

# Regional Partnership Grantee Performance Measurement and Data System – DATA DICTIONARY

Prepared for the Office on Child Abuse and Neglect, Children's Bureau,

Administration on Children, Youth and Families

by Center for Children and Family Futures (CCFF)
and its subcontractors

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## DATA DICTIONARY FOR REGIONAL PARTNERSHIP GRANT PROGRAM (RPG) PERFORMANCE MEASUREMENT AND DATA SYSTEM

#### I. Introduction

#### Background

The authorizing legislation governing the multi-year Regional Partnership Grant (RPG) Program required that a set of performance indicators be established to periodically assess the outcomes of the grantees in improving the safety, permanency and well-being of children affected by methamphetamine or other substance abuse. The final set of RPG performance indicators was approved by the Administration for Children and Families (ACF), Children's Bureau and disseminated to the 53 funded grantees in January 2008. It includes a total of 23 indicators across four outcome domains: child/youth (9 indicators), adult (7 indicators), family/relationship (5 indicators), and regional partnership/service capacity (2 indicators). It also includes a core set of child and adult demographic elements that will provide important context needed to properly analyze, explain and understand the outcomes.

A web-based RPG Data Collection and Reporting System (the RPG Data System) will be developed by September 2008 to 1) collect and store grantees' indicator data on specific children, adults and families; 2) provide a standardized format to report process data; and 3) provide a format and reporting system for grantees' semi-annual progress report information on their activities and progress toward goal achievement. Overall, the RPG Data System will provide the data to be analyzed by the RPG Support Contract (RPG SC) Project Team to generate the indicator data reports and assessment of RPGs' performance that will be reported to Children's Bureau and Congress.

This RPG Data Dictionary is intended to help facilitate grantees' data collection and reporting of the final set of indicators to the RPG Data System. It includes comprehensive specifications for the indicator definitions and a more detailed explanation of the specific data elements needed to operationalize each indicator, including definitions, acceptable categories and coding structure, and guidelines for collecting and reporting the data.

The RPG SC Project Team would like to thank the Data System Workgroup members who took time to review and provide feedback on the data dictionary, and for their continued time and commitment to the data system design. Their input and feedback was valuable in clarifying certain data elements and definitions, and in helping to develop a system that will meet the varied needs of the grantees, Children's Bureau and the RPG SC Project Team. Attachment A contains a list of the Workgroup members.

#### Organization of RPG Data Dictionary

Following this introduction, a description of all the data elements is listed in a summary table in Section II of the RPG Data Dictionary. This summary table includes additional information, such as the data type and length, the defined values associated with each data element and the corresponding indicator(s) for which the data element is needed. The number of data elements collected by each grantee will vary depending on their final list of Federal Project Officer (FPO)-approved indicators (i.e., not all grantees will be reporting on all 23 indicators and therefore not required to collect and report all data elements).



Thus, each grantee will have a customized data plan created according to their FPOapproved final set of indicators. A data element will not be included in your data plan if you are not collecting case level data for the indicator(s) that use that data element.

The data plan will instruct the RPG Data System as to which indicators and data elements the grantee is planning to submit. For grantees serving different populations, either through multiple sites or the implementation of multiple program strategies, and applying different indicators to these different populations (e.g. families with children in out-of home care versus children residing at home), the data plan will also clarify which indicators apply to which populations. In addition, a separate data plan will be created for comparison group data.

Section III of the RPG Data Dictionary explains how each indicator will be calculated using the designated data elements (i.e., the metric calculation) and important information (definition, description) of each indicator.

To minimize grantee data collection and reporting burden, many of the data elements are already being collected by counties and States and submitted to the major Federal data and outcome monitoring systems such as the Adoption and Foster Care Analysis and Reporting System (AFCARS), the National Child Abuse and Neglect Data System (NCANDS), the Treatment Episode Data Set (TEDS) and the National Outcome Measures (NOMs).

Most child welfare data elements included in the performance measures can be found in a State's automated case management system, which is often a Federally-funded Statewide Automated Child Welfare Information System (SACWIS). These automated case management systems track individual families and children and then submit data to the two Federal child welfare reporting systems: AFCARS, which reports information on all children in foster care, and NCANDS, which reports information on State child maltreatment reports. States are required to submit AFCARS data semi-annually to ACF. The AFCARS reporting periods are October 1 through March 31 and April 1 through September 30. Data for each report period are due no later than May 15 and November 15, respectively. States submit NCANDS data (voluntarily) once a year; March 30 is the targeted deadline for submission.

TEDS data are collected by State substance abuse agencies according to their own systems for monitoring substance abuse treatment admissions. TEDS includes client level admission and discharge data; admission data is comprised of a Minimum Data Set and Supplemental Data Set. A State may call their TEDS system by a different name. For data elements that are also reported for AFCARS, NCANDS or TEDS, the RPG Data Dictionary specifies the variable name as it appears in that Federal data system for easier reference. Where possible, the variable name for the RPG Data System is the same as the corresponding Federal system.

Much of the information presented in the RPG Data Dictionary should be familiar to grantees, as it builds on and is a detailed expansion of Appendix A: Detailed Summary Table of Final Set of Regional Partnership Grant Program Performance Indicators from the Regional Partnership Grantee Performance Measurement System – Recommended Final Set of Indicators and Draft Data Collection and Reporting System Design, Summary Report for Grantees, which grantees

<sup>&</sup>lt;sup>1</sup> The data are typically collected during the treatment intake interview with the client using State-specific administrative forms to record the information. The data are transformed to the TEDS data elements according to an approved protocol. The data are then transmitted monthly or quarterly to a SAMHSA contractor for processing, editing, updating, and producing final files.



received earlier this year. However, based on discussions with and feedback from the Data System Workgroup, extensive follow-up discussions among the RPG SC Project Team and Children's Bureau, and grantee feedback during and after the July 1-2 Annual Grantee Meeting, it was necessary to revise and clarify the specifications for some of the data elements. Attachment B highlights key changes made to the data elements.

#### **Brief Overview of Submission of Data**

It is important to note that the data being collected and reported for the RPG program is quite complex. For instance, the data must link children and adults together as a family unit and follow clients served over the course of the grant project. It must also capture repeat child maltreatment incidents, foster care reentries for children, and substance abuse treatment readmissions for adults. As a result, the data elements must be reported to a relational database where multiple incident records may be linked to a single child or adult record. A relational database tends to require more programming assistance to implement, but is less prone to error and helps reduce data duplication.

Macro International has designed an XML Schema to standardize the data being uploaded to the RPG Data System. The XML Schema file acts as a guide to help grantees assemble their data in a form that can be validated prior to submission. Non-conforming data thus can be detected and corrected prior to the upload process. The XML Schema file will be customized to a grantee's specific data plan so as to require only data called for by that plan. For variables that may repeat over time (e.g., maltreatment cases, substance abuse treatment admissions), grantees will, however, need to have the capacity to record multiple incidents in the database they are using to collect and store their project information prior to converting and uploading it to the RPG Data System. Mainstream data tools (SQL, Oracle, Access, Excel, etc.) generally have some ability to export their relational data in an XML format. Grantees may need to do some additional processing to bring their data into conformity with their XML Schema. The Macro International team will be available to provide technical assistance to grantees as needed and in various forms (e.g., step-by-step instructions, online demonstrations with Q & A, tutorials, telephone and email assistance) to help grantees prepare their data for submission. Another advantage of using XML Schema is that it works with Microsoft Access and Excel and can be used to set up a customized Access database. This function may be useful for grantees that have not yet developed a local database. Again, Macro International will be available to work with these grantees to develop and customize an Access relational database for their local use.

Beginning in year two, grantees will submit a data file every six months with their required data elements, based on their FPO-approved final set of indicators. The submission of the data is aligned with the required Grantee Semi-Annual Progress Reports, which are due April 30 and October 31 of each year. Grantees may submit their data at the same time as the Semi-Annual Progress Reports, but no later than six weeks after the Semi-Annual Progress Reports are due (i.e., no later than June 15 and December 15 of each year). These twice-yearly data submissions will include the entire current record for all of a grantee's cases to date. At the end of the given reporting period, that particular set of data will be "locked," and grantees will enter/upload a new complete data file for the next reporting period. In short, at the end of each reporting period, grantees are submitting a complete and cumulative history of all cases, not just new additions and changes that may have transpired in those six months.

The RPG SC Project Team then will review the data for any major problems or glitches, followup as needed with grantees to resolve these issues, and conduct appropriate analyses and



prepare required data reports for the Children's Bureau and/or Congress. It is anticipated that these reports will provide information such as an overview of the various activities and overall status of the grants; a demographic profile of the children and adults being served; performance data for each of the four domains, by indicator; and, to the extent possible, analysis and discussion of the relationship between the performance data and RPG program strategies and interventions (e.g., do certain strategies seem to be more likely to result in positive outcomes). Grantees' Semi- Annual Progress Reports will also be a source of information for these reports. The RPG Data System will have selected reporting functions built into it to enable grantees to generate certain reports for their own use.

