Health Status (HE) Section

B0X_00 ====== CONTEXT HEADER DISPLAY INSTRUCTIONS: DISPLAY {HOME.RUSTRTMM, HOME.RUSTRTDD, HOME.RUSTRTYY, HOME.RUENDMM, HOME.RUENDDD, HOME.RUENDYY/PERS.FULLNAME, PRND.BEGREFMM, PRND.BEGREFDD, PRND.BEGREFYY, PRND.ENDREFMM, PRND.ENDREFDD, PRND.ENDREFYY} _____ B0X_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 = 1-43 = 5-154 = 16-235 = 24 - 34

6 = 35-44 7 = 45-54 8 = 55-64

9 = 65 YEARS OLD OR OLDER

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{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}
REF	7	{HE04}
DK	8	{HE04}

HELP AVAILABLE FOR DEFINITION OF IMPAIRMENT AND HELP/SUPERVISION.

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 A NULL DISPLAY.

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

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{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?

- [1. First Name, [Middle Name], Last Name-65]
 [2. First Name, [Middle Name], Last Name-65]
- [3. First Name, [Middle Name], Last Name-65]

| FLAG ALL SELECTED PERSONS WHO ARE = OR > 13 YEARS |
| OLD OR IN AGE CATEGORIES 4-9 FOR THE LTC |
| SUPPLEMENT: IADL SECTION. |
| CONTINUE WITH LOOP_01 |
| ROSTER DETAILS: |
| TITLE: RU_MEMBERS_1

INSTRUCTIONS: DISPLAY RU MEMBER'S FIRST, MIDDLE,

ROSTER DEFINITION:

| COL # 1 HEADER: NAME

| AND LAST NAMES (PERS.FULLNAME)

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 RU MEMBER BEING LOOPED ON IS < 13 YEARS OF AGE OR IN CATEGORIES 1-3, CONTINUE WITH HE03
	OTHERWISE, GO TO HE03A

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HE03A

{PERSON'S FIRST NAME 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	ò								 					 			1	{END_LP01}
NO									 					 			2	{END_LP01}
REF	:								 					 		-	7	{END_LP01}
DK									 					 		_	8	{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 ====	
	{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 {B0X_02} REF -7 {B0X_02} DK -8 {B0X_02}
	HELP AVAILABLE FOR DEFINITION OF HELP/SUPERVISION.
	IF CODED '1' (YES) AND A SINGLE-PERSON RU, AUTOMATICALLY CODE PERSON AS 'RECEIVES HELP' AT HE05 BY CAPI.
	IF CODED '1' (YES) AND A SINGLE-PERSON RU, GO TO LOOP_02
	IF CODED '1' (YES) AND MULTI-PERSON RU, CONTINUE WITH HE05

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{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?

- [1. First Name, [Middle Name], Last Name-65]
- [2. First Name, [Middle Name], Last Name-65]
- [3. First Name, [Middle Name], Last Name-65]

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

CONTINUE WITH LOOP_02 |

ROSTER DETAILS: |
ITTLE: RU_MEMBERS_1 |
| COL # 1 HEADER: NAME |
INSTRUCTIONS: 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.

6-7

	ROSTER FILTER: DISPLAY ALL RU MEMBERS EXCLUDING DECEASED RU MEMBERS.
L00P_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)
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

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HE06A

{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} REF -7 {END_LP02} DK -8 {END_LP02} HELP AVAILABLE FOR DEFINITION OF HELP/SUPERVISION AND IMPAIRMENT. ______ | IF CODED '1' (YES), FLAG PERSON FOR THE LTC | SUPPLEMENT: ADL SECTION. {PERSON'S FIRST NAME 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}

 REF
 -7 {END_LP02}

 DK
 -8 {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	
B0X_02 =====		
	IF ROUND 1 OR ROUND 3 OR ROUND 5, CONTINUE WITH HE07	
	IF ROUND 2 OR ROUND 4, GO TO HE26	I
HE07 ====		
	{STR-DT} {END-DT}	
	Does anyone in the family use any aids such as a walker, bars in the bathtub or any other special equipment for personal care or everyday activities?	grab
	YES	
	HELP AVAILABLE FOR EXAMPLES OF AIDS/SPECIAL EQUIPMENT	

