOOP_02}
 [First Name],[Middle Name],Last Name
 [First Name],[Middle Name],Last Name

PROGRAMMER NOTES:
 FLAG ALL SELECTED PERSONS WHO ARE = OR > 13 YEARS OLD OR IN
 AGE CATEGORIES 4-9 FOR THE LTC SUPPLEMENT: ADL SECTION.

Roster Details

Title: RU_Members_1

| Col # | Header | Instructions |
|-------|--------|--|
| 1 | NAME | Display RU member's first, middle, and last names PERS.FULLNAME |

Roster Definition:
 This item displays RU-MEMBERS-ROSTER for selection.

Roster Behavior:
 1. Multiple select allowed.
 2. Add, delete, and edit disallowed

Roster Filter:
 Display all RU members excluding deceased RU members.

LOOP 02

FOR EACH ELEMENT IN THE RU-MEMBERS-ROSTER, ASK BOX_01B - END_LP02

LOOP DEFINITION: LOOP_02 DETERMINES IF PERSONS RECEIVE HELP OR SUPERVISION WITH PERSONAL CARE (I.E., ACTIVITIES OF DAILY LIVING) BECAUSE OF AN IMPAIRMENT OR PHYSICAL OR MENTAL HEALTH PROBLEM. THIS LOOP CYCLES ON RU MEMBERS WHO MEET THE FOLLOWING CONDITIONS:

- PERSON IS NOT DECEASED
- PERSON RECEIVES HELP OR SUPERVISION WITH PERSONAL CARE (I.E., ACTIVITIES OF DAILY LIVING, THAT IS, THE PERSON IS SELECTED AT HE05)
- PERSON = OR > 13 YEARS OF AGE OR IN AGE CATEGORIES 4-9

BOX 01B

IF THE RU MEMBER BEING LOOPED ON IS < 13 YEARS OF AGE OR IN AGE CATEGORIES 1-3, CONTINUE WITH HE06

OTHERWISE, GO TO HE06A

HE06

Help Enabled (IMPAIRMENT) Comment Enabled Jump Back Enabled

| Variable Name | Label | Size |
|---------------|---|------|
| PRND.PERSPROB | DID PERSON GET HELP FOR HEALTH PROBLEMS | 2 |
| PRND.ADLFLAG | LTC SUPPLEMENT FLAG: ADL SECTION | 2 |

{PERSON'S FIRST MIDDLE AND LAST NAME} {STR-DT} {END-DT}

(Do/Does) (PERSON) receive help or supervision with personal care such as bathing, dressing or getting around the house **because of an impairment or a physical or mental health problem?**

| | | |
|------------|----|------------|
| YES | 1 | {HE06A} |
| NO | 2 | {END_LP02} |
| ----- | | |
| Refused | RF | {END_LP02} |
| Don't Know | DK | {END_LP02} |

HELP AVAILABLE FOR DEFINITION OF HELP/SUPERVISION AND IMPAIRMENT.

PROGRAMMER NOTES:
IF CODED '1' (YES), FLAG PERSON FOR THE LTC SUPPLEMENT: ADL SECTION.

HE06A

Help Enabled Comment Enabled Jump Back Enabled

| Variable Name | Label | Size |
|---------------|--|------|
| PRND.HLPPCARE | HELP OR SUPERVISION WITH PERSONAL CARE | 2 |

{PERSON'S FIRST MIDDLE AND LAST NAME} {STR-DT} {END-DT}

Do you expect that (PERSON) will need help or supervision with personal care for at least three more months?

| | | |
|------------|----|------------|
| YES | 1 | {END_LP02} |
| NO | 2 | {END_LP02} |
| ----- | | |
| Refused | RF | {END_LP02} |
| Don't Know | DK | {END_LP02} |

END_LP02

CYCLE ON NEXT PERSON IN THE RU-MEMBERS-ROSTER WHO MEETS THE CONDITIONS STATED IN THE LOOP DEFINITION

IF NO OTHER PERSONS MEET THE STATED CONDITIONS, END LOOP_02 AND CONTINUE WITH BOX_02

BOX_02

IF ROUND 1 OR ROUND 3 OR ROUND 5, CONTINUE WITH HE07

IF ROUND 2 OR ROUND 4, GO TO HE26

HE07

- Help Enabled (HE07Help) Comment Enabled Jump Back Enabled

| Variable Name | Label | Size |
|---------------|-------------------------------------|------|
| HOME.AIDSHLP | ANYONE GET HELP FROM AIDS/EQUIPMENT | 2 |

{STR-DT} {END-DT}

Does anyone in the family use any aids such as a walker, grab bars in the bathtub or any other special equipment for personal care or everyday activities?

- | | | |
|------------|----|--------|
| YES | 1 | |
| NO | 2 | {HE09} |
| ----- | | |
| Refused | RF | {HE09} |
| Don't Know | DK | {HE09} |

HELP AVAILABLE FOR EXAMPLES OF AIDS/SPECIAL EQUIPMENT.

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PROGRAMMER NOTES:
IF CODED '1' (YES) AND A SINGLE-PERSON RU, AUTOMATICALLY CODE
PERSON AS 'USES AIDS' AT HE08 BY CAPI.
=====
ROUTING INSTRUCTION:
IF CODED '1' (YES) AND A SINGLE-PERSON RU, GO TO HE09
IF CODED '1' (YES) AND A MULTI-PERSON RU, CONTINUE WITH HE08
    
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HE08

Help Enabled Comment Enabled Jump Back Enabled

| Variable Name | Label | Size |
|---------------|--|------|
| PRND.WHOAIDS | WHO GOT HELP FROM AIDS/EQUIPMENT | 2 |
| PRND.ASEFLAG | LTC SUPP. FLAG: AIDS/SPECIAL EQUIP. SECT | 2 |

{STR-DT} {END-DT}

USE ANY AIDS SUCH AS A WALKER, GRAB BARS IN THE BATHTUB OR ANY OTHER SPECIAL EQUIPMENT FOR PERSONAL CARE OR EVERYDAY ACTIVITIES.

Who is that?

PROBE: Does anyone else use any aids for personal care or everyday activities?

[First Name],[Middle Name],Last Name {HE09}
 [First Name],[Middle Name],Last Name
 [First Name],[Middle Name],Last Name

PROGRAMMER NOTES:
 FLAG ALL SELECTED PERSONS FOR THE LTC SUPPLEMENT: AIDS/SPECIAL EQUIPMENT SECTION.

Roster Details

Title: RU_Members_1

| Col # | Header | Instructions |
|-------|--------|--|
| 1 | NAME | Display RU member's first, middle, and last names PERS.FULLNAME |

Roster Definition:
 This item displays RU-MEMBERS-ROSTER for selection.

