

POMP 4 HEALTH MODULE

CODEBOOK
April 25, 2003

CODERS: ONLY ENTER DATA FOR QUESTIONNAIRES THAT HAVE THE OFFICE USE ONLY BOX FILLED IN. CHECK BELOW FOR REQUIRED FIELDS.

ENTER A VALUE FOR ALL QUESTIONS UNLESS "BLANK IS VALID" IS NOTED, OTHERWISE CODE -9 FOR MISSING OR INVALID OR INVALID VALUES. CHECK THE SURVEY MARGIN FOR REMARKS. IF REFUSED (RF) CODE -7. IF DON'T KNOW (DK), CODE -8.

FOR QUESTIONS WHERE ONLY ONE RESPONSE IS VALID, IF MORE THAN ONE RESPONSE IS CHECKED, CODE -9, INVALID.

FOR QUESTIONS 7a AND 8a, "CHECK ALL THAT APPLY", A CHECKED BOX = 1 (YES) AND AN UNCHECKED BOX = 2 (NO). IF ALL BOXES ARE UNCHECKED, CODE EACH CATEGORY AS -9.

AGENCY INFORMATION - AUTOFILL

Variable Name	Variable Description and Codes
AAA	Name of agency that the client is enrolled with (REQUIRED) XXXXXXXXXXXXXXXXX(Maximum of 50 Characters)
State	State that the agency is in (REQUIRED) XX (State abbreviation)

OFFICE USE ONLY BOX

Variable Name	Variable Description and Codes
Date	Date the interview was completed (REQUIRED) xx/xx/2003
ClientID	Unique client identifier (REQUIRED) XXXXXXXXXXXXXXXXX(Maximum of 50 Characters)
Interview	Interview method of administration (REQUIRED) 1 =Phone 2 =In Person 3 =Mail
Enroll	Date client began using nutrition service (REQUIRED) xx/xx/xxxx
Service	Type of Service (REQUIRED) 1 =Congregate Meals 2 =Home Delivered

Comments

XXXXXXXXXXXXX(Maximum 65,000 Characters)
BLANK IS VALID

QUESTIONNAIRE

Variable Name

Question And Codes

FS1

1. How would you describe your health?

- 1 = Excellent
- 2 = Very good
- 3 = Good
- 4 = Fair
- 5 = Poor
- 7 = DON'T KNOW
- 8 = REFUSED
- 9 = MISSING OR INVALID

FS2

. During the past year, about how many different times did you stay in the hospital overnight or longer?

- 1 = Never
- 2 = 1-2 times
- 3 = 3-4 times
- 4 = 5 or more times
- 7 = DON'T KNOW
- 8 = REFUSED
- 9 = MISSING OR INVALID

FS3

3. During the past year about how many times did you stay in a nursing home or convalescent home?

- 1 = Never
- 2 = 1-2 times
- 3 = 3-4 times
- 4 = 5 or more times
- 7 = DON'T KNOW
- 8 = REFUSED
- 9 = MISSING OR INVALID

FS4

4. During the past year, about how many times did you see or talk to a medical doctor or assistant? (Do not count the doctors you saw while you were an overnight patient in a hospital or nursing home.)

- 1 = Never
- 2 = 1-6 times
- 3 = 7-11 times
- 4 = 12 or more times
- 7 = DON'T KNOW
- 8 = REFUSED
- 9 = MISSING OR INVALID

FS5

5. About how many different prescription medications do you take every day?

- 1 = None
- 2 = 1-3 different medications
- 4 = 3-5 different medications
- 4 = 6 or more different medications
- 7 = DON'T KNOW
- 8 = REFUSED
- 9 = MISSING OR INVALID

FS6

6. How would you describe your appetite?

- 1 = Excellent
- 2 = Very good
- 3 = Good
- 4 = Fair
- 5 = Poor
- 7 = DON'T KNOW
- 8 = REFUSED
- 9 = MISSING OR INVALID

FS7

7. Do you ever not eat a meal because you're not hungry?

- 1 = Yes
- 2 = No
- 7 = DON'T KNOW
- 8 = REFUSED
- 9 = MISSING OR INVALID

CODERS: IF FS7 = 1 GO TO FS7AA, ELSE GO TO FS8

7a. (IF YES) Why are you not hungry? [Check all that apply]