	IF CODED '1' (YES) AND A SINGLE-PERSON RU, AUTOMATICALLY CODE PERSON AS 'USES AIDS' AT HE08 BY CAPI.	
	IF CODED '1' (YES) AND A SINGLE-PERSON RU, GO TO HE09	
•	IF CODED '1' (YES) AND A MULTI-PERSON RU, CONTINUE WITH HE08	
{STR-D {END-D		
	NY AIDS SUCH AS A WALKER, GRAB BARS IN THE BATHTUB O SPECIAL EQUIPMENT FOR PERSONAL CARE OR EVERYDAY ITIES.	OR ANY
Who is	s that?	
	Does anyone else use any aids for personal care of day activities?	or
	<pre>[1. First Name, [Middle Name], Last Name-65] [2. First Name, [Middle Name], Last Name-65] [3. First Name, [Middle Name], Last Name-65]</pre>	
 	FLAG ALL SELECTED PERSONS FOR THE LTC SUPPLEMENT: AIDS/SPECIAL EQUIPMENT SECTION.	
 I	CONTINUE WITH HE09	

HE08

HE09 ====

ROSTER DETAILS: TITLE: RU_MEMBERS_1
COL # 1 HEADER: NAME INSTRUCTIONS: 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.
{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
IF CODED '1' (YES) AND A SINGLE-PERSON RU, AUTOMATICALLY CODE PERSON AS 'HAVING DIFFICULTY' AT HE10 BY CAPI.

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| IF CODED '1' (YES) AND A SINGLE-PERSON RU, GO TO |
   ______
   IF CODED '1' (YES) AND A MULTI-PERSON RU, CONTINUE
  | WITH HE10
   _____
{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?
     [1. First Name, [Middle Name], Last Name-65]
     [2. First Name, [Middle Name], Last Name-65]
     [3. First Name, [Middle Name], Last Name-65]
   FLAG ALL SELECTED PERSONS WHO ARE = OR > 13 YEARS |
  OLD OR IN AGE CATEGORIES 4-9 FOR THE LTC
  | SUPPLEMENT: FUNCTIONAL LIMITATIONS SECTION.
   | CONTINUE WITH LOOP_03
   ______
    ROSTER DETAILS:
   TITLE: RU_MEMBERS_1
  | COL # 1 HEADER: NAME
  | INSTRUCTIONS: DISPLAY RU MEMBER'S FIRST, MIDDLE,
  | AND LAST NAMES (PERS.FULLNAME)
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HE10

	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.
L00P_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

B0X_03 =====

OMITTED.

HE11

{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}
REF	-7	{HE12}
DK	-8	{HE12}

[Code One]

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

{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}
REF7	{HE13}
DK8	{HE13}

[Code One]

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

HE13

{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}
REF	7 {HE14}
DK	3 {HE14}

[Code One]

| IF CODED '4' (COMPLETELY UNABLE TO DO IT), | AUTOMATICALLY CODE HE14 AS '4' (COMPLETELY UNABLE | TO DO IT) BY CAPI. |

HE14

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}
REF	- 7	{HE15}
DK	-8	{HE15}

[Code One]

HE15 ====

 $\{ \texttt{PERSON'S FIRST MIDDLE AND LAST NAME} \} \ \ \{ \texttt{STR-DT} \}$

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}
REF7	' {HE16}
DK	HE16}

[Code One]

HE16

{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}
REF	7 {HE17}
DK	3 {HE17}

[Code One]

HE17 ====

{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	\[\text{HF18} \]
SOME DIFFICULTY	2	{HE18}
A LOT OF DIFFICULTY	3	{HE18}
COMPLETELY UNABLE TO DO IT	4	{HE18}
REF	- 7	{HE18}
DK	- 8	{HE18}