Roster Behavior:
 1. Multiple select allowed.
 2. Add, delete, and edit disallowed

Roster Filter:

| Display all RU members excluding deceased RU members. |
 |-----|

HE09

- Help Enabled Comment Enabled Jump Back Enabled

| Variable Name | Label | Size |
|---------------|--|------|
| HOME.WALKHELP | ANYONE HAVE DIFFICULTY WALK/CLIMB/GRASP/ | 2 |

{STR-DT} {END-DT}

Does anyone in the family have difficulties walking, climbing stairs, grasping objects, reaching overhead, lifting, bending or stooping, or standing for long periods of time?

| | | |
|------------|----|--------|
| YES | 1 | |
| NO | 2 | {HE19} |
| ----- | | |
| Refused | RF | {HE19} |
| Don't Know | DK | {HE19} |

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PROGRAMMER NOTES:
IF CODED '1' (YES) AND A SINGLE-PERSON RU, AUTOMATICALLY CODE
PERSON AS 'HAVING DIFFICULTY' AT HE10 BY CAPI.
=====
ROUTING INSTRUCTION:
IF CODED '1' (YES) AND A SINGLE-PERSON RU, GO TO LOOP_03
IF CODED '1' (YES) AND A MULTI-PERSON RU, CONTINUE WITH HE10
    
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HE10

Help Enabled Comment Enabled Jump Back Enabled

| Variable Name | Label | Size |
|---------------|--|------|
| PRND.WHOWALK | WHO HAD DIFFICULTY WALK/CLIMB/GRASP | 2 |
| PRND.FULIFLAG | LTC SUPP. FLAG: FUNCTIONAL LIMITATIONS | 2 |

{STR-DT} {END-DT}

DIFFICULTIES WALKING, CLIMBING STAIRS, GRASPING OBJECTS, REACHING OVERHEAD, LIFTING, BENDING OR STOOPING, OR STANDING FOR LONG PERIODS OF TIME.

Who is that?

PROBE: Does anyone else have difficulties doing these types of activities?

[First Name],[Middle Name],Last Name {LOOP_03}
 [First Name],[Middle Name],Last Name
 [First Name],[Middle Name],Last Name

PROGRAMMER NOTES:
 FLAG ALL SELECTED PERSONS WHO ARE = OR > 13 YEARS OLD OR IN AGE CATEGORIES 4-9 FOR THE LTC SUPPLEMENT: FUNCTIONAL LIMITATIONS SECTION.

| Roster Details | | |
|-----------------------|--------------|--|
| Title: | RU_Members_1 | |
| Col # | Header | Instructions |
| 1 | NAME | Display RU member's first, middle, and last names PERS.FULLNAME |

Roster Definition:
 This item displays RU-MEMBERS-ROSTER for selection.

=====

Roster Behavior:
 1. Multiple select allowed.
 2. Add, delete, and edit disallowed

=====

Roster Filter:

| Display all RU members excluding deceased RU members. |

LOOP 03

FOR EACH ELEMENT IN THE RU-MEMBERS-ROSTER, ASK HE11 - END_LP03

LOOP DEFINITION: LOOP_03 COLLECTS INFORMATION ON THE LEVEL OF FUNCTIONAL LIMITATION WITH VARIOUS PHYSICAL ACTIVITIES FOR PERSONS = OR > 13 YEARS OF AGE. THIS LOOP CYCLES ON RU MEMBERS WHO MEET THE FOLLOWING CONDITIONS:

- PERSON IS NOT DECEASED
 - PERSON HAS FUNCTIONAL LIMITATIONS (I.E., PERSON SELECTED AT HE10)
 - PERSON = OR > 13 YEARS OF AGE OR IN AGE CATEGORIES 4-9
-

HE11

Help Enabled Comment Enabled Jump Back Enabled

| Variable Name | Label | Size |
|---------------|--------------------------------|------|
| PRND.LIFTDIFF | HAVE DIFFICULTY LIFTING THINGS | 2 |

{PERSON'S FIRST MIDDLE AND LAST NAME} {STR-DT} {END-DT}

SHOW CARD HE-1.

{For these next questions, I would like you to think about the time when (PERSON) entered the institution and what (PERSON) was able to do at that time.}

Please look at this card and tell me how much difficulty (do/does) (PERSON) have lifting something as heavy as 10 pounds, such as a full bag of groceries? Would you say no difficulty, some difficulty, a lot of difficulty, or completely unable to do it?

| | | |
|----------------------------|----|--------|
| NO DIFFICULTY | 1 | {HE12} |
| SOME DIFFICULTY | 2 | {HE12} |
| A LOT OF DIFFICULTY | 3 | {HE12} |
| COMPLETELY UNABLE TO DO IT | 4 | {HE12} |
| ----- | | |
| Refused | RF | {HE12} |
| Don't Know | DK | {HE12} |

DISPLAY INSTRUCTIONS:
 DISPLAY 'For these next questions, I would like you to think about the time when (PERSON) entered the institution and what (PERSON) was able to do at that time.}' IF PERSON BEING ASKED ABOUT CODED AS BEING INSTITUTIONALIZED AT END DATE. IF PERSON BEING ASKED ABOUT IS A CURRENT RU MEMBER LIVING IN THE RU, USE A NULL DISPLAY.

HE12

Help Enabled Comment Enabled Jump Back Enabled

| Variable Name | Label | Size |
|---------------|----------------------------------|------|
| PRND.STEPDIFF | HAVE DIFFICULTY WALKING UP STEPS | 2 |

{PERSON'S FIRST MIDDLE AND LAST NAME} {STR-DT} {END-DT}

SHOW CARD HE-1.

How much difficulty (do/does) (PERSON) have walking up 10 steps without resting?

PROBE: Would you say no difficulty, some difficulty, a lot of difficulty, or completely unable to do it?

IF RESPONDENT VOLUNTEERS THAT PERSON IS COMPLETELY UNABLE TO WALK, SELECT 'COMPLETELY UNABLE TO WALK.'

| | | |
|----------------------------|----|--------|
| NO DIFFICULTY | 1 | {HE13} |
| SOME DIFFICULTY | 2 | {HE13} |
| A LOT OF DIFFICULTY | 3 | {HE13} |
| COMPLETELY UNABLE TO DO IT | 4 | {HE13} |
| COMPLETELY UNABLE TO WALK | 5 | {HE17} |
| ----- | | |
| Refused | RF | {HE13} |
| Don't Know | DK | {HE13} |

PROGRAMMER NOTES:
IF CODED '5' (COMPLETELY UNABLE TO WALK), AUTOMATICALLY CODE HE13, HE14, HE15, AND HE16 AS '4' (COMPLETELY UNABLE TO DO IT) BY CAPI

HE13

Help Enabled Comment Enabled Jump Back Enabled

| Variable Name | Label | Size |
|---------------|-------------------------------------|------|
| PRND.BLOKDIFF | HAVE DIFFICULTY WALKING CITY BLOCKS | 2 |

{PERSON'S FIRST MIDDLE AND LAST NAME} {STR-DT} {END-DT}

SHOW CARD HE-1.

