NDWS Survey

Wave 1

Assisted Living Staff Survey

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Masked and removed variables:

Decisions about each variable are reflected in the table of contents.

[R] - variable removed for disclosure protection

[M] - variable masked (collapsed or recoded) for disclosure protection

[Partial R] - not all responses/variables are removed for disclosure protection, but some

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Disclosure Protections

Protecting participant privacy is critical from both a compliance and ethics perspective. It must also be balanced with ensuring data utility for research. In accordance with best practices, we offer several layers of privacy protections for the de-identified, NDWS public use files.

First, we removed all direct identifiers under the HIPAA safe harbor method (e.g., date of birth) or variables for which we were concerned that participant identity could be considered readily ascertainable under the Human Subjects Research Regulations (e.g., geographic area).

Second, we classified indirect identifiers—i.e., a variable or collection of variables that could be used in combination to identify a unique individual. For example, indirect identifiers that were continuous (e.g., degree year) were converted into categorical versions, while categorical variables with multiple options were collapsed in some cases (e.g., race).

We also applied complementary cell suppression of indirect identifiers to satisfy k-anonymity, where individual cells of indirect identifiers are replaced with missing values until the k-anonymity condition is met. A k value determines the minimum group size of indirect identifiers (i.e., the number of individuals with the same non-missing indirect identifiers) in response to any query—in other words, using the indirect identifiers available in the survey, a k value reflects the number of unique respondents who share a specific combination of identifiers (e.g., a psychiatrist who earned their degree in 2002 and practices in a rural setting). Ideally, the function of the algorithm is to identify the minimum number of cells which must be suppressed to satisfy k-anonymity. We adopted k=3—meaning no fewer than 3 respondents could share a particular combination of indirect identifiers—as an appropriate balance between data privacy and utility given that we removed the variables we deemed to carry potential risk (e.g., to financial standing, employability, or reputation) and the complete, unredacted surveys are also available to researchers in a secure enclave that affords additional privacy protections. For each survey, the NDWS team identified high-priority variables among the indirect identifiers that were prioritized for inclusion by the algorithm. To maximize PUF utility for researchers, our general approach was to exclude indirect identifiers that required more than 20% of variable suppression.

Third, we removed all variables alone or in conjunction which we believed posed a potential risk to the participants' financial standing, employability, or reputation as required for exempt research under 45 CFR § \$ 46.104(d)(2).

Together, these procedures provide multiple, complementary layers of protection that align with federal and state standards while preserving the analytic value of the NDWS public use files. By combining the removal of identifiable data, high-risk variables, categorical recoding, suppression of small groups, and application of a secure enclave for full data access, we believe we have appropriately protected participant privacy. At the same time, these measures were designed to also ensure data utility such that the NDWS remains a robust and reliable resource for advancing research.

Masked and removed variables:

Decisions about each variable are reflected in the table of contents.

[R] - variable removed for disclosure protection

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Coding information for masked variables:

Masked variables are recoded as follows:

Original variable(s)	Coding	Masked variable
YearsLTCWork	Created aggregate variable with the following discreet categories:	pTimeLTCWork
	<= 1 years or other into "<=1" > 1 years into ">1"	
JobsHave	Created aggregate variable with the following discreet categories:	AL8a_JobsHave
	= 1 job into "1" More than 1 job into ">1"	
JobHours	Created aggregate variable with the following discreet categories:	AL9_JobHours
	< 40 into "<40" = 40 into "40" > 40 into ">40"	
JobsHoursWeek	Created aggregate variable with the following discreet categories:	AL12_JobHoursWeek
	< 40 into "<40" = 40 into "40" > 40 into ">40"	
JobYears	Created aggregate variable with the following discreet categories:	AL11a_JobDuration
	<= 1 years or other into "<=1" > 1 years into ">1"	
JobWeeksYear	Created aggregate variable with the	AL13_JobWeeksYear

	1	
	following discreet categories:	
	< 40 into "<40", >=40 into ">=40"	
BirthYear	Created aggregate variable with the following discreet categories:	AL48_BirthYear
	< 1980 into "<1980", < 1990 into "1980-1989", < 2000 into "1990-1999", > = 2000 into ">=2000"	
Sex	Created aggregate variable with the following discreet categories:	AL56_Sex
	Female into "Female", All others into "Male/Other	
WhereBorn	Created aggregate variable with the following discreet categories:	AL51_WhereBorn
	US or Territory into "US", Other into "NonUS"	
Race	Created aggregate variable with the following discreet categories:	AL50_Race
	If RaceAA selected into "Black", If RaceEA selected into "White", All others into "Other"	
Ethnicity	Created aggregate variable with the following discreet categories:	AL49_Ethnicity
	If Not Hispanic into "NotHisp", All others into "Hisp"	
LanguageOther	Created aggregate variable with the following discreet categories:	AL59_Language
	If "No" into "No", All others "Yes/Other"	
HHAdults	Created aggregate variable with the following discreet categories:	AL62_AgeHHAdults
	<= 0 into "0", > 0 into "1".	

