

Health Care Continuity and Trust Form Instructions (HCT)
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I. General Instructions

The health Care Continuity and Trust Form (HCT) is completed by trained interviewers during the flexible component of the Exam 3 Clinic visit. The interviewer must be certified and have working knowledge of the document “General Instructions for Completing Paper Forms” prior to completing this form. ID, Contact Year and Name are completed as described in the document. Initiate the form by reading the script at the beginning of the form as printed.

II. Specific Instructions

1. This item measures enabling factors by determining whether the participant has an established or usual place to go to when sick. When reading the question, emphasis should be placed on “usually”. The term ‘sick’ refers to a health problem, an illness or the need for a test or treatment. If the participant answers “No” to this item, go to item 4. Ask items 2-7 only if the participant answers “Yes” to item 1.
2. This item provides information about the type of place that the participant uses when s/he is sick or has a question regarding health care. Read the item and responses marking the one selected by the participant. Definitions of the response categories are offered only if the participant requests clarification.

Walk-in Clinic

An out-patient medical facility which will accept “walk-in” appointments. The clinic does not schedule clinic appointments and does not provide clients with a regular health care provider. The clinic may be privately operated or may be part of a hospital. The clinic may or may not be located in the participant’s neighborhood.

HMO

An out-patient medical facility which is operated by a health maintenance organization in which a group of physicians and/ or nurse practitioners are organized to provide preventive and curative care.

Hospital Clinic

An out-patient medical facility which is a part of a hospital. The person may see which ever physician or nurse practitioner available or may have a regularly assigned health care provider.

Neighborhood health center	An out-patient medical facility which is <u>located in the participant's neighborhood</u> . The clinic will accept scheduled as well as "walk in" appointments. The person may see whichever physician or nurse practitioner available or may have a regularly assigned health care provider.
Hospital Emergency Room	A medical care facility in a hospital which is designed to provide emergent medical care, but can also provide follow up care to individuals who have no other source of medical care.
Public Health Department Clinic	An out-patient medical facility which is operated by the public health department. The participant usually go to this clinic for a specific problem such sexually transmitted disease or well-baby care.
Company/Industry Clinic	An out-patient medical facility which is operated by the participant's employer. The clinic will accept scheduled as well as "walk-in" appointments. The person will see a physician or nurse practitioner who has been hired to care for patients in the clinic.
Doctor's Office	An out-patient medical facility which may be located near a hospital but is not affiliated with the hospital. The physician or nurse practitioner is responsible for overseeing a client's medical care.

If the participant does not know the type of place that s/he usually goes to, but does know by the name, write the name and street address on the appropriate lines, then look up the facility code later. Using the Jackson area Material Facilities Code List, enter the facility code.

3. This item assesses one dimension of participant satisfaction with health care by gathering information regarding how much the participant trusts the health professional who provides his or her health care. Read the response categories slowly so that the participant will have time to respond.
- 4-7. These set of questions assesses how well the participant trust his/her health care provider, health care system, and health insurance plan.

These next three (3) items are intended to update items on health care access from the Home Induction Interview in the Exam 1 data collection cycle. Use response cards as indicated to make responses easier for the respondents.

8. This item is intended to assess the last time the respondent has seen a health care provider for treatment of a medical problem. Hand respondent the appropriate response

card and record as responded.

9. This item is intended to assess the last time the respondent has seen a health care provider for routine health care-physical exam or checkup, that is when s/he was not sick or had a health condition. Hand respondent the appropriate response card and record as responded.
10. This item is intended to assess the level of difficulty in attaining health care services when needed. Record level of difficulty as responded.

III. Administrative information

11. Enter the date of the data collection using leading zeroes as needed.
12. Enter the method of data collection whether on computer or paper form.
13. Enter where data was collected whether in clinic or off site.
14. Enter the 3 digit JHS interviewer code of the person completing the form.