[Code One]

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{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}
REF1	7 {HE18A}
DK	3 {HE18A}

[Code One]

HE18A =====

{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}
REF																- 7	{END_LP03}
DK																- 8	{END LP03}

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_	_	_	_	_	_	_	_

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	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 ====	
	{STR-DT} {END-DT}
	Is anyone in the family limited in any way in the ability twork at a job, do housework, or go to school because of an impairment or a physical or mental health problem?
	YES
	HELP AVAILABLE FOR DEFINITION OF LIMITED ABILITY AND IMPAIRMENT.
	IF CODED '1' (YES) AND A SINGLE-PERSON RU, AUTOMATICALLY CODE PERSON AS 'LIMITED ABILITY' AT HE20 BY CAPI.
	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 ====

> {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?

- [1. First Name, [Middle Name], Last Name-65] [2. First Name, [Middle Name], Last Name-65]
- [3. First Name, [Middle Name], Last Name-65]

FLAG ALL SELECTED PERSONS WHO ARE = OR > 5 YEARS | OLD OR IN AGE CATEGORIES 3-9 FOR THE LTC | SUPPLEMENT: WORK-HOUSEWORK-SCHOOL LIMITATIONS CONTINUE WITH LOOP_04 ROSTER DETAILS: | TITLE: RU_MEMBERS_1 | COL # 1 HEADER: NAME | INSTRUCTIONS: 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.

L00P_04

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

| LOOP DEFINITION: LOOP_04 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

B0X_04

OMITTED.

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{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}
REF	-7	{HE21}
DK	-8	{HE21}

[Code All That Apply]

HE21

 $\{ \texttt{PERSON'S FIRST MIDDLE AND LAST NAME} \} \quad \{ \texttt{STR-DT} \}$

{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}
REF	:		 			 			 								- 7	{END_LP04}
DK			 			 			 								-8	{END_LP04}

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 '-7' | (REFUSED) OR '-8' (DON'T KNOW). IF HE20A IS NOT | CODED '1', '-7', OR '-8', USE A NULL DISPLAY.

DISPLAY ',' IF HE20A IS CODED '1', '2', AND '3' OR IF HE20A IS CODED EITHER '-7' OR '-8'. 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 '-7' (REFUSED) OR '-8' (DON'T KNOW). IF HE20A IS NOT CODED '2', '-7', OR '-8', 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 '-7' OR '-8' 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 '-7' (REFUSED) OR '-8' (DON'T KNOW). IF HE20A IS NOT CODED '3', '-7', OR '-8', 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

MEPS FAMES	P12R5/P13R3/P14R1	Health	Status	(HE)	Section
December 8.	2008			` '	

HE22 ====	
	{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
	IF CODED '1' (YES) AND A SINGLE-PERSON RU, AUTOMATICALLY CODE PERSON AS 'LIMITED IN PARTICIPATION' AT HE23 BY CAPI.
	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

{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?

- [1. First Name, [Middle Name], Last Name-65]
 [2. First Name, [Middle Name], Last Name-65]
 [3. First Name, [Middle Name], Last Name-65]
- | FLAG ALL SELECTED PERSONS WHO ARE = OR > 5 YEARS |
 | OLD OR IN AGE CATEGORIES 3-9 FOR THE LTC |
 | SUPPLEMENT: SOCIAL LIMITATIONS SECTION. |

CONTINUE WITH HE24

| ROSTER DETAILS: | TITLE: RU_MEMBERS_1

| COL # 1 HEADER: NAME

| INSTRUCTIONS: DISPLAY RU MEMBER'S FIRST, MIDDLE,

| AND LAST NAMES (PERS.FULLNAME)

| ROSTER DEFINITION:

THIS ITEM DISPLAYS RU-MEMBERS-ROSTER FOR

| SELECTION.

