GQV Hospital and Skilled Nursing Questionnaires – Cognitive Interview Protocol

Section 1: General Hospital (with or without Psychiatric or Hospice unit), Psychiatric Hospital, or Stand-alone In-Patient Hospice Facility

Part 1: Exploratory Questions

Please describe the kinds of health care services that are provided in your facility.

> What terms do you use to refer to these various kinds of health care services?

> Thinking about the terms "medical services" and "medical care", in your opinion, do they mean the same thing or are they different? If different, how?

> How about the term "health care," is that different from "medical care" or "medical services"? If so, how is it different?

[If Needed:] Does your facility provide mental health care or psychiatric services?

[If GQ provides mental health/psychiatric:] In your opinion, are psychiatric care and mental health care part of the category of medical care or medical services, or are they separate? Why do you say that?

Is there a difference between the terms "psychiatric care" and "mental health care"?

> In your opinion, is one of those terms more accurate than the others? Why do you say that?

> Are there other similar or related terms that we should consider using?

[If Needed:] Does your facility provide hospice care?

> [If GQ provides hospice care:] Would this type of care be included under medical care or medical services, or would you put it in a different category? If so, why?

Are there different levels of service or care that you provide in your facility?

> [If Yes:] What different levels of care do you provide to your patients?

Are there any other kinds of health care related activities or services that are sometimes confused with the types of activities or services in your facility?

> What terms should we not use to describe the types of services or care that are provided in your facility, if any?

What terms do you use to refer to the people receiving services in your facility?

> Do you use different terms or categories for people depending on what kinds of services they are receiving?

[If different categories are used:] Do any of these categories correspond to certain areas of your facility?

[If Yes:] How do the categories relate to the different areas of your facility?

Is there anything else about the services your facility provides or the terminology you use that you think we should know about?

Thank you for walking me through the types of services provided at your facility.

Part 2: Cognitive Interview Questions

Next, I'd like to ask you some questions that our field staff will be asking staff at facilities such as yours in the next census. As you answer these questions, I'd like you to tell me what goes through your mind as you answer them. I'm not looking for anything in particular. I just want to get a sense of how you would go about answering the questions.

[As needed:] Please remember to say what you're thinking about.

GQV Questionnaire – Hospitals
[Review facility address before starting questionnaire.]

1. What is your name?
2. What is your job title?
3a. What is your business email address?
3b. What is your personal email address?
4a. What is your business telephone number?
4b. What is your personal telephone number?

5. Is there a secondary contact person?
    If yes, go to Q6a
    If no, go to Q7
6a. What is their name?
6b. What is their job title?
6c. What is their business email address?
6d. What is their personal email address?
6e. What is their business telephone number?
6f. What is their personal telephone number?

7. We have this address listed as [Read address]. Is this correct?
    If yes, go to Q9
    If no, go to Q8

8. What is the correct address?

9. What is the full name of the building or facility at this address?
RESPONSE:_____

10. Is this building part of a parent facility, campus, or complex? (If yes, ask:) What is the name of that parent facility, campus, or complex?
RESPONSE:_____

11. Next, I am going to show you a list. [Show respondent flashcard by sharing the window of the flashcard file. Close after response.] Which of these categories best describes this place?
RESPONSE:_____

12. Now I have some questions about the building at the address we just verified. At this hospital, is there a mental or psychiatric unit or floor

for long-term non-acute care? RESPONSE: Yes   No
    If Yes, Go 13
    If No, Go to 14

13. What is the maximum number of patients who can live or stay in the psychiatric unit or floor? RESPONSE:_____

14. At this hospital, is there an in-patient hospice unit or floor? RESPONSE: Yes   No
    If Yes, Go to 15
    If No, Go to 16

15.What is the maximum number of patients who could live or stay in the hospice unit or floor? RESPONSE:_____

16. At this hospital, is there a skilled-nursing unit? RESPONSE: Yes   No
    If Yes, Go to 17
    If No, Go to 18

17.What is the maximum number of patients who could live or stay in the skilled-nursing unit? RESPONSE:_____