### II. Description and Specification of Data Elements

The summary table below provides a brief description of each of the required data elements needed to calculate the outcome measures, as well as the core demographic elements that will be used to properly analyze, explain and understand the outcomes. The table includes:

- The data (or demographic) element
- The variable name. Where possible, for data elements that States already collect and report to the major Federal data and outcome monitoring systems (e.g., AFCARS, NCANDS, TEDS), the variable name for the RPG Data System is the same as it appears in the corresponding Federal data system.
- A brief definition or description of the data element
- The data type and length (e.g., date, numeric, character)
- The defined values associated with each data element. Where possible, for data elements that States already collect and report to the major Federal data and outcome monitoring systems (e.g., AFCARS, NCANDS, TEDS), the values are the same as they appear in the corresponding Federal data system. In some cases, however, values are not coded the same across these existing data systems (e.g., unknown or missing may be coded as 9 in AFCARS, but 99 in TEDS). As a result, values for certain common labels may differ slightly across RPG Data System.
- Permissible data entry values
- The corresponding performance measure(s) for which the data element is needed.
  Those marked as N/A (Not Applicable) typically pertain to data elements that will be
  used for data system administrative purposes or for contextual/background information
  when the RPG SC Project Team conducts data analyses and prepares reports for the
  Children's Bureau and/or Congress.
- The existing administrative data systems from which the data elements can be drawn (e.g. a State's SACWIS/child welfare case management system or substance abuse treatment reporting system), and if applicable, the specific variable name and number as it appears in the Federal reporting data system to which it is submitted. It is anticipated that grantees will collect the demographic data elements during routine RPG program intake procedures. However, in certain cases, some of the demographic data elements may be available from a State's existing child welfare or substance abuse treatment system and this data source is therefore listed as a possible option.



The data elements in the table are organized generally according to those that are demographic and basic client information, those needed to calculate the child performance measures, those needed to calculate the adult performance measures, and those needed to calculate the regional partnership/service capacity performance measures.

A special note is warranted for five of the indicators: *C9. Improved Child Well-being, A7. Adult Mental Health Status, F1. Parenting, F2. Family Functioning and Relationships, and F3. Risk/Protective Factors.* Data systems currently in State and county-level child welfare and substance abuse treatment systems do not include standardized data elements to measure these concepts. Rather, these outcomes are measured using standardized tools and instruments that are selected as appropriate for a specific grantee's programmatic approaches and target population being served. (For example, there is variance in instrumentation regarding child well-being based on the developmental status and age of a child, as well as the programmatic approach).

Grantees will report data on these indicators (if included in a grantee's final set of FPO-approved indicators) by submitting data from the finalized set of instruments included in their evaluation plan. Data collected by grantees will be defined according to the appropriate standardized tool or instrument they have selected for their target population(s) and program model; therefore, specific data elements may vary across grantees. However, grantees using the same instrument will submit those data in the same format. As each grantee finalizes their selection of instruments and the estimated number of children and/or adults who will be administered each instrument, the RPG SC Project Team will work with grantees to establish the most suitable method for grantees to submit these data to the Children's Bureau (e.g., whether grantees enter the data into the RPG Data System, include it in their Semi-Annual Progress Report, or submit in some other manner acceptable to the Children's Bureau and grantees). The number of grantees who are using a particular tool will be considered in making this recommendation to the Children's Bureau. The narrative descriptions of these indicators in Section III of this Data Dictionary highlight some of the data collection tools/instruments that grantees indicated they plan to use or are considering using to measure a given indicator.

In addition, data elements are not currently specified for indicators *F4. Coordinated Case Management and F5. Substance Abuse Education and Training for Foster Care Parents and Other Substitute Caregivers.* Grantees reporting on one or both of these indicators will include these data in their Grantee Semi-Annual Progress Report, Section B. Partnership and Client Data. (A revised outline of the Semi-Annual Progress Report reflecting these changes will be disseminated to the grantees.)



Data Element	Variable Name	Definition/Description	Data Type and Length	Values Descriptions/ Labels	Permissible Values	Indicator(s) Data Element Needed For <sup>2</sup>	Existing State Data System Option, if applicable (not required source) <sup>3</sup>			
DEMOGRAPHIC A	ND BASIC	CLIENT INFORMATION								
The majority of these data elements will be used as context in conducting and reporting data analyses or (in the case of unique identifiers) for data system administrative purposes. It is anticipated that grantees will collect the demographic data elements during routine RPG program intake procedures. However, in certain cases, some of the demographic data elements may be available from a State's existing child welfare or substance abuse treatment system and this data source is therefore listed as a possible option.										
1. Grantee ID	RPGID	This unique identifier for each Regional Partnership Grantee is your Grants Management number assigned to you by the Children's Bureau (it is included on all funding correspondence you receive from the Children's Bureau).	String (8)	Each number begins with 90CU and is followed by four digits ranging from 0001 to 0053.	Grants Management Number: 90CU0001 – 90CU0053	N/A				
1A. Data Plan ID	PLANID	This is a reference to your Data Plan number that appears in the RPG Data System. It is used by the system to tie uploaded data files to the specific treatment, comparison and/or control data plan created by the grantee.	String (2)	2-digit data plan identifier as it appears in the RPG Data System: 01 = Data Plan 1 02 = Data Plan 2 etc. (depending on the number of your data plans)	>=01	N/A				
1B. Site ID (applicable to select grantees)	SITEID	Those grantees that are providing RPG services in multiple sites or to multiple populations and want or need to distinguish further between each site or population, within a single data plan, can use this unique identifier for each site/population. This variable will not necessarily apply to all grantees and can be used at a grantee's discretion.	String (10)	The SITEID can be any convenient string of characters you want, provided it is no more than 10 characters long and it is a unique identifier.	Enter unique identifier that is <=10 characters	N/A				

<sup>&</sup>lt;sup>2</sup> Those data elements marked as N/A (or not applicable) typically pertain to those data elements that will be used for data system administrative purposes or for contextual/background information when conducting data analyses and preparing reports.

<sup>&</sup>lt;sup>3</sup> It is anticipated that grantees will collect the demographic data elements during routine RPG program intake procedures. However, in certain cases, some of the demographic data elements may be available from a State's existing child welfare or substance abuse treatment system and this data source is therefore listed as a possible option.



	Data Element	Variable Name	Definition/Description	Data Type and Length	Values Descriptions/ Labels	Permissible Values	Indicator(s) Data Element Needed For <sup>2</sup>	Existing State Data System Option, if applicable (not required source) <sup>3</sup>
2.	Case ID	CASEID	A unique identifier the RPG uses to identify a case. Within each case, there will be both children and adults. Each child and adult will be distinguished separately (see Child ID and Adult ID data elements below).  The case ID does not contain personal identifying information. It must contain 6 digits without dashes between digits.  The Case ID should remain the same, regardless if the family has more than one episode of care/services with the RPG program	String (6)	The first digit reflects the project year the family started in the RPG program:  1 = Year 1 (10/01/2007 to 09/30/2008)  2 = Year 2 (10/01/2008 to 09/30/2009)  3 = Year 3 (10/01/2009 to 09/30/2010)  4 = Year 4 (10/01/2010 to 09/30/2011)  5 = Year 5 (10/01/2011 to 09/30/2012)  9 = Comparison group The last five digits represent the case number (e.g., 00001 would be first case served by the RPG in a given year).	>=100001	N/A	
3.	Child ID	CHILDID	Unique case identifier assigned to each child within a case and named in the petition or living in the household.  The CASEID variable will serve as the prefix for the Child ID. The last two characters simply designate the number of the child associated with the case (C1, C2, C3, etc.). If there are multiple children, enter oldest to youngest.  The Child ID should remain the same, regardless if he/she has more than one episode of care/services with the RPG program.	String (8)	The first 6 digits are the Case ID. The last 2 characters indicate what number child he/she is in the case; if multiple children, enter oldest to youngest) C1=Child #1 associated with case C2=Child #2 associated with case C3=Child #3 associated with case C4=Child #4 associated with case C5=Child #5 associated with case C5=Child #5 associated with case etc.	Enter valid ID	N/A	



	Data Element	Variable Name	Definition/Description	Data Type and Length	Values Descriptions/ Labels	Permissible Values	Indicator(s) Data Element Needed For <sup>2</sup>	Existing State Data System Option, if applicable (not required source) <sup>3</sup>
4.	Index Child	CINDEX	Indicates whether given child is index child or not. The index child is any child listed in the child welfare case (the child or one of the children who were the basis for the abuse report and subsequent referral to the RPG program) or the child(ren) who are the primary focus of the RPG intervention. If there are multiple children in the child welfare case or receiving targeted RPG intervention services (i.e., in-home services), then they would all be considered an index child. If a child is not named in the case or receiving RPG services, they would not be considered an index child.	Char (2)	0 = No 1 = Yes	0, 1	N/A	
5.	Adult ID	ADULTID	Unique case identifier assigned to each parent or caregiver with a substance use disorder who is part of the child welfare or substance abuse treatment case.  The CASEID variable will serve as the prefix (the first six characters) for the Adult ID. The last two characters designate the number of the adult in the case (A1, A2, A3, etc.).  The Adult ID should remain the same, regardless if he/she has more than one episode of care/services with the RPG program.	String (8)	The first 6 digits are the Case ID. The next 2 characters indicate what number adult he/she is in the case: A1=Adult #1 A2=Adult #2 A3=Adult #3 etc.	Enter valid ID	N/A	
6.	Primary Caregiver	APRIMARY	Indicates if the adult is the index child's primary caregiver. In general, a primary caregiver is defined as the person who has consistently assumed responsibility for the housing, health and safety of the child(ren) and who carries out and/or oversees the tasks related to the daily lives of the child(ren), which includes caring for their physical, educational, social, emotional and other needs. However, the definition should be considered flexible enough to take into account the diversity of people's lives and family structures. There can be more than one primary caregiver in a family.	Char (2)	0 = No 1 = Yes 99 = Unknown	0, 1, 99	N/A	