6-27

	ROSTER BEHAVIOR: 1. MULTIPLE SELECT ALLOWED.	
	 2. ADD, DELETE, AND EDIT DISALLOWED.	
	ROSTER FILTER: DISPLAY ALL RU MEMBERS EXCLUDING DECEASED RU MEMBERS.	
HE24 ====		
	{STR-DT} {END-DT}	
	Do any of the adults in the family	
	YES NO	
HE24_01 ======		
	Experience confusion or memory loss such that it interferes with daily	
	activities? 1 2	
	REFUSED (-7) AND DON'T KNOW (-8) ALLOWED.	
HE24_02 ======		
	Have problems making decisions to the point that it interferes with	
	daily activities? 1 2	
	REFUSED (-7) AND DON'T KNOW (-8) ALLOWED.	

HE24_03

Require supervision for their own safety? 1 2
REFUSED (-7) AND DON'T KNOW (-8) ALLOWED.
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.
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), '-7' (REFUSED), OR '-8' (DON'T KNOW), GO TO BOX_10
OTHERWISE, CONTINUE WITH HE25

HE25

{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}?

- [1. First Name, [Middle Name], Last Name-65]
- [2. First Name, [Middle Name], Last Name-65]
- [3. First Name, [Middle Name], Last Name-65]

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).

FLAG ALL SELECTED PERSONS WHO ARE = OR > 18 YEARS OLD OR IN AGE CATEGORIES 4-9 FOR THE LTC SUPPLEMENT: COGNITIVE LIMITATIONS SECTION.
GO TO BOX_10
ROSTER DETAILS: TITLE: RU_MEMBERS_1
COL # 1 HEADER: NAME INSTRUCTIONS: 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.
OMITTED.
OMITTED.
OMITTED.

B0X_05

B0X_05A ======

HE25A

HE25B	
====	OMITTED.
HE25C	
	OMITTED.
HE26 ====	
	{STR-DT} {END-DT}
	Does anyone in the family wear eyeglasses or contact lenses?
	YES
	IF CODED '1' (YES) AND A SINGLE-PERSON RU, AUTOMATICALLY CODE PERSON AT HE27 BY CAPI.
	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 ====