18. At this hospital, do you ever admit patients with no disposition or exit plan? That is, patients who have no usual residence elsewhere? RESPONSE: Yes   No
    If Yes, Go to 19
    If No, Go to 20

19. What is the maximum number of patients who could live or stay at this hospital with no disposition or exit plan?
RESPONSE:_____

20. At this hospital, in addition to housing for patients, is there also housing for staff?
RESPONSE: Yes   No
    If Yes, Go to 21
    If No, Go to END

21. Is the housing for staff used as their usual residence?
    If Yes, Go to 22

22. What is the maximum number of staff who can live at this hospital?

Retrospective Probes

Thank you for sharing your thoughts as you answered those questions. In your opinion, were these questions easy or difficult to answer? Why do you say that?

[If response is "difficult":] Which questions did you find difficult to answer? Why were they difficult?

Now I'd like to ask you some follow-up questions.

[Review answer from Q9] I asked you what is the full name of the building or facility at this address, and you said ___.

What does that question mean to you?

How did you come up with your answer to that question?

How easy or difficult was it to answer that question? Why do you say that?

[If needed:] What does "the building or facility at this address" mean to you?

In your opinion, do "building" and "facility" refer to the same thing, or are they different? Why do you say that?

Does your facility have more than one building or area with different names, or is there just one name for the entire facility?

[If different names:] Do the different names represent different parts of the same facility, or are they for different facilities or other entities in the same location?

[Review answer from Q10] Then I asked you whether this building is part of a parent facility, campus, or complex, and you said __.

Please tell me in your own words what that question is asking you.

How did you come up with your answer to that question?

[If needed:] What does "parent facility" mean to you?

[If needed:] How about "campus or complex," what do those terms mean to you?

[If Q10 = yes, if needed:] How do the terms "parent facility, campus, or complex" relate to your facility?

[If needed:] Please tell me what is the specific parent facility, campus, or complex you were thinking of when you answered the question.

In your opinion, how well do these terms describe the organization of which this facility is a part?

[If needed:] Does one of those terms work better than the others? Why do you say that?

In your opinion, is there a difference between "facility" as I asked you in the previous question, and "parent facility" in this question? Why do you say that?

Another term we might use is "parent organization." Please tell me what "parent organization" means to you.

In the context of your facility, is there a difference between "parent facility" and "parent organization"? If so, what are the differences?

[If Q10 = yes] In your case, would either "parent facility" or "parent organization" be a better term to use? Why do you say that?

[If needed:] Are there any other terms we should use that would make this question clearer?

Please tell me about your overall organization, that is, the organization that owns, manages or operates this facility and all of its other parts.

[Refer to the GQ address for which the questionnaire was completed as need to re-orient R.]

[If needed:] What is the ultimate parent organization that owns this facility and any other related facilities?

[If clarification is needed:] The ultimate parent organization is the topmost organization in the chain of ownership to which this facility belongs.

What kind of organization is that? [If needed:] For example, a for-profit corporation, a non-profit agency, etc.?

Where is that organization's headquarters?

What term would you use to describe that organization in relation to your facility?

What term would you use to describe your facility in relation to that organization?

Does that organization have other facilities in addition to this facility?

[If yes:] Where are those other facilities located?

What terms do you use to refer to those other facilities, in relation to your facility?

Does the parent organization have different departments, centers, or other administrative or organizational units in the same location as your facility?

[If yes:] Please tell me about those other organizational units.

What terms do you use to refer to those types of units in relation to your facility?

Can you suggest any terms that we can use to refer to the other facilities or organizational units that are located in the same place as your facility, to make it clear we are not referring to the parent organization or facilities in other places?

[Review answer from Q11] Next, I showed you a list of different kinds of facilities, and you chose ___. [If needed, show respondent flashcard by sharing the flashcard window.]

How did you decide which description to choose?

How easy or difficult was it to choose one? Why do you say that?

[Review answer from Q12] When I asked, "At this hospital, is there a mental or psychiatric unit or floor for long-term non-acute care?" you answered _____.

How did you come up with your answer to that question?

What does "mental or psychiatric unit or floor for long-term non-acute care" mean to you?

In your opinion, is this question clear or not clear? Why do you say that?

The question refers to a "unit or floor". What do these terms mean to you?