FS7AA

7AA. I don't have an appetite

- 1 = Yes
 - 2 = No
 - 7 = DON'T KNOW
 - 8 = REFUSED
 - 9 = MISSING OR INVALID
- BLANK IS VALID

FS7AB

7AB. The food doesn't taste good

- 1 = Yes
 - 2 = No
 - 7 = DON'T KNOW
 - 8 = REFUSED
 - 9 = MISSING OR INVALID
- BLANK IS VALID

FS7AC

7AC. I'm nauseated or ill

- 1 = Yes
 - 2 = No
 - 7 = DON'T KNOW
 - 8 = REFUSED
 - 9 = MISSING OR INVALID
- BLANK IS VALID

FS7AD

7AD. I'm too sleepy

- 1 = Yes
 - 2 = No
 - 7 = DON'T KNOW
 - 8 = REFUSED
 - 9 = MISSING OR INVALID
- BLANK IS VALID

FS7AE

7AE. Something else

- 1 = Yes
 - 2 = No
 - 7 = DON'T KNOW
 - 8 = REFUSED
 - 9 = MISSING OR INVALID
- BLANK IS VALID

CODERS: IF FS7AE = 1 GO TO 7OS, ELSE GO TO FS8

FS7OS

7OS. [IF SOMETHING ELSE] DESCRIBE

- XXXXXXXXXXXX (Maximum 65,000 Characters)
- 7 = DON'T KNOW
 - 8 = REFUSED
 - 9 = MISSING OR INVALID
- BLANK IS VALID

FS8

8. During the past year, did you have enough food to eat most of the time?

- 1 = Yes
- 2 = No
- 7 = DON'T KNOW
- 8 = REFUSED
- 9 = MISSING OR INVALID

CODERS: IF FS8 = 2 GO TO FS8AA, ELSE END

8a. (IF NO) Why didn't you have enough food to eat? (Check all that apply)

FS8AA

8AA. Not enough money or food stamps

1 = Yes
2 = No
-7 = DON'T KNOW
-8 = REFUSED
-9 = MISSING OR INVALID
BLANK IS VALID

FS8AB

8AB. Too hard to get to the store

1 = Yes
2 = No
-7 = DON'T KNOW
-8 = REFUSED
-9 = MISSING OR INVALID
BLANK IS VALID

FS8AC

8AC. On a diet

1 = Yes
2 = No
-7 = DON'T KNOW
-8 = REFUSED
-9 = MISSING OR INVALID
BLANK IS VALID

FS8AD

8AD. No working stove available

1 = Yes
2 = No
-7 = DON'T KNOW
-8 = REFUSED
-9 = MISSING OR INVALID
BLANK IS VALID

FS8AE

8AE. Not able to eat because of health problems

1 = Yes
2 = No
-7 = DON'T KNOW
-8 = REFUSED
-9 = MISSING OR INVALID
BLANK IS VALID

FS8AF 8AF. Kinds of foods I wanted were not available

1 = Yes
2 = No
-7 = DON'T KNOW
-8 = REFUSED
-9 = MISSING OR INVALID
BLANK IS VALID

FS8AG 8AG. Good quality food not available

1 = Yes
2 = No
-7 = DON'T KNOW
-8 = REFUSED
-9 = MISSING OR INVALID
BLANK IS VALID

FS8AH 8AH. Had to pay rent or bills instead

1 = Yes
2 = No
-7 = DON'T KNOW
-8 = REFUSED
-9 = MISSING OR INVALID
BLANK IS VALID

FS8AI 8AI. Had to purchase medicine instead

1 = Yes
2 = No
-7 = DON'T KNOW
-8 = REFUSED
-9 = MISSING OR INVALID
BLANK IS VALID

FS8AJ 8AJ. Some other reasons

1 = Yes
2 = No
-7 = DON'T KNOW
-8 = REFUSED
-9 = MISSING OR INVALID
BLANK IS VALID

CODERS: IF FS8AJ = 1 GO TO 8OS, ELSE END

FS8OS 8OS. [IF OTHER] DESCRIBE

XXXXXXXXXXXX (Maximum 65,000 Characters)
-7 = DON'T KNOW
-8 = REFUSED
-9 = MISSING OR INVALID