{STR-DT} {END-DT}

Who	is	th	at?						
PR0E	3E:	Do	oes any	one else	wear	eyeglas	sses or	contact	lenses?
		[2.	First	Name,[Mi Name,[Mi Name,[Mi	ddle 1	Name],La	st Nam	e-65]	
	 	CON	TINUE V	/ITH HE28	3 				
	 		TER DE	TAILS: _MEMBERS_	_1				
	 	INS	TRUCTIO	EADER: NA DNS: DISF JAMES (PE	LAY R		R'S FIR	ST, MIDDI	 LE,
	 	THIS		INITION:		EMBERS-F	ROSTER	F0R	
	 			HAVIOR: LE SELECT	- ALLO	 √ED.			
	 	2. /	ADD, DE	ELETE, AN	ID EDI	Γ DISALL	OWED.		
	 	DIS	TER FII PLAY AI BERS.	 TER: .L RU MEM	IBERS I	EXCLUDIN	IG DECE	ASED RU	

```
HE28
====
          {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}
              REF ..... -7 {HE33}
              DK ..... -8 {HE33}
              DISPLAY ' [with glasses or contacts, if they use |
              them]' IF HE26 IS CODED '1' (YES). OTHERWISE,
            | USE A NULL DISPLAY.
             IF CODED '1' (YES) AND A SINGLE-PERSON RU,
             AUTOMATICALLY CODE PERSON AS 'VISION IMPAIRED' AT |
            | HE29 BY CAPI.
             -----
            | IF CODED '1' (YES) AND A SINGLE-PERSON RU, GO TO |
            | L00P_05
             IF CODED '1' (YES) AND A MULTI-PERSON RU,
             CONTINUE WITH HE29
HE29
====
          {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]}?
               [1. First Name, [Middle Name], Last Name-65]
               [2. First Name, [Middle Name], Last Name-65]
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| Display '[with glasses or contacts, if they use | them]' IF HE26 IS CODED '1' (YES). OTHERWISE, USE| A NULL DISPLAY. | | CONTINUE WITH LOOP_05 | | ROSTER DETAILS: | TITLE: RU_MEMBERS_1 | | COL # 1 HEADER: NAME | INSTRUCTIONS: DISPLAY RU MEMBER'S FIRST, MIDDLE, | AND LAST NAMES (PERS.FULLNAME) | | ROSTER DEFINITION: | THIS ITEM DISPLAYS RU-MEMBERS-ROSTER FOR | SELECTION. | | ROSTER BEHAVIOR: | ROSTER BEHAVIOR: | 1. MULTIPLE SELECT ALLOWED. |

2. ADD, DELETE, AND EDIT DISALLOWED.

[3. First Name, [Middle Name], Last Name-65]

	ROSTER FILTER: DISPLAY ALL RU MEMBERS EXCLUDING DECEASED RU
	MEMBERS.
L00P_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 ====	
	{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} REF -7 {HE31} DK -8 {HE31}
	HELP AVAILABLE FOR DEFINITION OF BLIND.
	IF CODED '1' (YES), FLAG PERSON FOR THE LTC SUPPLEMENT: VISION SECTION.

====	
	{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
	DISPLAY 'With glasses or contacts, can' IF PERSON BEING ASKED ABOUT WAS SELECTED AT HE27, OTHERWISE (PERSON NOT SELECTED AT HE27), DISPLAY 'Can'.
HE32 ====	
	{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} REF -7 {END_LP05} DK -8 {END_LP05}
	DISPLAY 'With glasses or contacts, can' IF PERSON BEING ASKED ABOUT WAS SELECTED AT HE27, OTHERWISE (PERSON NOT SELECTED AT HE27), DISPLAY 'Can'.
	IF CODED '2' (NO), FLAG PERSON FOR THE LTC SUPPLEMENT: VISION SECTION.

HE31

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 ====	
	{STR-DT} {END-DT}
	Does anyone in the family wear a hearing aid?
	YES
	IF CODED '1' (YES) AND A SINGLE-PERSON RU, AUTOMATICALLY CODE PERSON AT HE34 BY CAPI.
	IF CODED '1' (YES) AND A SINGLE-PERSON RU, GO TO HE35
	IF CODED '1' (YES) AND A MULTI-PERSON RU,

HE34

{STR-DT} {END-DT} Who is that? PROBE: Does anyone else wear a hearing aid? [1. First Name, [Middle Name], Last Name-65] [2. First Name, [Middle Name], Last Name-65] [3. First Name, [Middle Name], Last Name-65] FLAG ALL SELECTED PERSONS FOR THE LTC SUPPLEMENT: | | HEARING SECTION. | CONTINUE WITH HE35 ROSTER DETAILS: | TITLE: RU_MEMBERS_1 | COL # 1 HEADER: NAME INSTRUCTIONS: DISPLAY RU MEMBER'S FIRST, MIDDLE, | AND LAST NAMES (PERS.FULLNAME) ROSTER DEFINITION: THIS ITEM DISPLAYS RU-MEMBERS-ROSTER FOR I SELECTION. ROSTER BEHAVIOR: 1. MULTIPLE SELECT ALLOWED. 2. ADD, DELETE, AND EDIT DISALLOWED. ROSTER FILTER: DISPLAY ALL RU MEMBERS EXCLUDING DECEASED RU

MEMBERS.

HE35 ====

-	R-DT} D-DT}
	s anyone in the family have any difficulty hearing{[withing aid, if they use one]}?
	YES
	DISPLAY ' [with a hearing aid, if they use one]' IF HE33 IS CODED '1' (YES). OTHERWISE, USE A NULL DISPLAY.
	IF CODED '1' (YES) AND A SINGLE-PERSON RU, AUTOMATICALLY CODE PERSON AS 'HEARING IMPAIRED' AT HE36 BY CAPI.
	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

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Н	E	3	6
_	_	_	_
_	_	_	_