HHChildren	Created aggregate variable with the following discreet categories: <= 0 into "0", > 0 into "1".	AL62_AgeHHChildren
HHAdults65	Created aggregate variable with the following discreet categories: <= 0 into "0", > 0 into "1".	AL62_AgeHHAdults65
PayPerHour PayPerWeek PayPerBiMonthly PayPerMonth	Created aggregate variable with the following discreet categories: First, standardize pay per hour from reports of per hour, weekly, bi-monthly pay. Then categorize as Missing into "NA", < 11 into "< \$11/Hr", >= 11 and < 16 into "\$11/hr - \$15/hr", >= 16 and < 20 into "\$16/hr - \$20/hr".	AL24_PayPerHourCat

ALIntro

Thank you for participating in the National Dementia Workforce Study.

This survey is sponsored by the National Institute on Aging and is being given to assisted living community staff who care for people living with dementia. The survey will take about 20 minutes.

This survey asks questions about your job with [FACILITY NAME].

Your responses are confidential and will never be shared with your employer.

Dementia is a general term for a condition causing loss of memory, language, problem-solving, and other thinking abilities that are severe enough to interfere with daily life. Alzheimer's disease is the most common cause of dementia.

AL0 StillWork

You have been selected to complete this survey based on your employment at [FACILITY NAME]. Do you still work at [FACILITY NAME]?

- 1. Yes
- 5. No

[TERMINATE IF AL0 = 5]

AL1 LicenseHeld

Have you ever held a state license, certification, or registration related to your job in an assisted living community?

- 1. Yes [GO TO AL1_1]
- 5. No [GO TO AL2]

AL1 1 LicenseNow

[DISPLAY IF AL1 = 1 Yes]

Please select the state licenses, certifications, or registrations that you **currently hold:**

Select all that apply.

L		^	$\boldsymbol{\wedge}$	n	0	^	c
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- a. RN
- b. LPN/LVN
- c. Other: _____ [R]

Certification or Registration

- d. Certified Nursing Assistant
- e. Home Health Aide
- f. Personal Care Aide/Assistant
- g. Medication Aide
- h. Other: _____ [R]
- i. None of the above

[VARIABLE CODING] [LicenseNowRN] [LicenseNowPCA]

[LicenseNowLPN] [LicenseNowMA]

[LicenseNowOther1] [LicenseNowOther2]

[LicenseNowCNA] [LicenseNowNone]

[LicenseNowHHA]

AL1_2 LicenseEver

Please check any state licenses, certifications, or registrations that you have ever **held in the past**, even if it is not current:

Select all that apply.

Licenses

a. RN

b. LPN/LVN c. Other: [R]		
Certification or Registration		
d. Certified Nursing Assistant e. Home Health Aide f. Personal Care Aide/Assistant g. Medication Aide h. Other: [R]		
[VARIABLE CODING]	[LicenseEverRN]	[LicenseEverPCA]
	[LicenseEverLPN]	[LicenseEverMA]
	[LicenseEverOther1]	[LicenseEverOther2]
	[LicenseEverCNA]	
	[LicenseEverHHA]	
AL2 Certificate		
Are you currently working toward	ds a certificate, license, or degre	e related to healthcare?
1. Yes 5. No		

AL3 Education

Which of the following describes your highest level of education?

- 1. Some high school coursework
- 2. High school diploma or equivalent
- 3. Some college coursework
- 4. Practical/vocational nursing diploma or certificate
- 5. Diploma from a hospital-based RN program

- 6. Associate degree
- 7. Bachelor's degree
- 8. Master's degree
- 9. Doctoral degree
- 10. Other (specify)_____

AL4 TrainFormal

Have you ever received formal training (online or in-person course) in...