In your opinion, should we use both of those terms in a question like this, or should we just use "unit"? Why do you say that?

[Review answer from Q14] When I asked whether there is an in-patient hospice unit or floor, you answered ___.

How did you come up with your answer to that question?

What does "in-patient hospice unit" mean to you?

[Review answer from Q16] When I asked whether there is a skilled-nursing unit or floor, you answered ___.

What does "skilled-nursing unit" mean to you?

[Review answers from Q12, Q14, and Q16] Thinking about the [mental or psychiatric unit (and) / in-patient hospice unit (and) / skilled nursing unit] and any other units we might not have talked about yet,

are there specific areas of your facility that are dedicated to different kinds of health care services or activities?

> [If Yes:] Please tell me about how your facility's services are organized in terms of the physical layout.
>
> [If Needed:] What terms do you use to refer to the different areas of your facility where different kinds of health care services are provided?
>
> [If Needed:] Does your facility have multiple separate structures or buildings?
>
>> [If Yes:] What terms do you use to refer to the different structures or buildings?
>>
>> What terms do you use to refer to the entire facility, including all structures and buildings?

[Review answers from Q13, Q15, and Q17] I also asked you for the maximum number of patients who could live or stay in the [mental or psychiatric unit (and) / in-patient hospice unit (and) / skilled nursing unit], and you said [repeat numbers for each].

> How did you arrive at the maximum number(s) of patients who could live or stay [in that unit / in each of those units]?

How easy or difficult would it be for you to report [that/those] number(s) for each type of unit?

> Would it be easier to only report the maximum number of patients who could live or stay in your entire facility, rather than providing separate maximum counts for each separate type of unit?
>
> During the census we will ask you to provide demographic information, such as name, sex, date of birth, and race, for people receiving services in these different areas of your facility. For example, if a hospital also had a psychiatric unit or hospice care unit, we collected data separately about the patients in each of those different types of units, for patients with no usual home elsewhere, and for staff living at the facility. So, there could be separate data collected for a psychiatric unit, for a nursing unit, for a hospice unit, for staff housing, and then also a final separate category for any patients within the entire facility who had no usual home elsewhere.
>
>> What would you have to do to provide demographic information for the people in these different areas of your facility?
>>
>> Would the process be the same regardless of which area they are in, or would you have to follow different steps for gathering data for different areas?
>>
>> Would it be easier for you to report people's information separately for these different areas, or would it be easier to report them all together?
>>
>> One reason that we would identify different types of units in a facility like yours is that we could offer different methods for enumerating people that might work better for

different units. For example, an administrator might want to provide data for some patients from facility records, but prefer that patients in another section complete their own paper forms or provide their information directly to Census Bureau staff who would visit the facility. Does the possibility of choosing different enumeration procedures for different units change your opinion about whether to identify different units or to treat the whole facility the same way in terms of the census operation?

[Review answer from Q18] Next, I asked if your hospital ever admits patients with no disposition or exit plan, and you answered ____.

In your own words, what does that question mean to you?

How did you come up with your answer to that question?

[If Q18 = yes, review answer from Q19] Then you said the maximum number of patients with no disposition or exit plan who can live or stay at this hospital is ____. How did you come up with your answer?

How easy or difficult was it to answer that question? Why do you say that?

[If needed:] What does "patients with no disposition or exit plan" mean to you?

We refer to these people as "patients who have no usual residence elsewhere." What does that mean to you?

Does that mean the same thing as "patients with no disposition or exit plan" or is it different? Why do you say that?

Do you have any suggestions for wording we can use to describe these people?

[Review response to Q20] Next, I asked you if the hospital also has housing for staff, and you answered ____.

Please tell me in your own words what that question means to you.

How did you come up with your answer to that question?

How easy or difficult was it to answer that question? Why do you say that?

[If response to Q20 was yes] Please tell me a little about the housing for staff at your hospital.

[Review response to Q21] Then I asked you if the housing for staff is used as their usual residence, and you answered ____.

Please tell me in your own words what that question means to you.

How did you come up with your answer to that question?

How easy or difficult was it to answer that question? Why do you say that?