	Data Element	Variable Name	Definition/Description	Data Type and Length	Values Descriptions/ Labels	Permissible Values	Indicator(s) Data Element Needed For <sup>2</sup>	Existing State Data System Option, if applicable (not required source) <sup>3</sup>
7.	Adult's Relationship to Child	ARLTNSHP	Indicates the adult's relationship to the index child.	Char (2)	BM = Biological mother BF = Biological father SM = Step mother SF = Step father AM = Adoptive mother AF = Adoptive father FM = Foster mother FF = Foster father PF = Presumptive father GM = Grandmother (maternal or paternal) GF = Grandfather (maternal or paternal) AU = Aunt (maternal or paternal) UN = Uncle (maternal or paternal) SO = Significant Other (unmarried partner of parent/caregiver) OR = Other Relationship — includes other relatives not specified and non-relatives (e.g., godparents, other non-biological caregivers) NK = Relationship not known	Enter valid 2 character code	N/A	
8.	Child Date of Birth	CHBDATE	Month, day and year of the child's birth.  If the date of birth is unknown, enter an approximate date of birth. Use the 15 <sup>th</sup> as the day of birth.	Date (8)	mm/dd/yyyy (lead with 0 – e.g., 01 to 09)	>=01/01/1989	N/A	State child welfare system (for children involved in child welfare) Corresponds to AFCARS #6 Child Birth Date and NCANDS variable CHBDATE
9.	Child Gender	CHSEX	Child's gender	Char (2)	1 = Male 2 = Female 99 = Don't know	1, 2, 99	N/A	State child welfare system (for children involved in child welfare) Corresponds to AFCARS #7 Child Sex and NCANDS variable CHSEX



Data Element	Variable Name	Definition/Description	Data Type and Length	Values Descriptions/ Labels	Permissible Values	Indicator(s) Data Element Needed For <sup>2</sup>	Existing State Data System Option, if applicable (not required source) <sup>3</sup>
	nine the race o	below: In general, a person's race is deter f the child. Indicate all races that apply, see					
10. Child Race – American Indian or Alaska Native	CHRACAI	A person having origins in any of the original peoples of North or South America (including Central America), and who maintains tribal affiliation or community attachment.	Char (1)	0 = No 1 = Yes 9 = Unknown or missing	0, 1, 9	N/A	State child welfare system (for children involved in child welfare)  Can be derived from AFCARS Child Race #8a or NCANDS variable CHRACEAI
11. Child Race – Asian	CHRACAS	A person having origins in any of the original peoples of the Far East, Southeast Asia, or the Indian subcontinent including, for example, Cambodia, China, India, Japan, Korea, Malaysia, Pakistan, the Philippine Islands, Thailand and Vietnam.	Char (1)	0 = No 1 = Yes 9 = Unknown or missing	0, 1, 9	N/A	State child welfare system (for children involved in child welfare)  Can be derived from AFCARS Child Race #8b or NCANDS variable CHRACAS
12. Child Race – Black or African American	CHRACBL	A person having origins in any of the black racial groups of Africa.	Char (1)	0 = No 1 = Yes 9 = Unknown or missing	0, 1, 9	N/A	State child welfare system (for children involved in child welfare)  Can be derived from AFCARS Child Race #8c or NCANDS variable CHRACBL
13. Child Race – Native Hawaiian or Other Pacific Islander	CHRACNH	A person having origins in any of the original peoples of Hawaii, Guam, Samoa or other Pacific Islands.	Char (2)	0 = No 1 = Yes 9 = Unknown or missing	0, 1, 9	N/A	State child welfare system (for children involved in child welfare)  Can be derived from AFCARS Child Race #8d or NCANDS variable CHRACNH



Data Element	Variable Name	Definition/Description	Data Type and Length	Values Descriptions/ Labels	Permissible Values	Indicator(s) Data Element Needed For <sup>2</sup>	Existing State Data System Option, if applicable (not required source) <sup>3</sup>
14. Child Race – White	CHRACWH	A person having origins in any of the original peoples Europe, the Middle East or North Africa.	Char (1)	0 = No 1 = Yes 9 = Unknown or missing	0, 1, 9	N/A	State child welfare system (for children involved in child welfare)  Can be derived from AFCARS Child Race #8e or NCANDS variable CHRACWH
15. Child Race – Unable to Determine	CHRACUD	The specific race category is "unable to determine" if the child is very young or is severely disabled and no person is available to identify the child's race. It is also used if the parent, relative or guardian is unwilling to identify the child's race.	Char (1)	0 = No 1 = Yes 9 = Unknown or missing	0, 1, 9	N/A	State child welfare system (for children involved in child welfare)  Can be derived from AFCARS Child Race #8f or NCANDS variable CHRACUD
16. Child Ethnicity	CHETHN	Identifies child's specific origin, if any; this is separate from Race. Whether or not a person is Hispanic or Latino is determined by how they define themselves or by how others define them. In the case of young children, parents determine the ethnicity of the child. Indicate Yes (1) if the child is of Mexican, Puerto Rican, Cuban, Central or South American origin, or a person of other Spanish cultural origin regardless of race. Indicate Unable to Determine (3) if the child is very young or is severely disabled and no person is available to determine whether or not the child is Hispanic or Latino; or if the parent, relative or guardian is unwilling to identify the child's ethnicity.	Char (1)	1 = Yes – of Hispanic origin 2 = No – not of Hispanic origin 3 = Unable to determine 9= Unknown or missing	1 - 3, 9	N/A	State child welfare system (for children involved in child welfare) Corresponds to AFCARS #9 Hispanic/Latino Origin and NCANDS variable CHETHN
17. Child Prior Abuse Victim	C_PRIOR	Child was prior victim of substantiated/indicated maltreatment that occurred before outreach and engagement in the RPG program (i.e., it was a past incident that is not associated with reasons for involvement in the RPG program).	Char (2)	0 = No 1 = Yes 99 = Don't know	0, 1, 99	N/A	State child welfare system



Data Element	Variable Name	Definition/Description	Data Type and Length	Values Descriptions/ Labels	Permissible Values	Indicator(s) Data Element Needed For <sup>2</sup>	Existing State Data System Option, if applicable (not required source) <sup>3</sup>
18. Adult Date of Birth	ADOB	Month, day and year of the parent or caregiver's birth.  If the date of birth is unknown, enter an approximate date of birth. Use the 15 <sup>th</sup> as the	Date (8)	mm/dd/yyyy (lead with 0 – e.g., 01 to 09)	<=01/01/1988	N/A	State substance abuse treatment system (for those admitted to public treatment)
		day of birth.					Corresponds to TEDS admission variable MDS 8
19. Adult Gender	ASEX	Gender of parent or caregiver.	Char (2)	1 = Male 2 = Female 99 = Don't know	1, 2, 99	N/A	State substance abuse treatment system (for those admitted to public treatment)
							Corresponds to TEDS admission variable MDS 9
		below: In general, a person's race is detention by the panic/Latino is treated as ethnicity and is re					dicate all races that
20. Adult Race – American Indian or Alaska Native	ARACAI	A person having origins in any of the original peoples of North or South America (including Central America), and who maintains cultural identification through tribal affiliation or community attachment.	Char (1)	0 = No 1 = Yes 9 = Unknown or missing	0, 1, 9	N/A	State substance abuse treatment system (for those admitted to public treatment) or State child welfare system (for those adults who were the perpetrators of child maltreatment) Can be derived from TEDS admission variable MDS 10 (value = 01 or 02) or NCANDS variables P1RACAI – P3RACAI
21. Adult Race – Asian	ARACAS	A person having origins in any of the original peoples of the Far East, Southeast Asia, or the Indian subcontinent including, for example, Cambodia, China, India, Japan, Korea, Malaysia, Pakistan, the Philippine Islands, Thailand and Vietnam.	Char (1)	0 = No 1 = Yes 9 = Unknown or missing	0, 1, 9	N/A	State substance abuse treatment system (for those admitted to public treatment) or State child welfare system (for those adults who were the perpetrators of child maltreatment)  Can be derived from TEDS admission variable MDS 10 (value = 13) or NCANDS variables P1RACAS – P3RACAS