	Yes	No
a. Understanding dementia?	0	0
b. Responding to resident behaviors?	0	0
c. Communicating with people with dementia?	0	0
d. Working with families of people with dementia?	0	0
e. Identifying changes in residents' condition?	0	0
f. Providing end-of-life care?	0	0
g. Caring for residents of different cultures, values, or beliefs?	0	0
h. Respecting residents' rights?	0	0
i. Protecting residents against injury?	0	0
j. Protecting yourself against injury?	0	0

	[TrainFormalUnderstand]	[TrainFormalEndOfLife]
	[TrainFormalRespond]	[TrainFormalCulture]
[VARIABLE CODING]	[TrainFormalComm]	[TrainFormalRights]
	[TrainFormalFam]	[TrainFormalResInjury]
	[TrainFormalCondition]	[TrainFormalSelfInjury]

AL5 TrainInformal

Have you ever received informal on-the-job training or completed self-study in...

	Yes	No
a. Understanding dementia?	0	0
b. Responding to resident behaviors?	0	O
c. Communicating with people with dementia?	0	0
d. Working with families of people with dementia?	0	O
e. Identifying changes in residents' condition?	0	0
f. Providing end-of-life care?	0	O
g. Caring for residents of different cultures, values, or beliefs?	0	0
h. Respecting residents' rights?	0	0
i. Protecting residents against injury?	0	o

j. Protecting yourself against injury?		0		O	
	[TrainInformalUnderstand] [Tr		[Trair	inInformalEndofLife]	
	[TrainInformalRespond]		[TrainInformalCultures]		
[VARIABLE CODING]	[TrainInformalComm]		[TrainInformalRights]		
	[TrainInformalFam]		[TrainInformalResInjury]		
	[TrainInformalCondition]		[TrainInformalSelfInjury]		njury]

AL6	TrainPrepare	R1
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How well did your training prepare you for what it is like to actually work at your current job?
1. Not at all prepared 2. Somewhat prepared 3. Well prepared
AL7a YearsLTCWork [M]
How many years have you been working for pay in long-term care, with any type of employer?
Years [INTEGER; RANGE 0-99]
1. Less than one year
[IF AL7a not null or > 0, GO TO AL8a]
AL7b MonthsLTCWork [R]
[Display AL7b if AL7a = Less than one year]
How many months have you been working for pay in long-term care, with any type of employer?
Months
[INTEGER; RANGE 0-999]
AL8a JobsHave [M]
How many jobs do you currently hold for pay?
current jobs for pay [INTEGER; RANGE 1-10]
[IF AL8a = 1 (one job only), GO TO AL9]

AL8b JobsHaveLTC [R]

How many jobs do you currently hold for pay in the field of long-term care?
paid jobs in long-term care [INTEGER; RANGE 1-10]
[IF AL8b = AL8a (all jobs are with LTC), GO TO AL9]
AL8c JobsHaveOther [R]
How many jobs do you currently hold for pay in other fields?
paid jobs in other fields
[INTEGER; RANGE 0-99]
AL9 JobHours [M]
How many hours do you work in a normal week [Display if AL8a > 1 (more than one job): "in all your jobs"]?
hours per week
[INTEGER; RANGE 0-168]
AL10 JobOther [R]
[Display AL10 if AL8a > 1 (more than one job)]
What type of employer do you have for your other job(s)?
Select all that apply.
a. Nursing home

- b. Another assisted living community
- c. Home care agency
- d. Privately employed to provide home care

e. Another type of health care employer f. Other (specify):						
[VARIABLE CODING]	[JobOtherNH]	[JobOtherOther]				
	[JobOtherAL]					
	[JobOtherHC]					
	[JobOtherPrivateHC]					
	[JobOtherHealthCare]					
AL11a JobYears [M] The rest of the questions in	AL11a JobYears [M] The rest of the questions in this survey are related to your job with [FACILITY NAME]					
How long have you worked wit	th this employer?					
Years [IF AL11a not null or > 0, GO TO AL12]						
1. Less than one year						
[INTEGER; RANGE 0-99]						
AL11b JobMonths						
[Display AL11b if AL11a = Less than one year]						
How many months have you worked with this employer?						
months						
[INTEGER; RANGE 0-999]						

AL12 JobHoursWeek [M]

How many hours per week do you us	sually get paid for your work in this job?
hours per week	
[INTEGER; RANGE 0-168]	
AL13 JobWeeksYear [M]	
How many weeks per year do you us	sually work in this job?
weeks per year	
[INTEGER; RANGE 0-52]	
AL14 JobShiftType	
What shifts do you normally work in t	his job?
Select all that apply.	
a. Daysb. Eveningsc. Nightsd. Weekendse. No regular shift schedule [DO NO]	Γ ALLOW WITH OTHER OPTIONS]
[VARIABLE CODING]	[JobShiftTypeD]
	[JobShiftTypeE]
	[JobShiftTypeN]
	[JobShiftTypeW]
	[JobShiftTypeIrregular]

AL15 JobSupervise

Do you supervise other staff in your job?

