INSTRUCTIONS FOR INTERVIEWERS

➢ When conducting this interview, read only lowercase text aloud to the respondent.

➢ Throughout the survey, instructions for interviewers are provided in BOLDED CAPITAL letters. Words appearing in bolded capital letters are meant to guide the interviewer and should not be read aloud to the respondent.

➢ Instructions written in lowercase letters are meant to guide the respondent and, therefore, should be read aloud to the respondent.

➢ It is important to read questions in their entirety and exactly as written.

➢ Question numbers should not be read to the respondent.

➢ Many of the survey questions consist of two parts: i) a question about an aspect of Veteran specific care, and ii) a question that provides the response categories and asks the respondent to choose one of those categories (e.g., see question V2). In such cases, read aloud to the respondent both parts of the question as written. It is important to read all of the answer choices before pausing for a response.

➢ For yes/no questions, the answer categories should not be read aloud. As a result, the answer categories for yes/no questions are not written into the question (e.g., see question V1).

➢ The interviewer will often need to insert specific information into the survey questions. For example, the patient’s name often needs to be inserted into questions. The interviewer will know to substitute specific information when a word written in CAPITAL letters is enclosed in brackets [ ] within the question.

   EXAMPLE: How often did [PATIENT’S] combat related stress make [HIM/HER] uncomfortable? Would you say always, usually, sometimes, or never?
   READ AS: How often did Mr. Smith’s combat related stress make him uncomfortable?

➢ Read questions as they are written. The interviewer should not provide a definition or clarification to the respondent. If the respondent has trouble answering the question or chooses more than one answer category, explain that he or she should choose the one answer category that best describes the patient’s or his/her experience. Then, re-read the question. Never re-phrase a question because doing so may introduce bias into the survey results.

➢ After a respondent chooses an answer category, clearly mark the box [☑] that corresponds to that answer. For write-in and open-ended answers, mark the corresponding box [☑] and record the information as stated by the respondent.
Based on the answer to Question V3, it sometimes is logical to skip subsequent questions. You will see an arrow behind several of the answer categories with an instruction that tells you what question to go to next. If a respondent chooses one of these answer categories, mark the corresponding box [X] and then move on to the question number indicated after that answer category.

**Example:** V3. Some Veterans near the end of life re-experience the stress and emotions that they had when they were in combat. Did this happen to [PATIENT]?

- [ ] YES
- [ ] NO → **Go to Question V4**
- [ ] Not sure → **Go To Question V4**
- [ ] Patient did not experience combat → **Go To Question V4**
- [ ] No Answer

**Action:** If the respondent chooses “NO”, “Not sure”, or “Patient did not experience combat”, mark the box corresponding to the response and then skip to question V4. The answer categories for questions V3a and V3b will be left blank.

Sometimes a respondent will say that he or she does not know the information needed to answer a question. If “Not sure” is listed as a response category for that question (e.g., see question V1), then mark the corresponding box [X] and follow any instructions indicated after the “DON’T KNOW” category. If “Not sure” is not listed as one of the response categories for that question, then mark the box [X] corresponding to “NO ANSWER” and follow any instructions indicated after the “NO ANSWER” category.

For all questions asked of the respondent during the interview, record the respondent’s answer, even if that answer does not correspond with information from the medical record.

Be sure to familiarize yourself with the survey questions before conducting interviews.
INTRODUCTORY STATEMENT- BEGIN BY READING THIS INTRODUCTION TO RESPONDENT:

Hello, my name is [NAME] and I am calling on behalf of [NAME OF HOSPICE]. Please accept our deepest sympathy for the loss of [PATIENT]. I’m calling today because the hospice is very interested in getting your feedback about your experience and [PATIENT’S] experience while [HE/SHE] was receiving care from [NAME OF HOSPICE]. I have a few questions specifically about the care provided to [PATIENT] because [HE/SHE] was a Veteran. Your answers to these questions will help to ensure that the hospice is providing the highest quality of care to the Veterans we serve. Is this a good time for me to ask you a few questions?

☐ YES → IF YES, CONTINUE WITH THE EXPLANATORY TEXT AND SURVEY
☐ NO, BECAUSE IT IS NOT A CONVENIENT TIME → ASK THE RESPONDENT WHEN WOULD BE A GOOD TIME FOR YOU TO CALL BACK; SET A DATE AND TIME FOR THE RETURN CALL
☐ NO, BECAUSE THE PERSON DOES NOT WANT TO PARTICIPATE IN THE SURVEY → END THE INTERVIEW BY THANKING THE PERSON FOR HIS OR HER TIME

Please answer the questions based on your experience and [PATIENT’S] experience while under the care of [HOSPICE]. Your answers are completely confidential.

❖ VETERAN SPECIFIC QUESTIONS ❖

At the time of admission to hospice, we noted that the patient was a Veteran. Please help us improve the care we provide to Veterans by answering the following questions.

V1) Did someone ask [PATIENT] about [HIS/HER] military service and experiences? (For example, which branch of the military he/she served in or his/her dates of service?)

☐ Yes
☐ No
☐ Not sure
☐ No answer

V2) How often did the hospice staff take the time to listen to [PATIENT’S] stories and/or concerns related to [HIS/HER] military experience? Would you say always, usually, sometimes, never, or not sure?

☐ Always
☐ Usually
☐ Sometimes
☐ Never
☐ Not sure
☐ Patient did not talk to hospice staff about his/her military experience
☐ No Answer

V3) Some Veterans near the end of life re-experience the stress and emotions that they had when they were in combat. Did this happen to [PATIENT]?

☐ Yes
☐ No → Go To Question V4
☐ Not sure → Go To Question V4
☐ Patient did not experience combat → Go To Question V4
☐ No Answer
V3a) How often did [PATIENT’S] combat related stress make [HIM/HER] uncomfortable? Would you say always, usually, sometimes, or never?

☐ Always
☐ Usually
☐ Sometimes
☐ Never
☐ Not sure
☐ No Answer

V3b) How much help did [PATIENT] receive in dealing with [HIS/HER] emotions related to combat related stress? Would you say less than was wanted, just the right amount, or more than [PATIENT] wanted?

☐ Less than was wanted
☐ Just the right amount
☐ More than patient wanted
☐ Not sure
☐ No Answer

V4) Would it have been helpful to have more information about VA benefits for surviving spouses and dependents?

☐ Yes
☐ No
☐ No Answer

V5) Would it have been helpful to have more information about VA burial and memorial benefits?

☐ Yes
☐ No
☐ No Answer

V6) Did [PATIENT] receive health care from the VA? Would you say;

☐ Yes, [HE/SHE] wanted to get care from the VA and was eligible
☐ No, [HE/SHE] wanted to get care from the VA but was not eligible
☐ No, [HE/SHE] never tried to get care from the VA
☐ I’m not sure
☐ No Answer

CONCLUDING STATEMENT:
Those are all of the questions I have for you. I really appreciate you taking the time to participate in this survey. I know that sometimes it can be difficult to talk about the experience of losing a loved one. Please know that we will use your responses to help improve the quality of care that hospice provides to Veterans and their family members. Thank you again.

END INTERVIEW WITH RESPONDENT