[If needed:] What does "usual residence" mean to you?

[If response to Q21 was yes, review response to Q22] Finally, I asked you what is the maximum number of staff who can live at the hospital, and you answered ___.

How did you come up with your answer to that question?

How easy or difficult was it to answer that question? Why do you say that?

I just have one more thing to ask you about the questionnaire. At the beginning I asked for your contact information as well as for a secondary contact.

[If P provided secondary contact:] Did you have any concerns about providing that person's information?

Who is that person in relation to you?

[If P did NOT provide secondary contact:] What does that question mean to you?

What was your reason for not providing another contact person?

I also asked you for your personal email address and telephone number [If provided secondary: ...and also the personal email and phone number for your secondary contact].

Would you have any questions or concerns about providing your personal, non-work contact information to Census Bureau staff during the actual census? [If yes:] Please tell me about them.

Thank you for talking about how you came up with your responses to those questions. Next, I'd like you to look at the definitions we have for health care facilities.

GQ Type Definitions

| 1. **Hospital** |
| Includes general or Veterans Affairs hospitals, as well as mental or psychiatric hospitals. |
| 2. **Nursing or Skilled-Nursing Facility, Independent or Assisted Living Facility, or Continuing Care Facility** |
| ***Nursing/Skilled-Nursing Facility:*** Facilities that provide long-term 24-hour non-acute medical care with licensed nurses. (Note: These facilities may also be referred to as nursing homes.) |
| ***Independent/Assisted Living Facility:*** Facilities that provide housing for older adults and coordinate personal support services, 24-hour supervision and assistance to meet needs in a way that promotes maximum dignity and independence for each resident. These facilities are designed for people who need regular help with the activities of daily living but do not necessarily require skilled medical care. (Note: These facilities may also contain a nursing/skilled-nursing unit or hospice unit.) |
| ***Continuing Care Facility:*** Facilities that provide residents with a lifetime continuum of care so that the residents can "age in place." They offer the resident independent living for as long as possible, and provide for nursing assistance if or when it is needed. (Note: These facilities may also be referred to as continuing care retirement communities [CCRCs] or multi-level care facilities, and they may also contain a nursing/skilled-nursing unit or hospice unit.) |
| 3. **In-Patient Hospice Facility (free-standing only)** |
| Includes in-patient hospice facilities that provide palliative, comfort, and supportive care for terminally ill patients and their families. |

[For each definition:] What is your opinion about this definition as it relates to your facility?

Is there is anything about this definition that does not accurately describe your facility?

Is there anything about this definition that you would change?

Is anything missing that you think should be added?

What does "long-term non-acute care" mean to you?

How about "short-term acute care"?

Are you familiar with these terms?

Which of these types of care does your facility provide? If both types of care are provided at your facility, what proportion of your patients receive "long-term non-acute care"?

Are there better terms that we could use to describe the differences between these two types of care?

Are there any patients who would not clearly fit into either of those two categories, based on the current wording?

Do your facility records include patients' home addresses?

[If Yes:] Would you say that you have home addresses for some, most, or all of your patients?

Does it depend on what department they're in, as to whether you have patients' home addresses?

Could that information be shared with the Census Bureau, for the purpose of ensuring we only count each person one time in the census?

Are there specific terms used to refer to patients who are staying in your facility who have no usual home elsewhere, such as people experiencing homelessness? [If needed:] That is, people who have no usual residence to which they will return to after they leave your facility.

Would it make sense to say that they "have no exit or disposition plan"? Why do you say that?

How easy or difficult would it be to identify which patients have no usual home elsewhere?

Part 3: Additional Questions (time permitting)

[If the facility provides Hospice care:] What are the differences between the terms "respite care", "hospice care", "palliative care" and "end-of-life care"?

Are there other similar or related terms that we should consider using?

During the actual census, what would be the department and job title of the best person to answer questions about the services provided at your facility?

Do you have any suggestions for the best ways to contact them?

What is the department and job title of the person in your facility who would have access to patients' demographic information (such as name, sex, date of birth, and race), and who would be best suited to provide that data to the Census Bureau?