1. Yes

5. No

AL16 JobAdmin

Do you administer any of the following to your residents?

		Yes	No
a. Prescription oral medication		0	0
b. Prescription creams/ointments		0	0
c. Over-the-counter medications		0	0
N/ADIADI E CODINO		aist (a dl	
[VARIABLE CODING]	[JobAdm	ninivied] ninCream]	
	[JobAdm	ninOTC]	

AL17 ScheduleAdjust

How much do you agree or disagree with the following statements?

Last minute adjustments are often made to your schedule by your employer.

1. Strongly disagree

- 2. Disagree
- 3. Agree
- 4. Strongly agree

AL18 ScheduleAncticipate

[Display on the same screen as AL17]

You can easily anticipate what days and times you will be working week-to-week.

- 1. Strongly disagree
- 2. Disagree
- 3. Agree
- 4. Strongly agree

AL20 JobSameResident

Are you assigned to care for the same residents on most weeks you work, or do the residents you are assigned to change each week?

- 1. Same residents
- 2. Residents change
- 3. Combination

AL21 TravelHow

During the past month, how did you usually travel from home to your job?

- 1. Drove yourself
- 2. Got a ride from others
- 3. Public transportation
- 4. Walking or bicycle
- 5. Taxi, van, or rideshare service
- 6. Other

AL22a Tra	ansportMissWork
During the p transportation	ast month, did you miss any time from work <u>because of problems with</u>
	[GO TO AL22b] [GO TO AL23]
AL22b Tra	ansportMissShift [R]
During the p	ast month, how many shifts did you miss because of transportation problems?
Numbe	r of shifts
[INTEGER; I	RANGE 0-99]
AL22c Tra	ansportBeLate [R]
During the p	ast month, how many times were you late because of transportation problems?
Numbe	r of times
[INTEGER; I	RANGE 0-99]
AL23 Pay	Туре
How are you	ı paid?
Hourly wa Weekly sa Twice-mo Monthly sa	nthly salary

AL24a PayPerHour [M] [Display AL24a If AL23 = 1] What is your hourly wage before taxes? \$_____ hourly wage [INTEGER; RANGE 0-999] AL24b PayPerWeek [M] [Display AL24b If AL23 = 2] What is your weekly salary before taxes? \$____weekly salary [INTEGER; RANGE 0-99,999] AL24c PayPerBiMonthly [M] [Display AL24c If AL23 = 3] What is your twice-monthly salary before taxes? \$____twice-monthly salary [INTEGER; RANGE 0-999,999]

AL24d PayPerMonth [M]

[Display AL24d If AL23 = 4]

What is your monthly salary?
\$monthly salary
[INTEGER; RANGE 0-999,999]

AL25 HaveInsurance

Do you currently have health insurance?

Select all that apply.

- a. Yes, from this job
- b. Yes, from another job
- c. Yes, from spouse's or partner's job
- d. Yes, from parent or parent's job
- e. Yes, Medicaid
- f. Yes. Medicare
- g. Yes, Veterans Affairs (VA)
- h. Yes, from the Affordable Care Act/Exchange
- i. No, I do not have health insurance [Do not allow with other answers]

[VARIABLE CODING]

[HaveInsuranceOtherJob]

[HaveInsuranceSpouse]

[HaveInsuranceParent]

[HaveInsuranceMedicaid]

[HaveInsuranceMedicaire]

[HaveInsuranceVA]

[HaveInsuranceVA]

[HaveInsuranceACA]

AL26 Benefits

What benefits are	vou currently	offered by	IFACIL	1 YTI	NAME1?

Select all that apply.