	Data Element	Variable Name	Definition/Description	Data Type and Length	Values Descriptions/ Labels	Permissible Values	Indicator(s) Data Element Needed For <sup>2</sup>	Existing State Data System Option, if applicable (not required source) <sup>3</sup>
22.	Adult Race – Black or African American	ARACBL	A person having origins in any of the black racial groups of Africa.	Char (1)	0 = No 1 = Yes 9 = Unknown or missing	0, 1, 9	N/A	State substance abuse treatment system (for those admitted to public treatment) or State child welfare system (for those adults who were the perpetrators of child maltreatment)  Can be derived from TEDS admission variable MDS 10 (value = 04) or NCANDS variables P1RACBL — P3RACBL
23.	Adult Race – Native Hawaiian or Other Pacific Islander	ARACNH	A person having origins in any of the original peoples of Hawaii, Guam, Samoa or other Pacific Islands.	Char (2)	0 = No 1 = Yes 9 = Unknown or missing	0, 1, 9	N/A	State substance abuse treatment system (for those admitted to public treatment) or State child welfare system (for those adults who were the perpetrators of child maltreatment)  Can be derived from TEDS admission variable MDS 10 (value = 23) or NCANDS variables P1RACNH – P3RACNH
24.	Adult Race – White	ARACWH	A person having origins in any of the original peoples Europe, the Middle East or North Africa.	Char (1)	0 = No 1 = Yes 9 = Unknown or missing	0, 1, 9	N/A	State substance abuse treatment system (for those admitted to public treatment) or State child welfare system (for those adults who were the perpetrators of child maltreatment)  Can be derived from TEDS admission variable MDS 10 (value = 05) or NCANDS variables P1RACWH – P3RACWH



Data Element	Variable Name	Definition/Description	Data Type and Length	Values Descriptions/ Labels	Permissible Values	Indicator(s) Data Element Needed For <sup>2</sup>	Existing State Data System Option, if applicable (not required source) <sup>3</sup>
25. Adult Race – Unable to Determine	ARACUD	Indicate "Unable to Determine" if the adult is severely disabled and no person is available to determine his/her race; or if the adult is unwilling to identify his/her race.	Char (1)	0 = No 1 = Yes 9 = Unknown or missing	0, 1, 9	N/A	State substance abuse treatment system (for those admitted to public treatment) or State child welfare system (for those adults who were the perpetrators of child maltreatment) Can be derived from TEDS admission variable MDS 10 (value = 97) or NCANDS variables P1RACUD – P3RACUD
26. Adult Ethnicity	AETHN	Identifies adult's specific origin, if any; this is separate from Race. Whether or not a person is Hispanic or Latino is determined by how they define themselves or by how others define them.  Indicate Yes (1) if the adult is of Mexican, Puerto Rican, Cuban, Central or South American origin, or a person of other Spanish cultural origin regardless of race. Indicate Unable to Determine (3) if the adult is severely disabled and no person is	Char (1)	1 = Yes – of Hispanic origin 2 = No – not of Hispanic origin 3 = Unable to determine 9 = Unknown or missing	1, 2, 99	N/A	State substance abuse treatment system (for those admitted to public treatment) or State child welfare system (for those adults who were the perpetrators of child maltreatment) Can be derived from TEDS admission variable MDS 11 or NCANDS variables PER1ETHN – PER3ETHN
		available to determine whether or not he/she is Hispanic or Latino; or if the adult is unwilling to identify his/her ethnicity.					T ENGETTIN
27. Prior Perpetrator	A_PRIOR	Adult is prior perpetrator of substantiated/indicated child maltreatment that occurred before outreach and engagement in the RPG program (i.e., it was a past incident that is not associated with reasons for involvement in the RPG program).	Char (2)	0 = No 1 = Yes 99 = Don't know	0, 1, 99	N/A	State child welfare system



Data Element	Variable Name	Definition/Description	Data Type and Length	Values Descriptions/ Labels	Permissible Values	Indicator(s) Data Element Needed For <sup>2</sup>	Existing State Data System Option, if applicable (not required source) <sup>3</sup>
28. Education	EDUC	Number of years of school that adult completed at time of entry to RPG program or substance abuse treatment.  Time of entry is when client has the first face-to-face contact or service with the RPG program to formally start his/her record or case file.	Integer (2)	## Enter number of years of school completed. For those with high school diploma or equivalent, use 12 years. For those with bachelor's degree, use 16 years	0 – 25, 99	N/A	State substance abuse treatment system (for those admitted to public treatment) Corresponds to TEDS admission variable MDS 12
29. Employment Status	EMPLOY	Parent or caregiver's employment status at time of entry to RPG program or substance abuse treatment.  Full Time is defined as working 35 or more hours each week; this includes members of uniformed services.  Part Time is defined as working less than 35 hours each week.  Unemployed is defined as not having a job and/or looking for work during the past 30 days.  Not in Labor Force includes individuals who are homemakers, students, disabled, retired or inmates of an institution. Note: Clients identified as Not in Labor Force should be further defined in the next data element Detailed Not In Labor Force (DETNLF).	Char (2)	99 = Refused/ don't know  1 = Full time 2 = Part time 3 = Unemployed 4 = Not in labor force* 99 = Don't know  *Please provide more detailed information for clients coded as Not in Labor Force in data element 32. DETNLF	1-4, 99	N/A	State substance abuse treatment system (for those admitted to public treatment) TEDS admission variable MDS13
30. Detailed Not in Labor Force	DETNLF	This provides more detailed information about those clients whose employment status is coded as Not in Labor Force (see data element EMPLOY).	Char (2)	1 = Homemaker 2 = Student 3 = Retired 4 = Disabled 5 = Inmate of Institution (prison or institution that keeps a person, otherwise able, from entering the labor force) 6 = Other 96 = Not applicable 97 = Unknown 98 = Not collected	1-6, 96-98		State substance abuse treatment system (for those admitted to public treatment) TEDS admission variable SuDS12 (required for NOMs reporting)



Data Element	Variable Name	Definition/Description	Data Type and Length	Values Descriptions/ Labels	Permissible Values	Indicator(s) Data Element Needed For <sup>2</sup>	Existing State Data System Option, if applicable (not required source) <sup>3</sup>
31. Pregnancy Status	PREG	Parent or caregiver's pregnancy status at time of entry to RPG program or substance abuse treatment	Char (2)	0 = Not pregnant 1 = Pregnant 99 = Don't know	0, 1, 99	As core demographic for conducting selected analyses; and for C7	State substance abuse treatment system (for those admitted to public treatment and if State collects supplemental data set)  Corresponds to TEDS supplemental data set variable SuDS 6
32. Living Arrangement	LIVARAG	Parent or caregiver's living arrangement or residential status at time of entry to RPG program or substance abuse treatment	Char (2)	1 = Homeless – clients with no fixed address; includes shelters 2 = Dependent living – clients living in a supervised setting such as a residential institution (including jail/prison), halfway house or group home. 3 = Independent living – clients living alone or with others without supervision 99 = Don't know	1-3, 99	N/A	State substance abuse treatment system (for those admitted to public treatment if State collects supplemental data set) Corresponds to TEDS supplemental data set admission variable SuDS 8 and NOMs.
33. Source of Income/Support	INCOME	Parent or caregiver's primary source of income/financial support at time of entry to RPG program or substance abuse treatment. This should only reflect the income generated by the client. Client income would not include that of a spouse, relative, etc. "Other" income includes alimony, child support, "illegal" income, or other income not specified.	Char (2)	1 = Wages/salary 2 = Public assistance 3 = Retirement/ pension 4 = Disability 20 = Other 21 = None 99 = Unknown	1-4, 20, 21, 99	N/A	State substance abuse treatment system (for those admitted to public treatment and if State collects supplemental data set)  Corresponds to TEDS supplemental data set admission variable SuDS 9



	Data Element	Variable Name	Definition/Description	Data Type and Length	Values Descriptions/ Labels	Permissible Values	Indicator(s) Data Element Needed For <sup>2</sup>	Existing State Data System Option, if applicable (not required source) <sup>3</sup>
34.	Marital Status	MARITAL	Parent or caregiver's marital status at time of entry to RPG program or substance abuse treatment.	Char (2)	1 = Never married 2 = Now married 3 = Separated 4 = Divorced 5 = Widowed 97 = Unknown	1-5	N/A	State substance abuse treatment system (for those admitted to public treatment if a State collects supplemental data set)  Corresponds to TEDS supplemental data set admission variable SuDS 14
35.	Meth Use is Contributing Factor	METHFACT	Indicate, to the best of your ability, whether parent or caregiver methamphetamine use is a contributing factor to the risk of child maltreatment, based on your knowledge of the family and/or any available case record information.  This variable is designed to tell us, more from a child welfare system perspective, if the family has any involvement with methamphetamine (use or production) that is contributing to their open child welfare case or the need for RPG services.  Methamphetamine use may or may not be the foremost reason for a given child welfare decision or action (e.g., the primary reason for removal of the child, the main factor or cause for determining a maltreatment report is substantiated/indicated).  The subjective nature of this data element is understood and acknowledged. However, this data provides important information to supplement data regarding primary substance problem reported at treatment admission and past 30 day use of methamphetamine.	Char (2)	0 = No 1 = Yes 99 = Don't know	0, 1, 99	N/A	
36.	Date file opened with the RPG program	FILE_O	Typically, this date will reflect point in time when client has the first face-to-face contact (intake or admission to RPG) or service with the RPG to formally start his/her record or case file.	Date (8)	mm/dd/yyyy (lead with 0 – e.g., 01 to 09)	>09/30/2007	C1, C2, C3, C7, A1, A6	