Alternatively, who would be able to coordinate with Census Bureau staff to collect demographic information from patients? [If needed:] For example, to allow Census Bureau staff to distribute questionnaires to the patients or conduct interviews with the patients?

Section 2: Continuing Care Retirement Community (CCRC), Nursing Facility (with or without Memory Care or Hospice unit), or Assisted Living Facility (or some combination of these)

Part 1: Exploratory Questions

Please describe the kinds of health care services that are provided in your facility.

What terms do you use to refer to these various kinds of health care services?

Thinking about the terms "medical services" and "medical care", in your opinion, do they mean the same thing or are they different? If different, how?

How about the term "health care," is that different from "medical care" or "medical services"? If so, how is it different?

Are there different levels of service or care that you provide in your facility?

[If Yes:] What different levels or types of care do you provide to your residents?

Are there any other kinds of health care related activities or services that are sometimes confused with the types of activities or services in your facility?

What terms should we <u>not</u> use to describe the types of services or care that are provided in your facility, if any?

What terms do you use to refer to the people receiving services in your facility?

Do you use different terms or categories for people depending on what kinds of services they are receiving?

[If different categories are used:] Do any categories of these correspond to certain areas of your facility?

[If Yes:] How do the categories relate to the different areas of your facility?

Is there anything else about the services your facility provides or the terminology you use that you think we should know about?

Thank you for walking me through the types of services provided at your facility.

Part 2: Cognitive Interview Questions

Next, I'd like to ask you some questions that our field staff will be asking staff at facilities such as yours in the next census. As you answer these questions, I'd like you to tell me what goes through your mind as you answer them. I'm not looking for anything in particular. I just want to get a sense of how you would go about answering the questions.

GQV Questionnaire – Skilled Nursing
[Review facility address before starting questionnaire.]

1. What is your name?
2. What is your job title?
3a. What is your business email address?
3b. What is your personal email address?
4a. What is your business telephone number?
4b. What is your personal telephone number?

5. Is there a secondary contact person?
        If yes, go to Q6a
        If no, go to Q7
6a. What is their name?
6b. What is their job title?
6c. What is their business email address?
6d. What is their personal email address?
6e. What is their business telephone number?
6f. What is their personal telephone number?

7. We have this address listed as [Read address]. Is this correct?
        If yes, go to Q9
        If no, go to Q8

8. What is the correct address?

9. What is the full name of the building or facility at this address?
RESPONSE:_____

10. Is this building part of a parent facility, campus, or complex?
RESPONSE:_____

11. Next, I am going to show you a list. [Show respondent flashcard by sharing the window of the flashcard file. Close after response.] Which of these categories best describes this place?
RESPONSE:_____

12. Now I have some questions about the building at the address we just verified. At this address, is there a nursing or skilled-nursing unit?

        If Yes, go to 13

        If No, go to 14

13. What is the maximum number of residents who can live or stay in the nursing or skilled-nursing unit? RESPONSE:_____

14. At this address, is there an in-patient hospice unit? RESPONSE: Yes   No

        If Yes, go to 15

        If No, go to 16

15. What is the maximum number of residents who can live or stay in the hospice unit? RESPONSE:_____

16. At this address, in addition to housing for residents, is there also housing for staff? RESPONSE: Yes   No

        If Yes, go to 17

        If No, go to 19

17. Is the housing for staff used as their usual residence? RESPONSE: Yes   No

        If Yes, go to 18

        If No, go to 19

18. What is the maximum number of staff who can live at this address? RESPONSE:_____

19. At this address, are there any independent living, assisted living, or continuing care units? RESPONSE: Yes   No

<u>Retrospective Probes</u>

Thank you for sharing your thoughts as you answered those questions. In your opinion, were these questions easy or difficult to answer? Why do you say that?

[If response is "difficult":] Which questions did you find difficult to answer? Why were they difficult?

Now I'd like to ask you some follow-up questions.

[Review answer from Q9] I asked you what is the full name of the building or facility at this address, and you said ____.

What does that question mean to you?

How did you come up with your answer to that question?

How easy or difficult was it to answer that question? Why do you say that?

[If needed:] What does "the building or facility at this address" mean to you?