How much difficulty (do/does) (PERSON) have walking about 3 city blocks or about a quarter of a mile?

PROBE: Would you say no difficulty, some difficulty, a lot of difficulty, or completely unable to do it?

| | | |
|----------------------------|----|--------|
| NO DIFFICULTY | 1 | {HE14} |
| SOME DIFFICULTY | 2 | {HE14} |
| A LOT OF DIFFICULTY | 3 | {HE14} |
| COMPLETELY UNABLE TO DO IT | 4 | {HE15} |
| ----- | | |
| Refused | RF | {HE14} |
| Don't Know | DK | {HE14} |

PROGRAMMER NOTES:
IF CODED '4' (COMPLETELY UNABLE TO DO IT), AUTOMATICALLY CODE HE14 AS '4' (COMPLETELY UNABLE TO DO IT) BY CAPI

HE14

Help Enabled Comment Enabled Jump Back Enabled

| Variable Name | Label | Size |
|---------------|--------------------------------|------|
| PRND.MILEDIFF | HAVE DIFFICULTY WALKING A MILE | 2 |

{PERSON'S FIRST MIDDLE AND LAST NAME} {STR-DT} {END-DT}

SHOW CARD HE-1.

How much difficulty (do/does) (PERSON) have walking a mile?

PROBE: Would you say no difficulty, some difficulty, a lot of difficulty, or completely unable to do it?

| | | |
|----------------------------|----|--------|
| NO DIFFICULTY | 1 | {HE15} |
| SOME DIFFICULTY | 2 | {HE15} |
| A LOT OF DIFFICULTY | 3 | {HE15} |
| COMPLETELY UNABLE TO DO IT | 4 | {HE15} |
| ----- | | |
| Refused | RF | {HE15} |
| Don't Know | DK | {HE15} |

HE15

Help Enabled Comment Enabled Jump Back Enabled

| Variable Name | Label | Size |
|---------------|-------------------------------------|------|
| PRND.STNDDIFF | HAVE DIFFICULTY STANDING 20 MINUTES | 2 |

{PERSON'S FIRST MIDDLE AND LAST NAME} {STR-DT} {END-DT}

SHOW CARD HE-1.

How much difficulty (do/does) (PERSON) have standing for about 20 minutes?

PROBE: Would you say no difficulty, some difficulty, a lot of difficulty, or completely unable to do it?

| | | |
|----------------------------|----|--------|
| NO DIFFICULTY | 1 | {HE16} |
| SOME DIFFICULTY | 2 | {HE16} |
| A LOT OF DIFFICULTY | 3 | {HE16} |
| COMPLETELY UNABLE TO DO IT | 4 | {HE16} |
| ----- | | |
| Refused | RF | {HE16} |
| Don't Know | DK | {HE16} |

HE16

Help Enabled Comment Enabled Jump Back Enabled

| Variable Name | Label | Size |
|---------------|----------------------------------|------|
| PRND.BENDDIFF | HAVE DIFFICULTY BENDING/STOOPING | 2 |

{PERSON'S FIRST MIDDLE AND LAST NAME} {STR-DT} {END-DT}

SHOW CARD HE-1.

How much difficulty (do/does) (PERSON) have bending down or stooping from a standing position to pick up an object from the floor or tie a shoe?

PROBE: Would you say no difficulty, some difficulty, a lot of difficulty, or completely unable to do it?

| | | |
|----------------------------|----|--------|
| NO DIFFICULTY | 1 | {HE17} |
| SOME DIFFICULTY | 2 | {HE17} |
| A LOT OF DIFFICULTY | 3 | {HE17} |
| COMPLETELY UNABLE TO DO IT | 4 | {HE17} |
| ----- | | |
| Refused | RF | {HE17} |
| Don't Know | DK | {HE17} |

HE17

- Help Enabled Comment Enabled Jump Back Enabled

| Variable Name | Label | Size |
|---------------|-----------------------------------|------|
| PRND.RECHDIFF | HAVE DIFFICULTY REACHING OVERHEAD | 2 |

{PERSON'S FIRST MIDDLE AND LAST NAME} {STR-DT} {END-DT}

SHOW CARD HE-1.

How much difficulty (do/does) (PERSON) have reaching up overhead, for example to remove something from a shelf?

PROBE: Would you say no difficulty, some difficulty, a lot of difficulty, or completely unable to do it?

| | | |
|----------------------------|----|--------|
| NO DIFFICULTY | 1 | {HE18} |
| SOME DIFFICULTY | 2 | {HE18} |
| A LOT OF DIFFICULTY | 3 | {HE18} |
| COMPLETELY UNABLE TO DO IT | 4 | {HE18} |
| ----- | | |
| Refused | RF | {HE18} |
| Don't Know | DK | {HE18} |

HE18

Help Enabled Comment Enabled Jump Back Enabled

| Variable Name | Label | Size |
|---------------|-------------------------------------|------|
| PRND.GRSPDIFF | HAVE DIFFICULTY GRASPING/PICKING UP | 2 |

{PERSON'S FIRST MIDDLE AND LAST NAME} {STR-DT} {END-DT}

SHOW CARD HE-1.

How much difficulty (do/does) (PERSON) have using fingers to grasp or handle something such as picking up a glass from a table or using a pencil to write?

PROBE: Would you say no difficulty, some difficulty, a lot of difficulty, or completely unable to do it?

| | | |
|----------------------------|----|---------|
| NO DIFFICULTY | 1 | {HE18A} |
| SOME DIFFICULTY | 2 | {HE18A} |
| A LOT OF DIFFICULTY | 3 | {HE18A} |
| COMPLETELY UNABLE TO DO IT | 4 | {HE18A} |
| ----- | | |
| Refused | RF | {HE18A} |
| Don't Know | DK | {HE18A} |

HE18A

Help Enabled Comment Enabled Jump Back Enabled

| Variable Name | Label | Size |
|---------------|---|------|
| PRND.DIFACTIV | DIFFICULTY WITH ANY OF THESE ACTIVITIES | 2 |

{PERSON'S FIRST MIDDLE AND LAST NAME} {STR-DT} {END-DT}

(Are/Is) (PERSON) expected to have difficulty with any of these activities for at least three more months?

| | | |
|------------|----|------------|
| YES | 1 | {END_LP03} |
| NO | 2 | {END_LP03} |
| ----- | | |
| Refused | RF | {END_LP03} |
| Don't Know | DK | {END_LP03} |

END_LP03

CYCLE ON NEXT PERSON IN THE RU-MEMBERS-ROSTER WHO MEETS THE CONDITIONS STATED IN THE LOOP DEFINITION

IF NO OTHER PERSONS MEET THE STATED CONDITIONS, END LOOP_03 AND CONTINUE WITH HE19

HE19

Help Enabled (HE19Help) Comment Enabled Jump Back Enabled

| Variable Name | Label | Size |
|----------------|-----------------------------------|------|
| HOME.WORKLIMIT | ANYONE LIMITED IN ABILITY TO WORK | 2 |

{STR-DT} {END-DT}

Is anyone in the family limited in any way in the ability to work at a job, do housework, or go to school **because of an impairment or a physical or mental health problem?**

| | | |
|-----|---|--------|
| YES | 1 | |
| NO | 2 | {HE22} |

| | | |
|------------|----|--------|
| Refused | RF | {HE22} |
| Don't Know | DK | {HE22} |

HELP AVAILABLE FOR DEFINITION OF LIMITED ABILITY AND IMPAIRMENT.