Data Eler	nent	Variable Name	Definition/Description	Data Type and Length	Values Descriptions/ Labels	Permissible Values	Indicator(s) Data Element Needed For <sup>2</sup>	Existing State Data System Option, if applicable (not required source) <sup>3</sup>
37. Date file c with the R program		ILE_C	Typically, this date will reflect an act or process for when the RPG closes the person's record (e.g., discharge date from RPG program) because he/she leaves the RPG program for whatever reason (e.g., completion of RPG services, client terminates RPG services, client moves to a different State).	Date (8)	mm/dd/yyyy (lead with 0 – e.g., 01 to 09)	>09/30/2007 This date must be => than the date file opened with the RPG program (RPGFILE_O)	C1 and for contextual/ background information for data analyses and reports	

## SPECIFIC DATA ELEMENTS TO BE USED TO CALCULATE CHILD PERFORMANCE MEASURES

(There are a few additional data elements listed under the data elements to be used to calculate the Adult performance measures which will also be used for indicator C1. Children Remain at Home)

# Not all grantees will collect and report every data element; the number of data elements will depend on the grantee's final set of indicators.

38. Child victim of substantiated/ indicated maltreatment	MALTXVIC	Indicate whether or not this child has been the subject of a substantiated/ indicated case of child maltreatment in the given six-month reporting period.  This determination is based on the final finding or disposition of the maltreatment incident as "substantiated" or "indicated or reason to suspect," as determined by the responsible agency according to your State law. Dispositions of "alternative response victim" are not included here in the definition of substantiated.  If Yes, then for each substantiated incident in the given six-month reporting period, complete all associated data elements (e.g., report date, disposition date, maltreatment type(s), whether child removed from home) for each incident.  If No, then code accordingly and skip	Char (2)	0 = No 1 = Yes	0-1	C1, C2	Can be determined from the grantee's State child welfare system Corresponds to NCANDS variable Maltreatment Report Disposition (RPTDISP). Those records containing a maltreatment disposition level of 1 = substantiated or 2 = indicated or reason to suspect are selected out and counted. The alternative response victim disposition is not included.
		associated data elements.					



Data Element	Variable Name	Definition/Description	Data Type and Length	Values Descriptions/ Labels	Permissible Values	Indicator(s) Data Element Needed For <sup>2</sup>	Existing State Data System Option, if applicable (not required source) <sup>3</sup>
39. Child maltreatment record identifier	MALTXID	Unique identifier assigned to each substantiated/indicated case of child maltreatment for a given child.  Because a given child may experience repeat incidents of maltreatment over the course of his/her involvement in the RPG program, this unique identifier field is needed to identify a particular maltreatment record.	String (10)	The MALTXID can be any convenient string of characters you want, provided it is no more than 10 characters long and it is a unique identifier.	Enter unique identifier that is <=10 characters	N/A (for data system administrat- ive purposes)	
40. Date of maltreatment report	RPTDT	If the child was the victim of a substantiated/indicated child maltreatment report, enter the month, day and year of the report; i.e., the date that the responsible agency was notified of the suspected child maltreatment.	Date (8)	mm/dd/yyyy (lead with 0 – e.g., 01 to 09)	Valid date	C1, C2	State child welfare data system Corresponds to NCANDS variable RPTDT.
41. Date of maltreatment report disposition	RPTDISDT	The month, day and year that a decision was made by the child welfare agency or court regarding the disposition of the report or investigation of alleged child maltreatment.	Date (8)	mm/dd/yyyy (lead with 0 – e.g., 01 to 09)	Valid date	C1, C2	State child welfare data system Corresponds to NCANDS variable RPTDISDT
42. First type of maltreatment	CHMAL1	Indicates the particular form of child maltreatment that is determined by investigation to be substantiated or indicated under State law. This is the first type of maltreatment reported on the child's record.	Char (2)	1 = physical abuse 2 = neglect or deprivation of necessities 3 = medical neglect 4 = sexual abuse 5 = psychological or emotional maltreatment 6 = no alleged maltreatment 8 = other 9 = unknown/missing	1-6, 8, 9	C1, C2	State child welfare data system Corresponds to NCANDS variable CHMAL1



Data Element	Variable Name	Definition/Description	Data Type and Length	Values Descriptions/ Labels	Permissible Values	Indicator(s) Data Element Needed For <sup>2</sup>	Existing State Data System Option, if applicable (not required source) <sup>3</sup>
43. Second type of maltreatment	CHMAL2	Indicates the particular form of child maltreatment that is determined by investigation to be substantiated or indicated under State law. This is the second type of maltreatment reported on the child's record.	Char (2)	1 = physical abuse 2 = neglect or deprivation of necessities 3 = medical neglect 4 = sexual abuse 5 = psychological or emotional maltreatment 6 = no alleged maltreatment 8 = other 9 = unknown/missing	1-6, 8, 9	C1, C2	State child welfare data system Corresponds to NCANDS variable CHMAL2
44. Third type of maltreatment	CHMAL3	Indicates the particular form of child maltreatment that is determined by investigation to be substantiated or indicated under State law. This is the third type of maltreatment reported on the child's record.	Char (2)	1 = physical abuse 2 = neglect or deprivation of necessities 3 = medical neglect 4 = sexual abuse 5 = psychological or emotional maltreatment 6 = no alleged maltreatment 8 = other 9 = unknown/missing	1-6, 8, 9	C1, C2	State child welfare data system Corresponds to NCANDS variable CHMAL3
45. Fourth type of maltreatment	CHMAL4	Indicates the particular form of child maltreatment that is determined by investigation to be substantiated or indicated under State law. This is the fourth type of maltreatment reported on the child's record.	Char (2)	1 = physical abuse 2 = neglect or deprivation of necessities 3 = medical neglect 4 = sexual abuse 5 = psychological or emotional maltreatment 6 = no alleged maltreatment 8 = other 9 = unknown/missing	1-6, 8, 9	C1, C2	State child welfare data system Corresponds to NCANDS variable CHMAL4



Data Element	Variable Name	Definition/Description	Data Type and Length	Values Descriptions/ Labels	Permissible Values	Indicator(s) Data Element Needed For <sup>2</sup>	Existing State Data System Option, if applicable (not required source) <sup>3</sup>
46. Child removed from home	REMOVED	The removal of the child from his/her normal place of residence resulting in his/her placement in a foster care setting (which may be defined by your State as placement in State custody or out-of-home placement). As defined by AFCARS, a removal is either the physical act of a child being taken from his/her normal place of residence, by court order or a voluntary placement agreement and placed in a substitute care setting, or the removal of custody from the parent or relative guardian pursuant to a court order or voluntary placement agreement that permits the child to remain in a substitute care setting.	Char (2)	0 = No 1 = Yes	0-1	C1, C3, C4	
47. Date of latest removal from home	REMOVDT	Month, day and year the child was last removed from his/her home for the purpose of being placed in foster care. This would be the date for the current episode or, if the child has exited foster care, the date of removal for the most recent removal.  Must be the date of the current removal from home (not necessarily the date of case opening).	Date (8)	mm/dd/yyyy (lead with 0 – e.g., 01 to 09)	Valid date Must be <= data element PLACEDT, date of placement in current foster care setting.	C1, C3 – C6	State child welfare data system Corresponds to AFCARS data element #21
48. Date of current placement in foster care setting	PLACEDT	Month, day and year the child moved into the current foster home, facility, residence, shelter, institution, etc. for purposes of continued foster care.  Date must not change when there is a change in the status of placement setting (e.g., foster home becomes pre-adoptive home).  The State must indicate the date the child was placed on the trial home visit, or known to have run away from the last placement setting as this date.	Date (8)	mm/dd/yyyy (lead with 0 – e.g., 01 to 09)	Valid date	C1, C3 – C6	State child welfare data system Corresponds to AFCARS data element #23