In your opinion, do "building" and "facility" refer to the same thing, or are they different? Why do you say that?

Does your facility have more than one building or area with different names, or is there just one name for the entire facility?

[If different names:] Do the different names represent different parts of the same facility, or are they for different facilities or other entities in the same location?

[Review answer from Q10] Then I asked you whether this building is part of a parent facility, campus, or complex, and you said __.

Please tell me in your own words what that question is asking you.

How did you come up with your answer to that question?

[If needed:] What does "parent facility" mean to you?

[If needed:] How about "campus or complex," what do those terms mean to you?

[If Q10 = yes, if needed:] How do the terms "parent facility, campus, or complex" relate to your facility?

[If needed:] Please tell me what is the specific parent facility, campus, or complex you were thinking of when you answered the question.

In your opinion, how well do these terms describe the organization of which this facility is a part?

[If needed:] Does one of those terms work better than the others? Why do you say that?

In your opinion, is there a difference between "facility" as I asked you in the previous question, and "parent facility" in this question? Why do you say that?

Another term we might use is "parent organization." Please tell me what "parent organization" means to you.

In the context of your facility, is there a difference between "parent facility" and "parent organization"? If so, what are the differences?

[If Q10 = yes] In your case, would either "parent facility" or "parent organization" be a better term to use? Why do you say that?

[If needed:] Are there any other terms we should use that would make this question clearer?

Please tell me about your overall organization, that is, the organization that owns, manages or operates this facility and all of its other parts.

[Refer to the GQ address for which the questionnaire was completed as need to re-orient R.]

[If needed:] What is the ultimate parent organization that owns this facility and any other related facilities?

[If clarification is needed:] The ultimate parent organization is the topmost organization in the chain of ownership to which this facility belongs.

What kind of organization is that? [For-profit, non-profit, etc.]

Where is that organization's headquarters?

What term would you use to describe that organization in relation to your facility?

What term would you use to describe your facility in relation to that organization?

Does that organization have other facilities in addition to this facility?

[If yes:] Where are those other facilities located?

What terms do you use to refer to those other facilities, in relation to your facility?

Does the parent organization have different departments, centers, or other administrative or organizational units in the same location as your facility?

[If yes:] Please tell me about those other organizational units.

What terms do you use to refer to those types of units in relation to your facility?

Can you suggest any terms that we can use to refer to the other facilities or organizational units that are located in the same place as your facility, to make it clear we are not referring to the parent organization or facilities in other places?

[Review answer from Q11] Next, I showed you a list of different kinds of facilities, and you chose ___. [If needed, show respondent flashcard by sharing the flashcard window.]

How did you decide which description to choose?

Did you find it easy or difficult to choose one? Why do you say that?

[Review answer from Q12] When I asked whether there is a nursing or skilled-nursing unit, you answered ___.

What does "skilled nursing unit" mean to you?

In your opinion, is there a difference between "nursing unit" and "skilled nursing unit"? Please say more about that, what makes them different?

[Review answer from Q14] When I asked whether there is an in-patient hospice unit, you answered ___.

How did you come up with your answer to that question?

What does "in-patient hospice unit" mean to you?

[Review answers from Q12 and Q14] Thinking about the [skilled nursing unit / (and) hospice unit] and any other units we might not have talked about yet, are there specific areas of your facility that are dedicated to different kinds of health care services or activities?

[If Yes:] Please tell me about how your facility's services or activities are organized in terms of the physical layout.

[If Needed:] What terms do you use to refer to the different areas of your facility where different kinds of health care services are provided?

[If Needed:] Does your facility have multiple separate structures or buildings?

[If Yes:] What terms do you use to refer to the different structures or buildings?

What terms do you use to refer to the entire facility, including all structures and buildings?

I also asked you for the maximum number of residents who could live or stay in the [skilled nursing unit (and) / in-patient hospice unit], and you said .

How did you arrive at the maximum number(s) of residents who could live or stay [in that unit / in each of those units]?

How easy or difficult is it for you to report [that/those] number(s) for each type of unit?

Would it be easier to only report the maximum number of residents who could live or stay in your entire facility, rather than providing separate maximum counts for each separate type of unit?