```
{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]}?
     [1. First Name, [Middle Name], Last Name-65]
     [2. First Name, [Middle Name], Last Name-65]
     [3. First Name, [Middle Name], Last Name-65]
   ______
  | DISPLAY '[WITH A HEARING AID, IF THEY USE ONE]' IF|
  | HE33 IS CODED '1' (YES). OTHERWISE USE A NULL |
  l DISPLAY.
    -----
   | CONTINUE WITH LOOP_06
  | ROSTER DETAILS:
  | TITLE: RU_MEMBERS_1
  | COL # 1 HEADER: NAME
  | INSTRUCTIONS: DISPLAY RU MEMBER'S FIRST, MIDDLE,
  | AND LAST NAMES (PERS.FULLNAME)
   ROSTER DEFINITION:
    THIS ITEM DISPLAYS RU-MEMBERS-ROSTER FOR
   | ROSTER BEHAVIOR:
   1. MULTIPLE SELECT ALLOWED.
  | 2. ADD, DELETE, AND EDIT DISALLOWED.
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	ROSTER FILTER: DISPLAY ALL RU MEMBERS EXCLUDING DECEASED RU MEMBERS.
L00P_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 ====	
	{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
	IF CODED '1' (YES), FLAG PERSON FOR THE LTC SUPPLEMENT: HEARING SECTION.

====	
	{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
	DISPLAY 'With a hearing aid, can' IF PERSON BEING ASKED ABOUT WAS SELECTED AT HE34. OTHERWISE (PERSON NOT SELECTED AT HE34), DISPLAY 'Can'.
HE39 ====	{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} REF -7 {END_LP06} DK -8 {END_LP06}
	DISPLAY 'With a hearing aid, can' IF PERSON BEING ASKED ABOUT WAS SELECTED AT HE34. OTHERWISE (PERSON NOT SELECTED AT HE34), DISPLAY 'Can'.
	IF CODED '2' (NO), FLAG PERSON FOR THE LTC SUPPLEMENT: HEARING SECTION.

HE38

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 GO TO BOX_10
BOX_06A ======	OMITTED.
BOX_06 =====	OMITTED.
HE40 ====	OMITTED.
HE41 ====	OMITTED.
L00P_07 =====	OMITTED.
HE42 ====	OMITTED.
HE43 ====	OMITTED.
HE44 ====	OMITTED.
HE440V =====	OMITTED.
END_LP07	

OMITTED.

BOX_07	
	OMITTED.
L00P_08 ======	OMITTED.
HE45 ====	
115.40	OMITTED.
HE46 ====	OMITTED.
HE47 ====	OMITTED.
HE48 ====	
	OMITTED.
HE49 ====	OMITTED.
HE49A =====	OMITTED.
END_LP08	
	OMITTED.
BOX_08 =====	OMITTED.
L00P_09 =====	OMITTED.
HE50 ====	OMITTED.
HE51 ====	
	OMITTED.
HF52	

====

OMITTED.

HE520V =====	
	OMITTED.
HE52A =====	
UEEOD	OMITTED.
HE52B =====	OMITTED.
HE52B0V	OHITTED.
======	OMITTED.
HE53	
====	OMITTED.
HE54	
	OMITTED.
HE540V =====	
	OMITTED.
END_LP09 ======	
DOV OO	OMITTED.
B0X_09 =====	OMITTED.
L00P_10	
======	OMITTED.
HE55	
====	OMITTED.
HE55_01	
	OMITTED.
HE55_02 ======	
	OMITTED.
HE55_03 ======	

OMITTED.

HE56 ==== OMITTED. HE56_01 ====== OMITTED. HE56_02 ====== OMITTED. HE57 ==== OMITTED. HE57_01 ====== ${\tt OMITTED}\,.$ HE57_02 ====== OMITTED. END_LP10 ======= OMITTED. B0X_10

| GO TO NEXT QUESTIONNAIRE SECTION

MEPS FAMES P12R5/P13R3/P14R1 Health Status (HE) Section

December 8, 2008

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