Data Element	Variable Name	Definition/Description	Data Type and Length	Values Descriptions/ Labels	Permissible Values	Indicator(s) Data Element Needed For <sup>2</sup>	Existing State Data System Option, if applicable (not required source) <sup>3</sup>
49. Date child reunified with parent or caregiver	REUNDT	This is the month, day and year of the functional (physical) reunification date – i.e., parent and child are together physically, even if legal custody still resides with the State.  Obtaining this date may differ depending on how your State system works. In some States, this date may be the last completion date for "date of placement in current foster care setting" (AFCARS #23); for other States, it may be gleaned elsewhere from their State's child welfare administrative system.	Date (8)	mm/dd/yyyy (lead with 0 – e.g., 01 to 09)	mm: 01 to 12 dd: 01 to 31 (depending on month) yyyy: >=2007	C3 – C5	State child welfare data system (may correspond with AFCARS #23)
50. Date of discharge from foster care	FCDISDT	This is the month, day and year of reunification, as legally defined by the State. This date may or may not be the same as data element REUNDATE (date child reunified with parent/caregiver).	Date (8)	mm/dd/yyyy (lead with 0 – e.g., 01 to 09)	mm: 01 to 12 dd: 01 to 31 (depending on month) yyyy: >=2007	C3 – C6	State child welfare data system Corresponds with AFCARS #56
51. Discharge reason	FCDISP	This is the reason why the child was discharged from foster care, as defined by AFCARS.  Reunification means that child was returned home to principal caregivers' home.  Living with other relative means the child went to live with a relative other than the one from whose home he/she was removed.  Adoption means child was legally adopted.  Emancipation means the child reached majority according to State law by virtue of age, marriage, etc.  Guardianship means permanent custody of child was awarded to an individual.  Transfer to another agency means responsibility for the care of the child was awarded to another agency, either in or outside of the State.  Runaway means child ran away from the foster care placement.  Death means child died while in foster care.		0 = Not applicable 1 = Reunification with parent(s) or primary caregiver(s) 2 = Living with other relative 3 = Adoption 4 = Emancipation 5 = Relative guardianship 6 = Transfer to another agency 7 = Runaway 8 = Death of child	1-8	C3 – C6	State child welfare data system Corresponds with AFCARS #58



Data Element	Variable Name	Definition/Description	Data Type and Length	Values Descriptions/ Labels	Permissible Values	Indicator(s) Data Element Needed For	Existing State Data System Option, if applicable (not required source)
		ose grantees that are collecting indicat g the information on a case level or agg					
52. Newborn date of birth (if case level) <i>OR</i>	NEWDOB	Enter month, day and year of birth for any newborns born during the six-month reporting period.	Date (8)	mm/dd/yyyy (lead with 0 – e.g., 01 to 09)	>=9/30/2007	C7	
Total number of births (if aggregate)	TOTBIRTHS	Enter total number of births during the sixmonth reporting period.	Integer	Enter number of births	>=0	C7	
53. Substance exposure detected at birth ( if case level)  OR	SEB	Whether substance exposure to alcohol and/or other drugs was detected at birth. The determination of substance exposure may come from a doctor or other health care professional assessing the newborn baby's health. Typically, identification of substance-exposed newborns is determined primarily by clinical indicators, including maternal and newborn presentation, history of mother's substance use/abuse, medical history and/or toxicology results.  For purposes of this project, tobacco is not included in the definition of "other drugs" (though it is recognized that tobacco exposure can have significant consequences to the baby's health). A grantee may collect information on tobacco exposure and report that separately in their local evaluation.  Grantees that are planning to capture risk of exposure as determined by prevalence of substance use during the prenatal period should collect and report use during pregnancy separately as part of their local evaluation.	Char (2)	0 = No 1 = Yes 99 = Unknown	0, 1, 99	C7	
Total number of births substance exposure detected at birth (if aggregate)	TOTSEB	Of total number of births during the six- month reporting period, number in which substance exposure to alcohol and/or other drugs was detected at birth.	Integer	Enter total number of births in which substance exposure was detected	>=0	C7	



Data Element	Variable Name	Definition/Description	Data Type and Length	Values Descriptions/ Labels	Permissible Values	Indicator(s) Data Element Needed For <sup>2</sup>	Existing State Data System Option, if applicable (not required source) <sup>3</sup>
54. Subsequent substance-exposed birth (if case level)  OR	SEB2	If substance exposure to alcohol and/or other drugs was detected at birth, was this birth a <i>subsequent</i> substance-exposed newborn for the mother, regardless of when the initial substance-exposed birth occurred (i.e., the initial substance-exposed birth may have occurred prior to the client's enrollment into the RPG program).	Char (2)	0 = No 1 = Yes 99 = Unknown	0, 1, 99	C7	
Total number of subsequent substance-exposed births (if aggregate)	TOTSEB2	Of the total number of substance-exposed births during the six-month reporting period, number which were a <i>subsequent</i> substance-exposed birth.	Integer	Enter total number of subsequent substance-exposed births	>=0	C7	
grantees are to collect those supportive serv	ct two data ele vices they indi	ose grantees that are collecting indicate ements: whether assessed for given se icated they would provide. Grantees ma eport information on these other suppo	rvice and w ay plan to p	hether services were init rovide other children's st	tiated. Each gra upportive servic	ntee's data pl	an will include only to those specified in
55. Child assessed for	CHDEV1	Whether child was screened and/or	Char (2)	0 = No	0-2, 88, 99	C8	
developmental services		assessed for developmental needs.  If your program does not provide this		1 = Yes (either prior to or at time of entry to RPG program)			
		assessment please enter 88.		2 = N/A – not identified as a need			
				88 = N/A – our program does not provide and/or is not reporting on this assessment			
1				99 = Unknown			



	Data Element	Variable Name	Definition/Description	Data Type and Length	Values Descriptions/ Labels	Permissible Values	Indicator(s) Data Element Needed For <sup>2</sup>	Existing State Data System Option, if applicable (not required source) <sup>3</sup>
56.	Developmental services initiated	CHDEV2	Developmental services were initiated for the child.  Developmental services will be determined by the grantee according to their program model, but may include services such as screening and assessments for any physical, social/emotional, cognitive and/or behavioral delays and/or concerns, early intervention and/or therapy services (speech, physical, occupational, play and/or individual, family and/or parent/child mental health therapy) vision and hearing services, infant development programs, nutrition/feeding services, community-based rehabilitative services.	Char (2)	0 = No 1 = Yes – either initiated or continued/expanded (if already receiving upon entry to RPG program) 2 = N/A – not identified as a need 88 = N/A – our program does not provide and/or is not reporting on this support service 99 = Unknown	0-2, 88, 99	C8	
57.	Child assessed for mental health or counseling services	CHMH1	Whether child was screened and/or assessed for mental health needs.  If your program does not provide this assessment, please enter 88.	Char (2)	0 = No 1 = Yes (either prior to or at time of entry to RPG program) 2 = N/A - not identified as a need 88 = N/A - our program does not provide and/or is not reporting on this assessment 99 = Unknown	0-2, 88, 99	C8	
58.	Mental health or counseling services initiated	CHMH2	Mental health services were initiated for the child.  Mental health or counseling services will be determined by the grantee according to their program model, but may include things like cognitive-behavioral therapy, individual therapy, family therapy, group therapy, PTSD services (for trauma, violence, abuse), play therapy, art therapy, services for depression and anxiety, etc.	Char (2)	0 = No 1 = Yes – either initiated or continued/expanded (if already receiving upon entry to RPG program) 2 = N/A – not identified as a need 88 = N/A – our program does not provide and/or is not reporting on this support service 99 = Unknown	0-2, 88, 99	C8	



	Data Element	Variable Name	Definition/Description	Data Type and Length	Values Descriptions/ Labels	Permissible Values	Indicator(s) Data Element Needed For <sup>2</sup>	Existing State Data System Option, if applicable (not required source) <sup>3</sup>
59.	Child assessed for	CHMED1	Whether child was screened and/or	Char (2)	0 = No	0-2, 88, 99	C8	
	primary pediatric care		assessed for primary pediatric health care needs.  If your program does not provide this assessment, please enter 88.		1 = Yes (either prior to or at time of entry to RPG program) 2 = N/A – not identified as a need			
					88 = N/A – our program does not provide and/or is not reporting on this assessment 99 = Unknown			
	Deleganos distala		Driver and a district to sell the service of the se					
60.	Primary pediatric care initiated	CHMED2	Primary pediatric health care services were initiated for the child.  Primary pediatric care services will be determined by the grantee according to their program model, but may include things like well-child or routine check-ups to monitor physical and psychosocial growth and development, immunizations, health supervision and anticipatory guidance, age-appropriate screening, diagnosis and treatment of acute and chronic disorders, management of serious and life-threatening illness, and referrals to specialists for more complex conditions where appropriate.	Char (2)	0 = No 1 = Yes – either initiated or continued/expanded (if already receiving upon entry to RPG program) 2 = N/A – not identified as a need 88 = N/A – our program does not provide and/or is not reporting on this support service 99 = Unknown	0-2, 88, 99	C8	
61.	Child assessed for substance abuse prevention services	CHSAP1	Whether child was screened and/or assessed for substance abuse prevention and education needs.  If your program does not provide this assessment, please enter 88.		0 = No 1 = Yes (either prior to or at time of entry to RPG program) 2 = N/A – not identified as a need 88 = N/A – our program does not provide and/or is not reporting on this assessment 99 = Unknown	0-2, 88, 99	C8	