During the census we will ask you to provide demographic information, such as name, sex, date of birth, and race, for people receiving services in these different areas of your facility. For example, if a nursing facility also had a hospice care unit, we collected data separately about the residents in each of those different types of units, and for staff living at the facility. So, there could be separate data collected for a nursing unit, for a hospice unit, and for staff housing.

What would you have to do to provide demographic information for the people in these different areas of your facility?

Would the process be the same regardless of which area they are in, or would you have to follow different steps for gathering data for different areas?

Would it be easier for you to report people's information separately for these different areas, or would it be easier to report them all together?

One reason that we would identify different types of units in a facility like yours is that we could offer different methods for enumerating people that might work better for different units. For example, an administrator might want to provide data for some patients from facility records, but prefer that patients in another section complete their own paper forms or provide their information directly to Census Bureau staff who would visit the facility. Does the possibility of choosing different procedures for different units change your opinion about whether to identify different units or to treat the whole facility the same way in terms of the census operation?

Next, I asked you if the facility also has housing for staff, and you answered ___.

Please tell me in your own words what that question means to you.

How did you come up with your answer to that question?

How easy or difficult was it to answer that question? Why do you say that?

Please tell me a little about the housing for staff at this facility.

[Review response to Q17] Then I asked you if the housing for staff is used as their usual residence, and you answered ___.

Please tell me in your own words what that question means to you.

How did you come up with your answer to that question?

How easy or difficult was it to answer that question? Why do you say that?

[If needed:] What does "usual residence" mean to you?

[If response to Q17 was yes, review response to Q18] Next, I asked you what is the maximum number of staff who can live at this facility, and you answered ___.

How did you come up with your answer to that question?

How easy or difficult was it to answer that question? Why do you say that?

[Review answer from Q19] Finally, I asked whether there is any independent living, assisted living, or continuing care units, and you answered ___.

What does "independent living unit" mean to you?

What does "assisted living unit" mean to you?

What does "continuing care unit" mean to you?

[If response to Q19 was yes] Which of those types of units does your facility have? How many of each type of unit does your facility have?

[If the facility is a Continuing Care Retirement Community (or otherwise contains a combination of nursing care/assisted living and independent living/senior apartments):]

I'd like to get your thoughts on how we approach facilities that may have combinations of different services and residence types for which we have used different procedures for collecting residents' data depending on which type of residence they were in.

During the 2020 Census, some portions of a facility were classified as group quarters while other portions of that same facility were classified as housing units. For group quarters, we asked facility administrators to decide whether their residents could participate directly in the census or whether the administrators themselves would provide their data. For housing units, we contacted the residents directly by mail and did not give facility administrators the option to provide data for those residents.

For group quarters, which included nursing facilities and hospice facilities, we asked facility administrators to select the best method to collect data about their residents. Some methods

involved getting data directly from residents, and others required facility administrators to provide residents' data. For example:

- Facility administrators could receive paper forms to pass out to residents to complete, then collect them and return them to the Census Bureau.
- Census Bureau staff could visit the facility and conduct in-person interviews with residents. (This option was ultimately not used due to the COVID-19 pandemic, but it will be available again in the future.)
- Facility administrators could provide data about residents from facility records using our spreadsheet template.
- Etc.

For housing units, which included assisted living, independent living, active adult communities, senior apartments, and other similar types of housing for older adults, we mailed letters to each individual unit asking residents to complete the census questions via online form, phone interview, or a mail-in paper questionnaire. Later we reached out to the facility administrator to ask about the units that had not responded, asked whether those units were occupied, and requested access to go to each occupied unit to conduct in-person interviews.

What do you think about having these two different sets of procedures for different parts of continuing care facilities?

For the 2030 Census, we are currently thinking about including assisted living facilities in the group quarters category along with nursing facilities and hospice facilities. What do you think about classifying assisted living facilities as group quarters or as housing units?

And we are thinking that independent living, active adult communities, senior apartments, and other similar types of housing for older adults should continue to be classified as housing units. What do you think about continuing to classify those types as housing units?

I just have one more thing to ask you about the questionnaire. At the beginning I asked for your contact information as well as for a secondary contact.