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PROGRAMMER NOTES:
IF CODED '1' (YES) AND A SINGLE-PERSON RU, AUTOMATICALLY CODE
PERSON AS 'LIMITED ABILITY' AT HE20 BY CAPI

ROUTING INSTRUCTION:
IF CODED '1' (YES) AND A SINGLE-PERSON RU, GO TO LOOP_04
IF CODED '1' (YES) AND A MULTI-PERSON RU, CONTINUE WITH HE20
  
```

HE20

Help Enabled Comment Enabled Jump Back Enabled

| Variable Name | Label | Size |
|---------------|--|------|
| PRND.WHOWORKL | WHO IS LIMITED IN ABILITY TO WORK | 2 |
| PRND.WHSLFLAG | LTC SUPP FLAG: WORK/HOUSEWORK/SCHL LIMIT | 2 |

{STR-DT} {END-DT}

LIMITED ABILITY TO WORK AT A JOB, DO HOUSEWORK OR GO TO SCHOOL BECAUSE OF AN IMPAIRMENT OR A PHYSICAL OR MENTAL HEALTH PROBLEM.

Who is that?

PROBE: Is anyone else limited in the ability to work at a job, do housework, or go to school **because of an impairment or a physical or mental health problem?**

[First Name],[Middle Name],Last Name {LOOP_04}
 [First Name],[Middle Name],Last Name
 [First Name],[Middle Name],Last Name

PROGRAMMER NOTES:
 FLAG ALL SELECTED PERSONS WHO ARE = OR > 5 YEARS OLD OR IN AGE CATEGORIES 3-9 FOR THE LTC SUPPLEMENT: WORK-HOUSEWORK-SCHOOL LIMITATIONS SECTION.

| Roster Details | | |
|-----------------------|--------------|--|
| Title: | RU_Members_1 | |
| Col # | Header | Instructions |
| 1 | NAME | Display RU member's first, middle, and last names PERS.FULLNAME |

Roster Definition:
 This item displays RU-MEMBERS-ROSTER for selection.

Roster Behavior:
 1. Multiple select allowed.
 2. Add, delete, and edit disallowed

Roster Filter:
Display all RU members excluding deceased RU members.

LOOP 04

FOR EACH ELEMENT IN THE RU-MEMBERS-ROSTER, ASK HE20A - END_LP04

LOOP DEFINITION: LOOP_03 COLLECTS INFORMATION ON WORK/HOUSEWORK/SCHOOL LIMITATIONS BECAUSE OF AN IMPAIRMENT OR PHYSICAL OR MENTAL HEALTH PROBLEM FOR PERSONS = OR > 5 YEARS OF AGE. THIS LOOP CYCLES ON RU MEMBERS WHO MEET THE FOLLOWING CONDITIONS:

- PERSON IS NOT DECEASED
 - PERSON IS LIMITED IN ABILITY TO WORK AT A JOB, DO HOUSEWORK, OR GO TO SCHOOL (I.E., PERSON SELECTED AT HE20)
 - PERSON = OR > 5 YEARS OF AGE OR IN AGE CATEGORIES 3-9
-

HE20A

Help Enabled Comment Enabled Jump Back Enabled

| Variable Name | Label | Size |
|----------------|--|------|
| PRND.LIMTWORK | PERSON HAS LIMITED ACTIVITIES-WORKING A | 2 |
| PRND.LIMTHSWK | PERSON HAS LIMITED ACTIVITIES-DOING HOUS | 2 |
| PRND.LIMITSCHL | PERSON HAS LIMITED ACTIVITIES-GOING TO S | 2 |

{PERSON'S FIRST MIDDLE AND LAST NAME} {STR-DT} {END-DT}

Which activities is (PERSON) limited in doing because of an impairment or a physical or mental health problem - working at a job, doing housework, or going to school?

CHECK ALL THAT APPLY.

- | | | |
|------------------|----|--------|
| WORKING AT A JOB | 1 | {HE21} |
| DOING HOUSEWORK | 2 | {HE21} |
| GOING TO SCHOOL | 3 | {HE21} |
| ----- | | |
| Refused | RF | {HE21} |
| Don't Know | DK | {HE21} |

HE21 Help Enabled Comment Enabled Jump Back Enabled

| Variable Name | Label | Size |
|---------------|-------------------------------------|------|
| PRND.UNABLWRK | IS PERSON COMPLETELY UNABLE TO WORK | 2 |

{PERSON'S FIRST MIDDLE AND LAST NAME} {STR-DT} {END-DT}

{At the time (PERSON) entered the institution, was/(Are/Is)} (PERSON) completely unable to {work at a job}{,/ and} { do housework}{ and}{ go to school}?

| | | |
|------------|----|------------|
| YES | 1 | {END_LP04} |
| NO | 2 | {END_LP04} |
| Refused | RF | {END_LP04} |
| Don't Know | DK | {END_LP04} |

DISPLAY INSTRUCTIONS:

DISPLAY 'At the time (PERSON) entered the institution, was' IF PERSON BEING ASKED ABOUT CODED AS BEING INSTITUTIONALIZED AT END DATE. DISPLAY '(Are/Is)' IF PERSON BEING ASKED ABOUT IS A CURRENT RU MEMBER LIVING IN THE RU.

DISPLAY 'work at a job' IF HE20A IS CODED '1' (WORKING AT A JOB), EITHER ALONE OR IN COMBINATION WITH OTHER CODES OR IF HE20A IS CODED 'RF' (REFUSED) OR 'DK' (DON'T KNOW). IF HE20A IS NOT CODED '1', 'RF', OR 'DK', USE A NULL DISPLAY.

DISPLAY ', ' IF HE20A IS CODED '1', '2', AND '3' OR IF HE20A IS CODED EITHER 'RF' OR 'DK'. DISPLAY ' and' IF HE20A IS CODED '1' AND EITHER '2' OR '3'. OTHERWISE, USE A NULL DISPLAY.

DISPLAY ' do housework' IF HE20A IS CODED '2' (DOING HOUSEWORK), EITHER ALONE OR IN COMBINATION WITH OTHER CODES OR IF HE20A IS CODED 'RF' (REFUSED) OR 'DK' (DON'T KNOW). IF HE20A IS NOT CODED '2', 'RF', OR 'DK', USE A NULL DISPLAY.

DISPLAY ' and' IF ONLY CODES '2' AND '3' ARE SELECTED AT HE20A OR IF CODES '1', '2', AND '3' ARE ALL SELECTED AT HE20A OR IF CODED EITHER 'RF' OR 'DK' AT HE20A. OTHERWISE, USE A NULL DISPLAY.

DISPLAY ' go to school' IF HE20A IS CODED '3' (GOING TO SCHOOL), EITHER ALONE OR IN COMBINATION WITH OTHER CODES OR IF HE20A IS CODED 'RF' (REFUSED) OR 'DK' (DON'T KNOW). IF HE20A IS NOT CODED '3', 'RF', OR 'DK', USE A NULL DISPLAY.

END_LP04

CYCLE ON NEXT PERSON IN THE RU-MEMBERS-ROSTER WHO MEETS THE CONDITIONS STATED IN THE LOOP DEFINITION

IF NO OTHER PERSONS MEET THE STATED CONDITIONS, END LOOP_04 AND CONTINUE WITH HE22

HE22

- Help Enabled ([HE22Help](#)) Comment Enabled Jump Back Enabled

| Variable Name | Label | Size |
|---------------|-------------------------------------|------|
| HOME.SOCLLIMT | ANYONE LIMITED IN SOCIAL ACTIVITIES | 2 |

{STR-DT} {END-DT}

Besides the limitations we just talked about, is anyone in the family limited in participating in social, recreational or family activities **because of an impairment or a physical or mental health problem?**

| | | |
|------------|----|--------|
| YES | 1 | |
| NO | 2 | {HE24} |
| ----- | | |
| Refused | RF | {HE24} |
| Don't Know | DK | {HE24} |

HELP AVAILABLE FOR DEFINITION OF LIMITED IN PARTICIPATING.

PROGRAMMER NOTES:
IF CODED '1' (YES) AND A SINGLE-PERSON RU, AUTOMATICALLY CODE PERSON AS 'LIMITED IN PARTICIPATION' AT HE23 BY CAPI

ROUTING INSTRUCTION:
IF CODED '1' (YES) AND A SINGLE-PERSON RU, GO TO HE24
IF CODED '1' (YES) AND A MULTI-PERSON RU, CONTINUE WITH HE23

HE23

Help Enabled Comment Enabled Jump Back Enabled

| Variable Name | Label | Size |
|---------------|--|------|
| PRND.WHOSOCLL | WHO IS LIMITED IN SOCIAL ACTIVITIES | 2 |
| PRND.SOLIFLAG | LTC SUPP FLAG: SOCIAL LIMITATIONS SECT | 2 |

{STR-DT} {END-DT}

LIMITED IN PARTICIPATION IN SOCIAL, RECREATIONAL OR FAMILY ACTIVITIES BECAUSE OF AN IMPAIRMENT OR A PHYSICAL OR MENTAL HEALTH PROBLEM.

Who is that?

PROBE: Is anyone else limited in participation in activities **because of an impairment or a physical or mental health problem?**

[First Name],[Middle Name],Last Name {HE24}
 [First Name],[Middle Name],Last Name
 [First Name],[Middle Name],Last Name

PROGRAMMER NOTES:
 FLAG ALL SELECTED PERSONS WHO ARE = OR > 5 YEARS OLD OR IN AGE CATEGORIES 3-9 FOR THE LTC SUPPLEMENT: SOCIAL LIMITATIONS SECTION.

| Roster Details | | |
|-----------------------|---------------|--|
| Title: | RU_Members_1 | |
| Col # | Header | Instructions |
| 1 | NAME | Display RU member's first, middle, and last names PERS.FULLNAME |

Roster Definition:
 This item displays RU-MEMBERS-ROSTER for selection.

Roster Behavior:
 1. Multiple select allowed.
 2. Add, delete, and edit disallowed

Roster Filter:
 Display all RU members excluding deceased RU members.

HE24

- Help Enabled
 Comment Enabled
 Jump Back Enabled

{STR-DT} {END-DT}

Do any of the adults in the family...

YES NO REF DK

HE24 01

- Help Enabled
 Comment Enabled
 Jump Back Enabled

| Variable Name | Label | Size |
|---------------|---|------|
| HOME.MEMORY | ANYONE EXPERIENCE CONFUSION/MEMORY LOSS | 2 |

Experience confusion or
 memory loss such that
 it interferes with
 daily activities?

YES NO REF DK

HE24 02

Help Enabled

Comment Enabled

Jump Back Enabled

| Variable Name | Label | Size |
|---------------|---------------------------------------|------|
| HOME.DECISION | ANYONE HAVE PROBLEMS MAKING DECISIONS | 2 |

Have problems making
decisions to the point
that it interferes
with daily activities?

YES

NO

REF

DK

HE24_03

Help Enabled Comment Enabled Jump Back Enabled

| Variable Name | Label | Size |
|---------------|---------------------------------------|------|
| HOME.SUPVSAFE | ANYONE REQUIRE SUPERVISION FOR SAFETY | 2 |

Require supervision
for their own safety? YES NO REF DK