Data Element	Variable Name	Definition/Description	Data Type and Length	Values Descriptions/ Labels	Permissible Values	Indicator(s) Data Element Needed For <sup>2</sup>	Existing State Data System Option, if applicable (not required source) <sup>3</sup>
62. Substance abuse prevention services initiated	CHSAP2	Substance abuse prevention and education services were initiated for the child.  Substance abuse prevention and education services will be determined by the grantee according to their program model, but may include things like support groups for children of substance abusing parents or divorced parents; education programs for youth who have problems managing their anger; community support activities such as mentoring programs for youth who are truant, failing in school or having difficulties in relationships with peers and family; early identification of substance abuse problems and referral to treatment services for youth in schools; programs that provide opportunities for youth to learn skills that help them relate to others, communicate, problem-solve more effectively and set future goals, etc	Char (2)	0 = No 1 = Yes – either initiated or continued/expanded (if already receiving upon entry to RPG program) 2 = N/A – not identified as a need 88 = N/A – our program does not provide and/or is not reporting on this support service 99 = Unknown	0-2, 88, 99	C8	
63. Child assessed for substance abuse treatment	CHSATX1	Whether child was screened and/or assessed for a substance use disorder. If your program does not provide this assessment, please enter 88.	Char (2)	0 = No 1 = Yes (either prior to or at time of entry to RPG program) 2 = N/A - not identified as a need 88 = N/A - our program does not provide and/or is not reporting on this assessment 99 = Unknown	0-2, 88, 99	C8	



Data Element	Variable Name	Definition/Description	Data Type and Length	Values Descriptions/ Labels	Permissible Values	Indicator(s) Data Element Needed For <sup>2</sup>	Existing State Data System Option, if applicable (not required source) <sup>3</sup>
64. Substance abuse treatment initiated	CHSATX2	Substance abuse treatment was initiated for the child.  Substance abuse treatment services will be determined by the grantee according to their program model, but may include things like clinical treatment services provided in a residential, inpatient or outpatient setting and related clinical and community support services.	Char (2)	0 = No 1 = Yes - either initiated or continued/expanded (if already receiving upon entry to RPG program) 2 = N/A - not identified as a need 88 = N/A - our program does not provide and/or is not reporting on this support service 99 = Unknown	0-2, 88, 99	C8	
65. Child assessed for educational services	CHEDUC1	Child screened and/or assessed for any educational service needs.  If your program does not provide this assessment, please enter 88.		0 = No 1 = Yes (either prior to or at time of entry to RPG program) 2 = N/A - not identified as a need 88 = N/A - our program does not provide and/or is not reporting on this assessment 99 = Unknown	0-2, 88, 99	C8	
66. Educational services initiated	CHEDUC2	Educational services were initiated for the child.  Educational services will be determined by the grantee according to their program model, but may include mentoring, tutoring, reading instruction, remediation, school assessments, services, drop-out prevention programs, school-based early intervention programs, and similar services. This may include IEP/IFSP planning and services for children who qualify for Special Education Services and/or services under IDEA Part C, as well as remedial, school readiness and other early intervention services for children who do not qualify.	Char (2)	0 = No 1 = Yes – either initiated or continued/expanded (if already receiving upon entry to RPG program) 2 = N/A – not identified as a need 88 = N/A – our program does not provide and/or is not reporting on this support service 99 = Unknown	0-2, 88, 99	C8	



Data Element	Variable Name	Definition/Description	Data Type and Length	Values Descriptions/ Labels	Permissible Values	Indicator(s) Data Element Needed For	Existing State Data System Option, if applicable (not required source)			
SPECIFIC DATA ELEMENTS TO BE USED TO CALCULATE <u>ADULT</u> INDICATOR MEASURES  (A few of the substance abuse treatment data elements below are also needed for indicator C1. Children Remain at Home, but are presented here along with the other associated treatment data elements.)  Not all grantees will collect and report every data element; the number of data elements will depend on the grantee's final set of indicators.										
67. Date file opened with child welfare system	CWFILE_O	This is the first date the case is opened for services in the child welfare system (as it relates to the family becoming involved in the RPG program versus any earlier child welfare involvement that pre-dates and is not related to the family's participation in the RPG program).  In the vast majority of cases, this will be the date the case is opened for an investigation. However, it may vary by State practice, so follow your State guidelines/practices.	Date (8)	mm/dd/yyyy (lead with 0 – e.g., 01 to 09)	mm: 01 to 12 dd: 01 to 31 (depending on month) yyyy: valid year	C3, A1, A6	State child welfare data system			
68. Substance abuse treatment admission record identifier	SATXID	Unique identifier assigned to each substance abuse treatment admission for a given adult. Because it is likely that an adult may have multiple substance abuse treatment admissions over the course of his/her involvement in the RPG program, this field is needed to specifically identify a particular treatment admission record. Each treatment admission record should represent an overall treatment episode; do not record all placements or transitions from one level of care to another that may happen within a single treatment episode.  If a given adult enrolled in the RPG program was not identified as having a substance use disorder and was not admitted to substance abuse treatment (but is receiving other RPG program services), then this data element is not applicable and can be left blank.	String (10)	The SATXID can be any convenient string of characters you want, provided it is no more than 10 characters long and it is a unique identifier.	Enter unique identifier that is <=10 characters	N/A (for data system administrat- ive purposes)				



Data Element	Variable Name	Definition/Description	Data Type and Length	Values Descriptions/ Labels	Permissible Values	Indicator(s) Data Element Needed For <sup>2</sup>	Existing State Data System Option, if applicable (not required source) <sup>3</sup>
69. Date of parent/ caregiver substance abuse assessment/intake	SAASSESS	The month, day and year that the parent or caregiver received a substance use assessment/intake. If assessment and intake occur on two separate dates, use the earlier of the two.  A substance abuse assessment/intake typically involves a standardized set of questions asked by a staff member trained in substance abuse issues, including functioning, needs and strengths leading to a determination of the level of care required, needed services and development of a treatment plan. In addition, the administrative procedures for admission to a program may be completed at this time.	Date (8)	mm/dd/yyyy (lead with 0 – e.g., 01 to 09)	mm: 01 to 12 dd: 01 to 31 (depending on month) yyyy: >=2007  This date should precede the date the parent or caregiver formally entered treatment (data element TXADMIT)	A1	
70. Level of care parent or caregiver assessed for  Optional Data Element	LOCRECOM	Parent or caregiver recommended level of care identified at substance abuse assessment, according to the five broad levels outlined in the American Society of Addiction Medicine's Patient Placement Criteria (ASAM PPC).  This is an optional data element that will be included for those grantees using the ASAM PPC, or a standardized assessment process that determines level of care in a manner consistent with the ASAM PPC.	Char (2)	0 - Level 0.5, Early Intervention 1 = Level I, Outpatient Treatment 2 = Level II, Intensive Outpatient/Partial Hospitalization 3 = Level III, Residential/Inpatient Treatment 4 = Level IV, Medically- Managed Intensive Inpatient Treatment 88 = Not applicable - substance use problem not indicated If you are not collecting this optional data element, leave blank.	0-4, 88	A1	



Data Element	Variable Name	Definition/Description	Data Type and Length	Values Descriptions/ Labels	Permissible Values	Indicator(s) Data Element Needed For <sup>2</sup>	Existing State Data System Option, if applicable (not required source) <sup>3</sup>
71. Level of care parent or caregiver received  Optional Data Element	LOCRECVD	Level of care that parent or caregiver received at time of treatment admission, according to the five broad levels outlined in the American Society of Addiction Medicine's Patient Placement Criteria (ASAM PPC).  This is an optional data element that will be included for those grantees using the ASAM PPC, or a standardized assessment process that determines level of care in a manner consistent	Char (2)	See above coding for LOCRECOM If you are not collecting this optional data element, leave blank.	0-4	A1	
72. Parent/caregiver entered public or private treatment	PUBPRVTX	with the ASAM PPC.  For parents or caregivers who enter substance abuse treatment, indicate if they entered public or private treatment.  If a given adult enrolled in the RPG program does not have a substance use disorder and is not receiving substance abuse treatment, but is receiving other RPG services or interventions, code as 88 = Not applicable and leave data elements 73 – 122 blank.	Char (2)	1 = public 2 = private 88 = Not applicable 99 = don't know	1, 2, 88, 99	A1, A2, A5, A6	
73. Date parent/ caregiver entered substance abuse treatment	TXADMIT	The month, day and year that the parent or caregiver was admitted to treatment. As defined by TEDS, admission is defined as the formal acceptance of a client into substance abuse treatment. An admission has occurred if and only if the client begins treatment. Therefore, events such as initial screening, referral and wait-listing are considered to take place before the admission to treatment and are not reportable to TEDS.  If the given adult is not in treatment, leave blank.	Date (8)	mm/dd/yyyy (lead with 0 – e.g., 01 to 09)	mm: 01 to 12 dd: 01 to 31 (depending on month) yyyy: >=2007	A1, A2, A3	State substance abuse treatment system Corresponds to TEDS admission variable MDS 5



