

**A1005. Ethnicity**

Are you of Hispanic, Latino/a, or Spanish origin?

**Check all that apply**☐**A.** No, not of Hispanic, Latino/a, or Spanish origin☐**B.** Yes, Mexican, Mexican American, Chicano/a☐**C.** Yes, Puerto Rican☐**D.** Yes, Cuban☐**E.** Yes, another Hispanic, Latino/a, or Spanish origin☐**X.** Resident unable to respond☐**Y.** Resident declines to respond

A1005: Ethnicity (cont.)



Item Rationale

- *The ability to improve understanding of and address ethnic disparities in health care outcomes requires the availability of better data related to social determinants of health, including ethnicity.*
- *The ethnicity data element uses a one-question multi-response format based on whether or not the resident is of Hispanic, Latino/a, or Spanish origin. Collection of ethnic data provides data granularity important for documenting and tracking health disparities and conforms to the 2011 Health and Human Services Data Standards.*
- This item uses the common uniform language approved by the Office of Management and Budget (OMB) to report ethnic categories. *Response choices A1005B through A1005E roll up to the Hispanic or Latino/a category of the OMB standard (see Definition Ethnicity).* The categories in this classification are social-political constructs and should not be interpreted as being scientific or anthropological in nature.
- *Collection of ethnicity data is an important step in improving quality of care and health outcomes.*
- *Standardizing self-reported data collection for ethnicity allows for the comparison of data within and across multiple post-acute-care settings.*
- These categories are NOT used to determine eligibility for participation in any Federal program.
- *For the source of these categories and definitions, see “Racial and Ethnic Categories and Definitions for NIH Diversity Programs and for Other Reporting Purposes, Notice Number: NOT-OD-15-089” available at <https://grants.nih.gov/grants/guide/notice-files/NOT-OD-15-089.html>. Additional information on Data Collection Standards for Race, Ethnicity, Sex, Primary Language, and Disability Status is available at <https://minorityhealth.hhs.gov/omh/browse.aspx?lvl=3&lvlid=53>.*

DEFINITION**ETHNICITY****HISPANIC OR LATINO/A**

A person of Cuban, Mexican, Puerto Rican, South or Central American or other Spanish culture or origin regardless of race. The term “Spanish Origin” can be used in addition to Hispanic or Latino/a.

A1005: Ethnicity (cont.)



Steps for Assessment: Interview Instructions

1. Ask the resident to select the category or categories that most closely correspond to *their* ethnicity from the list in A1005.
 - Individuals may be more comfortable if this question *is* introduced by saying, “We want to make sure that all our residents get the best care possible, regardless of their ethnic background. We would like you to tell us your ethnic background so that we can review the treatment that all residents receive and make sure that everyone gets the highest quality of care” (Baker et al., 2005).
2. If the resident is unable to respond, *the assessor may* ask a family member, significant other, *and/or guardian/legally authorized representative*.
3. *Ethnic* category definitions are provided only if requested in order to answer the item.
4. Respondents should be offered the option of selecting one or more *ethnic* designations.
5. Only *use medical record documentation to code A1005, Ethnicity* if the resident is unable to respond and no family member, significant other, *and/or guardian/legally authorized representative provides a response for this item*.
6. *If the resident declines to respond, do not code based on other resources (family, significant other, or guardian/legally authorized representative or medical records).*

Coding Instructions

Check all that apply.

- *If the resident provides a response, check the box(es) indicating the ethnic category or categories identified by the resident.*
- **Code X, Resident unable to respond:** *if the resident is unable to respond.*
 - *In the cases where the resident is unable to respond and the response is determined via family, significant other, or legally authorized representative input or medical record documentation, check all boxes that apply, including X. Resident unable to respond.*
 - *If the resident is unable to respond and no other resources (family, significant other, or legally authorized representative or medical records) provided the necessary information, code A1005 as X. Resident unable to respond.*

A1005: Ethnicity (cont.)



- **Code Y, Resident declines to respond:** if the resident declines to respond.
 - When the resident declines to respond, code only Y. Resident declines to respond.
 - When the resident declines to respond do not code based on other resources (family, significant other, or legally authorized representative or medical records).

Examples

1. Resident R is admitted following an acute cerebral vascular accident (CVA) with mental status changes and is unable to respond to questions regarding their ethnicity. Their spouse informs the nurse that Resident R is Cuban.

Coding: A1005 would be coded as D. Yes, Cuban and X. Resident unable to respond.

Rationale: If Resident R is unable to respond but their family, significant other, or legally authorized representative provided the response, code both that response and X. Resident unable to respond.

2. Resident K is admitted following a total hip arthroplasty and declines to respond when asked their ethnicity.

Coding: A1005, Ethnicity would be coded as Y. Resident declines to respond.

Rationale: If a resident declines to respond to this item, code only Y. Resident declines to respond. Do not use other resources (family, significant other, or legally authorized representative or medical record documentation) to complete A1005, Ethnicity when a resident declines to respond.