```

PROGRAMMER NOTES:
IF HE24_01, HE24_02, OR HE24_03 IS CODED '1' (YES) AND A
SINGLE-PERSON RU, AUTOMATICALLY CODE AS 'EXPERIENCES
CONFUSION' AT HE25 BY CAPI

=====

ROUTING INSTRUCTION:
IF HE24_01, HE24_02, OR HE24_03 IS CODED '1' (YES) AND A
SINGLE-PERSON RU, GO TO BOX_10

IF HE24_01, HE24_02, AND HE24_03 ARE ALL CODED '2' (NO), 'RF'
(REFUSED), OR 'DK' (DON'T KNOW), GO TO BOX_10

OTHERWISE, CONTINUE WITH HE25
    
```

HE25

Help Enabled Comment Enabled Jump Back Enabled

| Variable Name | Label | Size |
|---------------|--|------|
| PRND.WHOMEMRY | WHO HAS PROB WITH MEMORY/DECISION/SAFETY | 2 |
| PRND.COLIFLAG | LTC SUPP FLAG: COGNITIVE LIMITATIONS SEC | 2 |

{STR-DT} {END-DT}

{EXPERIENCE CONFUSION OR MEMORY LOSS SUCH THAT IT INTERFERES WITH DAILY ACTIVITIES}{/}HAVE PROBLEMS MAKING DECISIONS TO THE POINT THAT IT INTERFERES WITH DAILY ACTIVITIES}{/}REQUIRE SUPERVISION FOR THEIR OWN SAFETY}

Who is that?

PROBE: Does anyone else {experience confusion or memory loss such that it interferes with daily activities} {{or }have problems making decisions to the point that it interferes with daily activities} {{or }require supervision for their own safety}?

[First Name],[Middle Name],Last Name]
 [First Name],[Middle Name],Last Name]
 [First Name],[Middle Name],Last Name]

{BOX_10}

```

DISPLAY INSTRUCTIONS:
DISPLAY 'EXPERIENCE CONFUSION OR MEMORY LOSS SUCH THAT IT
INTERFERES WITH DAILY ACTIVITIES' IF HE24_01 CODED '1' (YES).