- a. Paid time off (PTO) that combines sick and vacation [IF SELECTED, ASK AL26a]
- b. Paid sick time that is separate from vacation time [IF SELECTED, ASK AL26b]

c. Paid vacation time that is separat	e from sick time [IF SELECTED, ASK AL26c]	
[VARIABLE CODING]	[BenefitsPTO]	
	[BenefitsSick]	
	[BenefitsVaca]	
AL26a DaysPTO		
How many days of paid time off (PT	O) do you currently receive each year?	
# Days per year		
INTEGER; RANGE 0-365]		
AL26b DaysSick		
How many days of paid sick time do	you currently receive each year?	
# Days per year		
INTEGER; RANGE 0-365]		
AL26c DaysVaca		
How many days of paid vacation tim	ne do you receive each year?	
# Days per year		

AL27 BenefitsOther

What other benefits does [FACILITY NAME] currently offer?

Select all that apply.

- a. Health insurance for employees' families [IF SELECTED, ASK AL28]
- b. Dental insurance [IF SELECTED, ASK AL29]
- c. Vision insurance [IF SELECTED, ASK AL30]
- d. Tuition reimbursement or education scholarship [IF SELECTED, ASK AL31]
- e. Paid parental leave [IF SELECTED, ASK AL32]
- f. Retirement benefits (401K, 403B, pension, other) [IF SELECTED, ASK AL33]
- g. None of the above [Do not allow with other selections, Go to AL34]

[VARIABLE CODING] [BenefitsOtherFamily]

[BenefitsOtherDental]

[BenefitsOtherVision]

[BenefitsOtherTuition]

[BenefitsOtherPPL]

[BenefitsOtherRetirement]

[BenefitsOtherNone]

AL28 FamilyInsurance

Is your family currently enrolled in health insurance from [FACILITY NAME]?

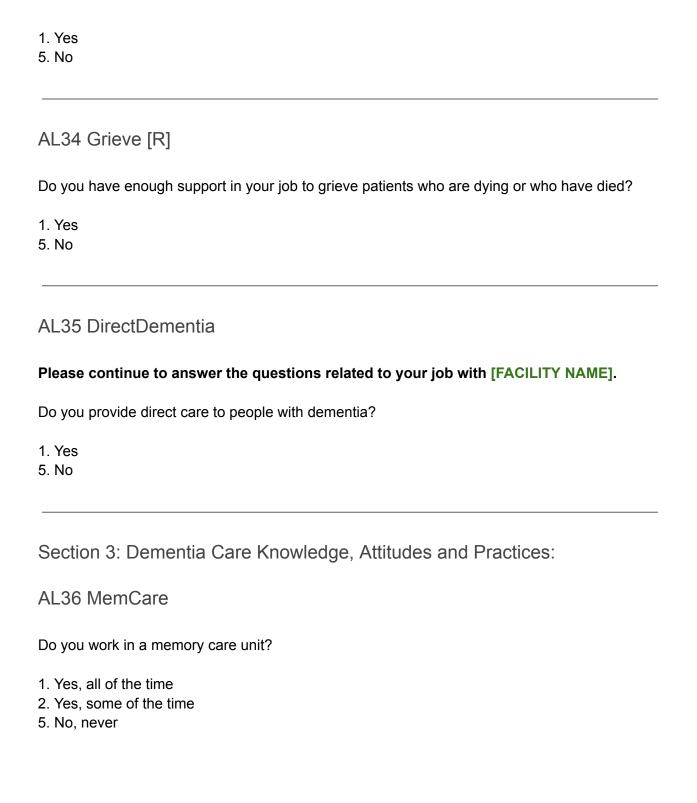
- 1. Yes
- 5. No

AL29 Dental Are you currently enrolled in dental insurance from [FACILITY NAME]? 1. Yes 5. No AL30 Vision Are you currently enrolled in vision insurance from [FACILITY NAME]? 1. Yes 5. No **AL31 Tuition** Have you ever received tuition reimbursement or an education scholarship from [FACILITY NAME]? 1. Yes 5. No AL32 ParentalLeave Have you ever received paid parental leave from [FACILITY NAME]?

AL33 Retirement

1. Yes 5. No

Are you currently enrolled in retirement benefits from [FACILITY NAME]?



