



Section A: Identification Information – Quick Reference

1. Name – Individual's legal name
2. Gender- Mark the appropriate association
3. Birthdate- Enter legal birthdate
4. Assessment Reference Date- The 3-day (calendar days) look back date. If the assessment was occurring on April 7th, the Assessment Reference Date would be April 4th.
5. Address- Physical location of the individual's current residence
6. Phone Number- Enter the Best phone number to contact the individual
7. Reason for the Assessment
 - a. **First assessment**- the initial assessment to determine level of care.
 - b. **Routine assessment**- an assessment that is completed on a consistent schedule confirm that the individual is receiving the appropriate level of care.
 - c. **Return assessment**- after a planned absence the individual returns from the hospital or re-enters the home care system.
 - d. **A significant change in status reassessment**- a reassessment that is completed due to a significantly changed status or condition. Remember: if the individual also had a hospital stay along with the change in condition then the code would be "Return Assessment."
 - e. **Discharge assessment covers last 3 days of service**- An assessment that is completed when a permanent program expects to discharge the individual and a full interRAI HC assessment is completed.
 - f. **Discharge tracking only**- An assessment that is completed when a permanent program expects to discharge the individual and a full interRAI HC assessment is NOT completed.



- g. **Other-** An assessment is being completed as a type of research, community needs, quality assurance or any reason outside the established assessment schedule.
- 8. Primary Language- Mark the appropriate language indicator
- 9. Ethnicity Hispanic or Latino-Mark the appropriate indicator
- 10. Race- Mark the most appropriate indicator. Remember: you must mark a yes or no in all sections of race.
- 11. Residential/Living Status at time of assessment- This shall be recorded as the permanent living situation. This is to exclude temporary living situations that are implemented until in-home services can begin.
- 12. What was the outcome when the individual was offered a Voter Registration form-Mark the correct indicator of the individuals response.