DISPLAY '{/}HAVE PROBLEMS MAKING DECISIONS TO THE POINT THAT
IT INTERFERES WITH DAILY ACTIVITIES' IF HE24_02 CODED '1'
(YES). DISPLAY THE '/' ONLY IF HE24_01 IS ALSO CODED '1'
(YES).

DISPLAY '{/}REQUIRE SUPERVISION FOR THEIR OWN SAFETY' IF
HE24_03 IS CODED '1' (YES). DISPLAY THE '/' ONLY IF HE24_01
AND/OR HE24_02 ARE ALSO CODED '1' (YES).

DISPLAY 'experience confusion or memory loss such that it
interferes with daily activities' IF HE24_01 CODED '1' (YES).

DISPLAY '{or }have problems making decisions to the point that
it interferes with daily activities' IF HE24_02 CODED '1'
(YES). DISPLAY THE 'or ' ONLY IF HE24_01 IS ALSO CODED '1'
(YES).

DISPLAY '{or }require supervision for their own safety' IF
HE24_03 IS CODED '1' (YES). DISPLAY 'or ' ONLY IF HE24_01
AND/OR HE24_02 ARE ALSO CODED '1' (YES).
=====
PROGRAMMER NOTES:
FLAG ALL SELECTED PERSONS WHO ARE = OR > 18 YEARS OLD OR IN
AGE CATEGORIES 4-9 FOR THE LTC SUPPLEMENT: COGNITIVE
LIMITATIONS SECTION.
=====
    
```

| Roster Details | | |
|-----------------------|--------------|--|
| Title: | RU_Members_1 | |
| Col # | Header | Instructions |
| 1 | NAME | Display RU member's first, middle, and last names PERS.FULLNAME |

```

Roster Definition:
This item displays RU-MEMBERS-ROSTER for selection.
=====
Roster Behavior:
1. Multiple select allowed.
2. Add, delete, and edit disallowed
=====
Roster Filter:
Display all RU members excluding deceased RU members.
=====
    
```

HE26

Help Enabled Comment Enabled Jump Back Enabled

| Variable Name | Label | Size |
|---------------|---------------------------------------|------|
| HOME.EYEGLASS | DOES ANYONE WEAR EYEGLASSES/CONTACTS? | 2 |

{STR-DT} {END-DT}

Does anyone in the family wear eyeglasses or contact lenses?

| | | |
|------------|----|--------|
| YES | 1 | {HE27} |
| NO | 2 | {HE28} |
| ----- | | |
| Refused | RF | {HE28} |
| Don't Know | DK | {HE28} |

DISPLAY INSTRUCTIONS:
IF CODED '1' (YES) AND A SINGLE-PERSON RU, AUTOMATICALLY CODE
PERSON AT HE27 BY CAPI.

ROUTING INSTRUCTION:
IF CODED '1' (YES) AND A SINGLE-PERSON RU, GO TO HE28
IF CODED '1' (YES) AND A MULTI-PERSON RU, CONTINUE WITH HE27

HE27

Help Enabled Comment Enabled Jump Back Enabled

| Variable Name | Label | Size |
|---------------|-------------------------------|------|
| PRND.WHOGLASS | WHO WEARS EYEGLASSES/CONTACTS | 2 |

{STR-DT} {END-DT}

Who is that?

PROBE: Does anyone else wear eyeglasses or contact lenses?

[First Name],[Middle Name],Last Name {HE28}
 [First Name],[Middle Name],Last Name
 [First Name],[Middle Name],Last Name

| Roster Details | | |
|-----------------------|--------------|--|
| Title: | RU_Members_1 | |
| Col # | Header | Instructions |
| 1 | NAME | Display RU member's first, middle, and last names PERS.FULLNAME |

```

Roster Definition:
This item displays RU-MEMBERS-ROSTER for selection.
=====
Roster Behavior:
1. Multiple select allowed.
2. Add, delete, and edit disallowed
=====
Roster Filter:
Display all RU members excluding deceased RU members.
    