AL37a-f PeopleWithDementia [Partial R]

Please indicate your level of agreement or disagreement with the following statements:

	Strong ly dis agree	Dis agree	Some what dis agree	Neut ral	Some what agree	Agree	Strong ly agree
a. It is rewarding to work with people who have dementia [R]	0	0	0	0	0	0	0
b. I am comfortable touching people with dementia [R]	0	0	0	0	0	0	0
c. I feel relaxed around people with dementia	0	0	0	0	0	0	0
d. People with dementia can be creative	0	0	0	0	0	0	0
e. It is possible to enjoy interacting with people with dementia [R]	O	0	0	0	0	0	o
f. People with dementia can enjoy life [R]	0	0	0	0	0	0	0

[VARIABLE CODING]	[PlwdRewarding]	[PlwdCreative]
	[PlwdComfortable]	[PlwdEnjoy]
	[PlwdRelaxed]	[PlwdLife]

AL38a-i PeopleWithDementia_1[Partial R]

For each item below, how confident are you in your ability to do these things with residents who have dementia?

	Not at all confident	A little confident	Somewhat confident	Very confident
a. I can use information about their past (such as what they used to do and their interests) when talking to a resident with dementia.	0	0	0	0
b. I can change my work to match the changing needs of a resident with dementia.	0	0	0	0
c. I can keep up a positive attitude towards residents with dementia. [R]	0	O	0	0
d. I can keep up a positive attitude towards the relatives of residents with dementia. [R]	0	0	0	0
e. I can keep myself motivated during a working day.	0	O	0	0
f. I can play an active role in my team.	0	0	0	0
g. I can protect the dignity of a resident with dementia. [R]	0	0	0	0
h. I can deal with personal care, such as incontinence, in a resident with dementia. [R]	0	0	0	0
i. I can offer choice to a resident with dementia (such as what to wear, or what to do). [R]	0	0	0	0

[VARIABLE CODING]	[PlwdPast]	[PlwdActive]
	[PlwdNeeds]	[PlwdDignity]
	[PlwdPositive]	[PlwdPersonalCare]
	[PlwdRelatives]	[PlwdChoice]
	[PlwdMotivated]	

AL39a-e Resources [R]

Please indicate how much you agree or disagree with the following statements:

	Strong ly dis agree	Dis agree	Agree	Strong ly agree
a. I have appropriate personal protective equipment (PPE).	0	0	0	O
b. Equipment or assistive devices are available when needed to help move, transfer, or lift residents.	0	0	0	0
c. Other staff are available when needed to help move, transfer, or lift residents.	0	0	0	0
d. The health and safety of workers is a high priority with management where I work.	0	0	0	0
e. The demands of my job interfere with my personal or family life.	0	0	0	0
[VARIABLE CODING] [JobPPE]		[Job	Safety]	

Section 4: Worker Outcomes:

AL40 JobSatisfaction [Partial R]

Thinking about your job at [FACILITY NAME], please indicate your level of satisfaction or dissatisfaction with each of the following:

	Very dissatisfied	Dissatisfied	Satisfied	Very satisfied
a. Overall job	0	o	0	o
b. Schedule of hours	0	0	0	0
c. Salary or wages	0	0	O	0
d. Benefits	0	0	o	0
e. Type of work that you do	0	0	O	0
f. Opportunities to learn new skills	0	0	0	0
g. Independence at work	0	0	0	0
h. Working with your supervisor [R]	0	0	0	0
i. Working with your coworkers [R]	0	0	0	0
j. Opportunities for career advancement	0	0	0	0
k. Relationship with residents	0	0	0	0
I. Relationship with family members of residents	0	0	0	0

m. Your workload	0		0	0	0
n. Respect for your role [R]	n. Respect for your role [R] o		o	O	0
o. Work schedule flexibility [R]		0	o	0	0
p. Work environment [R]		0	o	0	0
q. Ability to take enough sick time [R] o		0	0	0	0
[VARIABLE CODING]	[JobOv	verall]	[J	obCareer]	
	[JobHo	ours]	[Jo	obResidents]	
	[JobW	ages]	[Jo	obFamilies]	
	[JobBenefits]		[Jo	obWorkload]	
	[JobW	orkType]	[Je	obRespect]	
	[JobLearn]		[Je	obFlexibility]	
	[JobIndependence]		[Je	obEnvironment]
	[JobSupervisor]		[J	obSickTime]	
	[JobCo	oworkers]			

AL41 JobOpinion

Thinking about your job at [FACILITY NAME], how much do you agree or disagree with each of the following?