[If P provided secondary contact:] Did you have any concerns about providing that person's information?

Who is that person in relation to you?

[If P did NOT provide secondary contact:] What does that question mean to you?

What was your reason for not providing another contact person?

I also asked you for your <u>personal</u> email address and telephone number [If provided secondary: ...and also the personal email and phone number for your secondary contact].

Would you have any questions or concerns about providing your personal, non-work contact information to Census Bureau staff during the actual census? [If yes:] Please tell me about them.

Thank you for talking about how you came up with your responses to those questions. Next, I'd like you to look at the definitions we have for health care and elder care facilities.

GQ Type Definitions

1. **Hospital** Includes general or Veterans Affairs hospitals, as well as mental or psychiatric hospitals.
2. **Nursing or Skilled-Nursing Facility, Independent or Assisted Living Facility, or Continuing Care Facility** *Nursing/Skilled-Nursing Facility:* Facilities that provide long-term 24-hour non-acute medical care with licensed nurses. (Note: These facilities may also be referred to as nursing homes.) *Independent/Assisted Living Facility:* Facilities that provide housing for older adults and coordinate personal support services, 24-hour supervision and assistance to meet needs in a way that promotes maximum dignity and independence for each resident. These facilities are designed for people who need regular help with the activities of daily living but do not necessarily require skilled medical care. (Note: These facilities may also contain a nursing/skilled-nursing unit or hospice unit.) *Continuing Care Facility:* Facilities that provide residents with a lifetime continuum of care so that the residents can "age in place." They offer the resident independent living for as long as possible, and provide for nursing assistance if or when it is needed. (Note: These facilities may also be referred to as continuing care retirement communities [CCRCs] or multi-level care facilities, and they may also contain a nursing/skilled-nursing unit or hospice unit.)
3. **In-Patient Hospice Facility (free-standing only)** Includes in-patient hospice facilities that provide palliative, comfort, and supportive care for terminally ill patients and their families.

[For each definition:] What is your opinion about our definition as it relates to your facility?

Is there is anything about this definition that does not accurately describe your facility?

Is there anything about this definition that you would change?

Is anything missing that you think should be added?

What does "long-term non-acute care" mean to you?

How about "short-term acute care"?

Are you familiar with these terms?

Which of these types of care does your facility provide? If both types of care are provided at your facility, what proportion or your residents receive "long-term non-acute care"?

Are there better terms that we could use to describe the differences between these two categories of care?

Are there any patients who would not clearly fit into one of those two categories, based on the current wording?

[If the facility provides Nursing care:] Does your facility provide 24/7 nursing care coverage for all or some of your residents?

[If "Some":] If 24/7 nursing care is only provided for some of your residents, which types of residents receive that level of care?

[If needed:] What terms, if any, do you use to distinguish those types of residents that receive 24/7 nursing care from others who do not receive that level of care?

Do your facility records include residents' home addresses?

[If Yes:] Would you say that you have home addresses for some, most, or all of your residents?

Does it depend on what department they're in, as to whether you have residents' home addresses?

Could that information be shared with the Census Bureau, for the purpose of ensuring we only count each person one time in the census?

Are there specific terms used to refer to people who are staying in your facility who have no usual home elsewhere? [If needed:] That is, people who have no usual residence to which they will return to after they leave your facility.

Would it make sense to say that they "have no exit or disposition plan"?

How easy or difficult would it be to identify which residents have no usual home elsewhere?

Part 3: Additional Questions (time permitting)

[If the facility provides Hospice care:] What are the differences between the terms "respite care", "hospice care", "palliative care" and "end-of-life care"?

Are there other similar or related terms that we should consider using?

During the actual census, what would be the department and job title of the best person to answer questions about the services provided at your facility?

Do you have any suggestions for the best ways to identify and contact them?

What is the department and job title of the person in your facility who would have access to residents' demographic information (such as name, sex, date of birth, and race), and who would be best suited to provide that data to the Census Bureau?

Alternatively, who would be able to coordinate with Census Bureau staff to collect demographic information from patients? [If needed:] For example, to allow Census Bureau staff to distribute questionnaires to the patients or conduct interviews with the patients?