```

HE28

- Help Enabled Comment Enabled Jump Back Enabled

| Variable Name | Label | Size |
|---------------|-------------------------------------|------|
| HOME.DIFFSEE | DOES ANYONE HAVE DIFFICULTY SEEING? | 2 |

{STR-DT} {END-DT}

Does anyone in the family have any difficulty seeing {[with glasses or contacts, if they use them]}?

| | | |
|------------|----|--------|
| YES | 1 | |
| NO | 2 | {HE33} |
| Refused | RF | {HE33} |
| Don't Know | DK | {HE33} |

DISPLAY INSTRUCTIONS:
 DISPLAY ' [with glasses or contacts, if they use them] ' IF
 HE26 IS CODED '1' (YES). OTHERWISE, USE A NULL DISPLAY.

PROGRAMMER NOTES:
 IF CODED '1' (YES) AND A SINGLE-PERSON RU, AUTOMATICALLY CODE
 PERSON AS 'VISION IMPAIRED' AT HE29 BY CAPI.

ROUTING INSTRUCTION:
 IF CODED '1' (YES) AND A SINGLE-PERSON RU, GO TO LOOP_05
 IF CODED '1' (YES) AND A MULTI-PERSON RU, CONTINUE WITH HE29

HE29

Help Enabled Comment Enabled Jump Back Enabled

| Variable Name | Label | Size |
|---------------|----------------------------|------|
| PRND.WHOSEE | WHO HAS DIFFICULTY SEEING? | 2 |

{STR-DT} {END-DT}

DIFFICULTY SEEING {WITH GLASSES OR CONTACTS, IF THEY USE THEM}.

Who is that?

PROBE: Does anyone else have any difficulty seeing {[with glasses or contacts, if they use them]}?

[First Name],[Middle Name],Last Name {LOOP_05}
 [First Name],[Middle Name],Last Name
 [First Name],[Middle Name],Last Name

DISPLAY INSTRUCTIONS:
 DISPLAY ' [WITH GLASSES OR CONTACTS, IF THEY USE THEM]' IF
 HE26 IS CODED '1' (YES). OTHERWISE, USE A NULL DISPLAY.
 Display ' [with glasses or contacts, if they use them] ' IF
 HE26 IS CODED '1' (YES). OTHERWISE, USE A NULL DISPLAY.

Roster Details

Title: RU_Members_1

| Col # | Header | Instructions |
|-------|--------|--|
| 1 | NAME | Display RU member's first, middle, and last names PERS.FULLNAME |

Roster Definition:
 This item displays RU-MEMBERS-ROSTER for selection.

 Roster Behavior:
 1. Multiple select allowed.
 2. Add, delete, and edit disallowed

 Roster Filter:

Display all RU members excluding deceased RU members.

LOOP 05

FOR EACH ELEMENT IN THE RU-MEMBERS-ROSTER, ASK HE30 - END_LP05

LOOP DEFINITION: LOOP_05 COLLECTS VISION IMPAIRMENT DETAILS FOR PERSONS HAVING DIFFICULTY SEEING. THIS LOOP CYCLES ON RU MEMBERS WHO MEET THE FOLLOWING CONDITIONS:

- PERSON IS NOT DECEASED
- PERSON HAS DIFFICULTY SEEING (I.E., PERSON SELECTED AT HE29)

HE30

Help Enabled ([HE30Help](#)) Comment Enabled Jump Back Enabled

| Variable Name | Label | Size |
|---------------|--|------|
| PRND.ISBLIND | CAN PERSON NOT SEE ANYTHING-ARE THEY BLI | 2 |
| PRND.VISNFLAG | LTC SUPP FLAG: VISION SECTION | 2 |

{PERSON'S FIRST MIDDLE AND LAST NAME} {STR-DT} {END-DT}

Can (PERSON) not see anything at all, that is, (are/is) (PERSON) blind?

| | | |
|------------|----|------------|
| YES | 1 | {END_LP05} |
| NO | 2 | {HE31} |
| ----- | | |
| Refused | RF | {HE31} |
| Don't Know | DK | {HE31} |

HELP AVAILABLE FOR DEFINITION OF BLIND.

PROGRAMMER NOTES:
 IF CODED '1' (YES), FLAG PERSON FOR THE LTC SUPPLEMENT:
 VISION SECTION.

HE31

Help Enabled Comment Enabled Jump Back Enabled

| Variable Name | Label | Size |
|---------------|------------------------------------|------|
| PRND.CANREAD | CAN PERSON SEE WELL ENOUGH TO READ | 2 |

{PERSON'S FIRST MIDDLE AND LAST NAME} {STR-DT} {END-DT}

{With glasses or contacts, can/Can} (PERSON) see well enough to read ordinary newspaper print, even if (PERSON) cannot read?

| | | |
|------------|----|------------|
| YES | 1 | {END_LP05} |
| NO | 2 | {HE32} |
| ----- | | |
| Refused | RF | {HE32} |
| Don't Know | DK | {HE32} |

DISPLAY INSTRUCTIONS:
 DISPLAY 'With glasses or contacts, can' IF PERSON BEING ASKED ABOUT WAS SELECTED AT HE27, OTHERWISE (PERSON NOT SELECTED AT HE27), DISPLAY 'Can'.

HE32

Help Enabled Comment Enabled Jump Back Enabled

| Variable Name | Label | Size |
|---------------|--|------|
| PRND.RECOGNIZ | CAN PERSON SEE TO RECOGNIZE FAMILIAR PEO | 2 |
| PRND.VISNFLAG | LTC SUPP FLAG: VISION SECTION | 2 |

{PERSON'S FIRST MIDDLE AND LAST NAME} {STR-DT} {END-DT}

{With glasses or contacts, can/Can} (PERSON) see well enough to recognize familiar people if they are two or three feet away?

| | | |
|------------|----|------------|
| YES | 1 | {END_LP05} |
| NO | 2 | {END_LP05} |
| ----- | | |
| Refused | RF | {END_LP05} |
| Don't Know | DK | {END_LP05} |

DISPLAY INSTRUCTIONS:
 DISPLAY 'with glasses or contacts, can' IF PERSON BEING ASKED ABOUT WAS SELECTED AT HE27, OTHERWISE (PERSON NOT SELECTED AT HE27), DISPLAY 'Can'.

PROGRAMMER NOTES:
 IF CODED '2' (NO), FLAG PERSON FOR THE LTC SUPPLEMENT: VISION SECTION.

END_LP05

CYCLE ON NEXT PERSON IN THE RU-MEMBERS-ROSTER WHO MEETS THE CONDITIONS STATED IN THE LOOP DEFINITION

IF NO OTHER PERSONS MEET THE STATED CONDITIONS, END LOOP_05 AND CONTINUE WITH HE33

HE33

Help Enabled Comment Enabled Jump Back Enabled

| Variable Name | Label | Size |
|---------------|----------------------------------|------|
| HOME.HEARAIDE | DOES ANYONE WEAR A HEARING AIDE? | 2 |

{STR-DT} {END-DT}

Does anyone in the family wear a hearing aid?

| | | |
|------------|----|--------|
| YES | 1 | |
| NO | 2 | {HE35} |
| ----- | | |
| Refused | RF | {HE35} |
| Don't Know | DK | {HE35} |

PROGRAMMER NOTES:
IF CODED '1' (YES) AND A SINGLE-PERSON RU, AUTOMATICALLY CODE PERSON AT HE34 BY CAPI.

ROUTING INSTRUCTION:
IF CODED '1' (YES) AND A SINGLE-PERSON RU, GO TO HE35
IF CODED '1' (YES) AND A MULTI-PERSON RU, CONTINUE WITH HE34

HE34

Help Enabled Comment Enabled Jump Back Enabled

| Variable Name | Label | Size |
|---------------|--------------------------------|------|