	Strong ly dis agree	Dis agree	Agree	Strong ly agree
a. I have enough time to give individual attention to residents who need	0	0	0	0

assistance with dressing, bathing, transferring, or using the toilet. [R]

b. I have enough time to complete other duties that don't directly involve the residents.[R]	0	0	0	0
c. Residents and/or families let me know when I am doing a good job.	0	O	0	0
d. My supervisor(s) lets me know when I am doing a good job.	0	o	0	0
e. I am encouraged to discuss the care and well-being of residents with their families	0	O	0	0
f. I participate as a member of a care team	0	0	0	0

[VARIABLE CODING]	[JobAttention]	[JobSuperAppr]
	[JobDuties]	[JobEncouraged]
	[JobFamiliesAppr]	[JobParticipate]

AL42 JobExperienced [Partial R]

In your job at [FACILITY NAME] over the past year, how often have you experienced the following:

	Never	Rarely	Some times	Often
a. Communication problems with co-workers [R]	0	0	0	0

b. Communication problems with supervisor(s) [R]	0	0	o	0
c. Communication problems with residents	0	o	o	0
d. Communication problems with residents' family members	0	0	0	0
e. Disrespectful behavior from residents	0	0	0	0
f. Disrespectful behavior from residents' family members	0	0	o	0
g. Racial, ethnic, religious, or other personal insults from residents [R]	0	0	O	0
h. Inappropriate sexual behavior from residents [R]	0	0	o	0
i. Hitting or other physical aggression from residents [R]	0	0	0	0
j. Yelling or other verbal aggression from residents [R]	0	o	0	0

[VARIABLE CODING]	[JobProbCoworkers]	[JobProbFamBehavior]
	[JobProbSuper]	[JobProblnsult]
	[JobProbResident]	[JobProblnappr]
	[JobProbFamilies]	[JobProbPhysical]
	[JobProbResBehavior]	[JobProbVerbal]

AL43 JobRecommend [R]

Would you recommend [FACILITY NAME] to your family and friends needing care?

1. Definitely no

- 2. Maybe no
- 3. Maybe yes
- 4. Definitely yes

AL44 JobDiscriminate [R]

In your current job have you ever been discriminated against by your employer because of your race or ethnic origin?

- 1. Yes
- 5. No

AL45 JobBurnedOut [R]

I feel burned out from my work...

- 1. Never
- 2. A few times a year or less
- 3. Once a month or less
- 4. A few times a month
- 5. Once a week
- 6. A few times a week
- 7. Every day

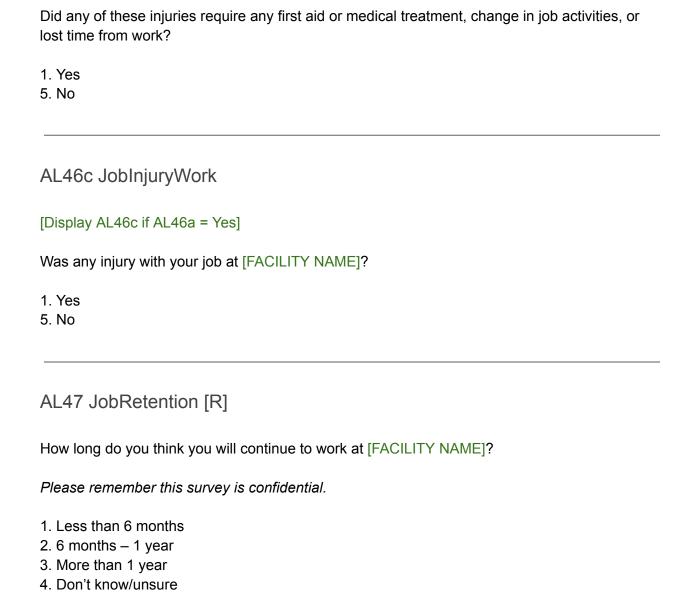
AL46a Joblnjury

During the past 12 months, did you experience any work-related injuries?

Yes [GO TO AL46b]
 No [GO TO AL47]

AL46b JoblnjuryAid

[Display AL46b if AL46a = Yes]



Section 5: Demographics:

Finally, we have a few short questions that will help us ensure we receive feedback from a diverse group of people.

After this last section, we will confirm your address to send you the [\$xx] as a token of appreciation for your participation.

AL48 BirthYear: [M]
What is your birth year?
Year of birth
[INTEGER; 1925-2005]
AL49 Ethnicity [M]
Are you of Latino or Hispanic ethnicity?
Select all that apply.
 a. No, not Hispanic/Latino [Do not allow with other selections] b. Yes, Central American c. Yes, South American d. Yes, Caribbean e. Yes, Mexican f. Yes, Other Hispanic

[VARIABLE CODING]

[EthnicityNotHisp]

[EthnicityCAM]

[EthnicitySA]

[EthnicityCarribean]

[EthnicityMexican]

[EthnicityOtherHisp]

AL50 Race [M]

What is your racial background?