| PRND.WHOHRAID | WHO WEARS A HEARING AIDE | 2 |
| PRND.HEARFLAG | LTC SUPP FLAG: HEARING SECTION | 2 |

{STR-DT} {END-DT}

Who is that?

PROBE: Does anyone else wear a hearing aid?

[First Name],[Middle Name],Last Name {HE35}
 [First Name],[Middle Name],Last Name
 [First Name],[Middle Name],Last Name

PROGRAMMER NOTES:
 FLAG ALL SELECTED PERSONS FOR THE LTC SUPPLEMENT: HEARING SECTION.

| Roster Details | | |
|-----------------------|--------------|--|
| Title: | RU_Members_1 | |
| Col # | Header | Instructions |
| 1 | NAME | Display RU member's first, middle, and last names PERS.FULLNAME |

Roster Definition:
 This item displays RU-MEMBERS-ROSTER for selection.

Roster Behavior:
 1. Multiple select allowed.
 2. Add, delete, and edit disallowed

Roster Filter:
 Display all RU members excluding deceased RU members.

HE35

- Help Enabled Comment Enabled Jump Back Enabled

| Variable Name | Label | Size |
|---------------|--------------------------------------|------|
| HOME.DIFFHEAR | DOES ANYONE HAVE DIFFICULTY HEARING? | 2 |

{STR-DT} {END-DT}

Does anyone in the family have any difficulty hearing {[with a hearing aid, if they use one]}?

| | | |
|------------|----|----------|
| YES | 1 | |
| NO | 2 | {BOX_10} |
| Refused | RF | {BOX_10} |
| Don't Know | DK | {BOX_10} |

DISPLAY INSTRUCTIONS:
 DISPLAY '[with a hearing aid, if they use one]' IF HE33 IS
 CODED '1' (YES). OTHERWISE, USE A NULL DISPLAY.

PROGRAMMER NOTES:
 IF CODED '1' (YES) AND A SINGLE-PERSON RU, AUTOMATICALLY CODE
 PERSON AS 'HEARING IMPAIRED' AT HE36 BY CAPI.

ROUTING INSTRUCTION:
 IF CODED '1' (YES) AND A SINGLE-PERSON RU, GO TO LOOP_06
 IF CODED '1' (YES) AND A MULTI-PERSON RU, CONTINUE WITH HE36

HE36

Help Enabled Comment Enabled Jump Back Enabled

| Variable Name | Label | Size |
|---------------|----------------------------|------|
| PRND.WHOHEAR | WHO HAS DIFFICULTY HEARING | 2 |

{STR-DT} {END-DT}

DIFFICULTY HEARING {WITH A HEARING AID, IF THEY USE ONE}.

Who is that?

PROBE: Does anyone else have any difficulty hearing {[with a hearing aid, if they use one]}?

[First Name],[Middle Name],Last Name {LOOP_06}
 [First Name],[Middle Name],Last Name
 [First Name],[Middle Name],Last Name

DISPLAY INSTRUCTIONS:
 DISPLAY ' WITH A HEARING AID, IF THEY USE ONE' IF HE33 IS
 CODED '1' (YES). OTHERWISE USE A NULL DISPLAY.

 DISPLAY ' [with a hearing aid, if they use one] ' IF HE33 IS
 CODED '1' (YES). OTHERWISE, USE A NULL DISPLAY.

Roster Details

Title: RU_Members_1

| Col # | Header | Instructions |
|-------|--------|--|
| 1 | NAME | Display RU member's first, middle, and last names PERS.FULLNAME |

Roster Definition:
 This item displays RU-MEMBERS-ROSTER for selection.
 =====
 Roster Behavior:
 1. Multiple select allowed.
 2. Add, delete, and edit disallowed
 =====
 Roster Filter:

Display all RU members excluding deceased RU members.

LOOP 06

FOR EACH ELEMENT IN THE RU-MEMBERS-ROSTER, ASK HE37 - END_LP06

LOOP DEFINITION: LOOP_06 COLLECTS HEARING IMPAIRMENT DETAILS FOR PERSONS HAVING DIFFICULTY HEARING. THIS LOOP CYCLES ON RU MEMBERS WHO MEET THE FOLLOWING CONDITIONS:

- PERSON IS NOT DECEASED
- PERSON HAS DIFFICULTY HEARING (I.E., PERSON SELECTED AT HE36)

HE37

- Help Enabled ([HE37Help](#)) Comment Enabled Jump Back Enabled

| Variable Name | Label | Size |
|---------------|--------------------------------------|------|
| PRND.ISDEAF | CAN PERSON NOT HEAR - ARE THEY DEAF? | 2 |
| PRND.HEARFLAG | LTC SUPP FLAG: HEARING SECTION | 2 |

{PERSON'S FIRST MIDDLE AND LAST NAME} {STR-DT} {END-DT}

Can (PERSON) not hear any speech at all, that is, (are/is) (PERSON) deaf?

| | | |
|------------|----|------------|
| YES | 1 | {END_LP06} |
| NO | 2 | {HE38} |
| ----- | | |
| Refused | RF | {HE38} |
| Don't Know | DK | {HE38} |

HELP AVAILABLE FOR DEFINITION OF DEAF.

PROGRAMMER NOTES:
 IF CODED '1' (YES), FLAG PERSON FOR THE LTC SUPPLEMENT:
 HEARING SECTION

HE38

Help Enabled Comment Enabled Jump Back Enabled

| Variable Name | Label | Size |
|---------------|--|------|
| PRND.HEARMOST | CAN PERSON HEAR MOST THINGS PEOPLE SAY | 2 |

{PERSON'S FIRST MIDDLE AND LAST NAME} {STR-DT} {END-DT}

{With a hearing aid, can/Can} (PERSON) hear **most** of the things people say?

| | | |
|------------|----|------------|
| YES | 1 | {END_LP06} |
| NO | 2 | {HE39} |
| ----- | | |
| Refused | RF | {HE39} |
| Don't Know | DK | {HE39} |

DISPLAY INSTRUCTIONS:
 DISPLAY 'With a hearing aid, can' IF PERSON BEING ASKED ABOUT
 WAS SELECTED AT HE34. OTHERWISE (PERSON NOT SELECTED AT
 HE34), DISPLAY 'Can'.

HE39

Help Enabled Comment Enabled Jump Back Enabled

| Variable Name | Label | Size |
|---------------|--|------|
| PRND.HEARSOME | CAN PERSON HEAR SOME THINGS PEOPLE SAY | 2 |
| PRND.HEARFLAG | LTC SUPP FLAG: HEARING SECTION | 2 |

{PERSON'S FIRST MIDDLE AND LAST NAME} {STR-DT} {END-DT}

{With a hearing aid, can/Can} (PERSON) hear **some** of the things people say?

| | | |
|------------|----|------------|
| YES | 1 | {END_LP06} |
| NO | 2 | {END_LP06} |
| Refused | RF | {END_LP06} |
| Don't Know | DK | {END_LP06} |

DISPLAY INSTRUCTIONS:
 DISPLAY 'With a hearing aid, can' IF PERSON BEING ASKED ABOUT
 WAS SELECTED AT HE34. OTHERWISE (PERSON NOT SELECTED AT
 HE34), DISPLAY 'Can'.

PROGRAMMER NOTES:
 IF CODED '2' (NO), FLAG PERSON FOR THE LTC SUPPLEMENT:
 HEARING SECTION.

END_LP06

CYCLE ON NEXT PERSON IN THE RU-MEMBERS-ROSTER WHO MEETS THE CONDITIONS
 STATED IN THE LOOP DEFINITION

IF NO OTHER PERSONS MEET THE STATED CONDITIONS, END LOOP_06 AND CONTINUE
 WITH BOX_10

BOX_10

GO TO NEXT QUESTIONNAIRE SECTION