Select all that apply.

- a. African-American, Black, African
- b. American Indian, Native American, Alaskan Native
- c. Asian [If selected, branch out to options below NH50a]

[AL50a RaceAsian]

- a. Filipino
- b. Chinese
- c. South Asian (e.g., Indian, Pakistani)
- d. Southeast Asian (e.g., Vietnamese, Malaysian)
- e. Other Asian
- d. Native Hawaiian or Pacific Islander
- e. Middle Eastern or North African
- f. White/European
- g. Other____

[VARIABLE CODING] [RaceAA] [RaceAsianFilipino]

[RaceNative] [RaceAsianChinese]

[RaceAsian] [RaceAsianSA]

[RaceNHPI] [RaceAsianSEA]

[RaceMENA] [RaceAsianOther]

[RaceEA]

[RaceOther]

AL51 WhereBorn [Partial M]

Where were you born?

- 1. In a U.S. state or D.C (drop-down state list) [GO TO AL54] [M]
- 2. In a U.S. territory (drop-down territory list) [GO TO AL54] [R]
- 3. Outside the United States (Specify country) _____ [GO TO AL52] [R]

[VARIABLE CODING]

[WhereBornState]

[WhereBornOutside]

[WhereBornTerritory]

AL52 LiveUS [R]			
[Display AL52 if AL51 = 3 (outside the US)] What year did you come to live in the United States?			
Year			
[ALLOW 4 DIGITS]			
AL53a Citizenship [R]			
[Display AL53a if AL51 = 3 (outside the US)]			
Are you a citizen of the United States?			
 Yes, born abroad to U.S. citizen parent(s) Yes, U.S. citizen by naturalization (ASK Q6a) No, not a U.S. citizen Prefer not to answer 			
AL53b CitizenYear [R]			
[Display AL53b if AL53a = 2 (by naturalization)]			
In what year did you become a naturalized citizen?			
[ALLOW 4 DIGITS]			

AL54 Worry [R]

Regardless of your own immigration or citizenship status, do you ever worry that you or a family member could be detained or deported?

- 1. Yes
- 5. No
- 9. Prefer not to answer

AL56 Sex [M]

Do you think of yourself as:

- 1. Male
- 2. Female
- -9. Prefer not to answer

AL57 Service [R]

Have you ever served on active duty in the U.S. Armed Forces, Reserves, or National Guard?

- 1. Never served in the military
- 2. Only on active duty for training in the Reserves or National Guard
- 3. Now on active duty
- 4. On active duty in the past, but not now

AL58 LanguageOther [M]

Do you speak any languages other than English well enough to communicate with residents?

1. Yes [GO TO AL59] 5. No [GO TO AL61]

AL59 Language [R]

[Ask If AL58 = Yes]

What language(s)? Select all that apply.

- 1. Spanish
- 2. Hindi
- 3. French
- 4. Persian/Farsi
- 5. Chinese
- 6. Arabic
- 7. German
- 8. Russian
- 9. Italian
- 10. Hebrew
- 11. Other language; Please specify: _____

[IF AL59 = 11, OPEN SPECIFY]

[VARIABLE CODING] [LanguageSpanish] [LanguageRussian]

[LanguageHindi] [LanguageItalian]

[LanguageFrench] [LanguageHebrew]

[LanguagePersian] [LanguageOther]

[LanguageChinese]

[LanguageArabic]

[LanguageGerman]

AL61 Disability [R]

Do you identify as a person with a disability?

- 1. Yes
- 5. No
- 9. Prefer not to answer

AL62 AgeHHPeople [M]

Not counting yourself, how many other people in your household are the following ages? Only count people who normally stay with you for at least 2 nights per week. If no one of that age lives in your household, please enter "0".

1. Children, age 17 or younger: 2. Adults, age 18-64 years: 3. Adults, age 65 and older:			
[INTEGER, RANGE 0-99 FOR ALL]			
[VARIABLE CODING]	[HHChildren] [HHAdults]	[HHAdults65]	

AL63 FamDisability [R]

Do you have responsibility for assisting or caring for any adult family members who need help because of a condition related to aging or a disability? Do not include paid positions.

1. Yes

5. No

Thank you for your time. These are all questions that we have for you today.