Data Element	Variable Name	Definition/Description	Data Type and Length	Values Descriptions/ Labels	Permissible Values	Indicator(s) Data Element Needed For <sup>2</sup>	Existing State Data System Option, if applicable (not required source) <sup>3</sup>
74. Substance abuse treatment setting	TXSET	The type of treatment setting to which the client was admitted. Within a given treatment setting, an individual may receive different types of services (e.g., therapy and counseling, case management, support services, transitional services, etc.). This variable is intended to capture the larger treatment setting to which the client was admitted; the coding is defined according to TEDS.  If the given adult is not in treatment, leave blank.	Char (2)	1 = Detox, 24-hour, hospital inpatient 2 = Detox, 24-hour, free- standing residential 3 = Rehabilitation/ Residential – Hospital (other than detox) 4 = Rehabilitation/ Residential – Short term (<=30 days) 5 = Rehabilitation/ Residential – Long term (>30 days); may include transitional living such as halfway house 6 = Ambulatory – Intensive Outpatient (at minimum, client receives treatment lasting 2 or more hours per day for 3 or more days per week) 7 = Ambulatory – Non- intensive outpatient 8 = Ambulatory – Detoxification (outpatient) 9 = Unknown	1-9	A1, A2, A3	State substance abuse treatment data system  Corresponds with TEDS admission variable MDS 18



Data Element	Variable Name	Definition/Description	Data Type and Length	Values Descriptions/ Labels	Permissible Values	Indicator(s) Data Element Needed For <sup>2</sup>	Existing State Data System Option, if applicable (not required source) <sup>3</sup>
75. Date of last contact while in substance abuse treatment	TXLSTCON	The day when the client was last seen for a treatment. In many cases, the date of discharge (data element TXDISDT) and date of last contact will be the same or very close together. However, in certain situations, a client may drop out of treatment and not be "discharged" for weeks or months after the end of treatment. Since a primary use of the date of discharge is to calculate the length of treatment, delayed discharge dates result in invalid length of treatment calculations. For this reason, the grantee should report both dates; the analyst will determine the most appropriate date to use in calculating length of treatment.  If the given adult is not in treatment, leave blank.	Date (8)	mm/dd/yyyy (lead with 0 – e.g., 01 to 09)	mm: 01 to 12 dd: 01 to 31 (depending on month) yyyy: >=2007  Date must be equal to or after date of admission (TXADMIT).	A2, A3	State substance abuse treatment system Corresponds to TEDS discharge variable DIS 8
76. Date parent/ caregiver discharged from substance abuse treatment	TXDISDT	Specifies the month, day and year when a parent or caregiver was formally discharged from the treatment facility and/or services were terminated. This should reflect the treatment discharge date for the overall treatment episode; you do not need to record all placements or transitions from one level of care to another that may happen within a single treatment episode.  The date may be the same as the date of last contact (data element TXLSTCON).  Regardless of the reason for services ending, a discharge is considered to have occurred at some point after treatment ends. In the absence of a formal discharge, TEDS uses the following operational definition of discharge: A treatment episode should be assumed to have ended if the client has not been seen in 3 days in the case of inpatient or residential treatment, and 30 days in the case of outpatient treatment.  If the given adult is not in treatment, leave blank.	Date (8)	mm/dd/yyyy (lead with 0 – e.g., 01 to 09)	mm: 01 to 12 dd: 01 to 31 (depending on month) yyyy: >=2007 Date must be equal to or after date of admission (TXADMIT).	A2, A3	State substance abuse treatment system Corresponds to TEDS discharge variable DIS 9



	Data Element	Variable Name	Definition/Description	Data Type and Length	Values Descriptions/ Labels	Permissible Values	Indicator(s) Data Element Needed For <sup>2</sup>	Existing State Data System Option, if applicable (not required source) <sup>3</sup>
77.	Substance abuse treatment discharge status	TXSTATUS	Indicates the outcome of treatment or the reason for transfer or discontinuance of treatment. The coding is according to TEDS.  1 = Treatment completion. All parts of treatment plan or program were completed.  2 = Left against professional advice. Client chose not to complete treatment program, with or without specific advice to continue treatment. Includes clients who dropped out for unknown reason.  3 = Terminated by facility. Treatment terminated by action of facility (not because client dropped out, or client incarcerated or other client reason).  4 = Transferred to another substance abuse treatment program or facility (and known to report). This code is used for clients who have a change of service or provider within a treatment episode, except when it is known the client did not report to the next program.  14 = Transferred to another substance abuse treatment program or facility, but did not report. This code is used for clients who have a change of service or provider within an episode of treatment, but who are known not to have reported to the next program.  5 = Incarcerated. For those whose course of treatment is terminated because the client has been incarcerated (includes jail, prison,, house confinement)  6 = Death  7 = Other (e.g., moved, illness, hospitalization, or other reason somewhat out of client's control.  8 = Unknown. Client status at discharge not known (e.g., record incomplete or lost)  99 = Not applicable – still in treatment. To be used if a client is still in treatment at end of the given reporting period.  If the given adult is not in treatment, leave blank.	Char (2)	1 = Treatment completion 2 = Left against professional advice (dropped out) 3 = Terminated by facility 4 = Transferred to another treatment program or facility (and known to report). 14 = Transferred to another treatment program or facility, but did not report. 5 = Incarcerated. 6 = Death 7 = Other 8 = Unknown 99 = Not applicable – still in treatment  Note: It is understood that California's system (CalOMS) uses different discharge codes than TEDS. California grantees should refer to indicator A2 discussion in Section III below for how to translate CalOMS codes to TEDS discharge codes.	1-8, 14, 99	A2, A3	State substance abuse treatment system Corresponds to TEDS discharge variable DIS 10 (a code of 99 was added to identify those still in treatment)



Data Element	Variable Name	Definition/Description	Data Type and Length	Values Descriptions/ Labels	Permissible Values	Indicator(s) Data Element Needed For <sup>2</sup>	Existing State Data System Option, if applicable (not required source) <sup>3</sup>
78. Primary substance problem at admission	SUB1	Primary substance problem reported at treatment admission; substance which is primarily responsible for contributing to the parent or caregiver's need for admission.  For heroin/other opiates, grantees can just report one total roll-up number or also choose to break it down into the more detailed subcategories a – e (depending on how these data are collected locally). Subcategory d. other opiates/synthetics includes codeine, Dilaudid, morphine, Demerol, Darvon, opium, and any other drug with morphine-like effects.  Hallucinogens/psychedelics include PCP, LSD, MDMA, DMT, STP, mescaline, psilocybin, peyote, etc.  Other amphetamines/stimulants includes amphetamines, Benzedrine, Dexedrine, Preludin, Ritalin, any other amine and related drugs, non-amphetamine stimulants  Benzodiazepines includes diazepam, flurazepam, chlordiazepoxide, clorazepate, lorazepam, alprazolam, estasolam, oxazepam, temazepam, prazepam, nad other unspecified benzodiazepines  Barbiturates includes Mephobarbital, pentobarbital sodium, Seconal, Nembutal  Other tranquilizers or sedatives includes non-benzodiazepine tranquilizers, non-barbiturate sedatives/hypnotics, chloral hydrate, Placidyl, Doriden  Inhalants include ether, glue, chloroform, nitrous oxide, gasoline, paint thinner, etc.  Other includes all substances not otherwise specified.  If the given adult is not in treatment, leave blank.	Char (2)	1. Alcohol 2. Cocaine/crack 3. Marijuana/hashish 4. Heroin/other opiates (total) a. Heroin b. Oxycontin/ oxycodone c. Hydrocodone (Lortab) d. Other opiates/ synthetics e. Non-prescription methadone 5. Hallucinogens/ psychedelics 6. Methamphetamine 7. Other amphetamines/ stimulants 8. Benzodiazepines 9. Barbiturates 10. Other tranquilizers or sedatives 11. Inhalants 12. Other 99 = Unknown/ missing	1-12, 99	A3	State substance abuse treatment system Grantees could derive this from TEDS variable MDS 14 (A), but would require some recoding



Data Element	Variable Name	Definition/Description	Data Type and Length	Values Descriptions/ Labels	Permissible Values	Indicator(s) Data Element Needed For <sup>2</sup>	Existing State Data System Option, if applicable (not required source) <sup>3</sup>
79. Secondary substance problem at admission  Optional Data Element	SUB2	Secondary substance problem reported at treatment admission. (See primary substance problem, SUB1, for guidelines.)  This is an optional data element for grantees.	Char (2)	See primary substance problem, SUB1, values. If you are not collecting this optional data element, leave blank.	1-12, 99	A3	State substance abuse treatment system Grantees could derive this from TEDS variable MDS 14 (B), but would require some recoding
80. Tertiary substance problem at admission  Optional Data Element	SUB3	Tertiary substance problem reported at treatment admission. (See primary substance problem for guidelines.)  This is an optional data element for grantees.	Char (2)	See primary substance problem, SUB1, for values. If you are not collecting this optional data element, leave blank.	1-12, 99	A3	State substance abuse treatment system Grantees could derive this from TEDS variable MDS 14 (C), but would require some recoding

Data elements 81 – 114 apply to indicator A3. Substance Use. For each of the specified substances, grantees are to collect frequency of use in past 30 days at both admission and discharge. (It is anticipated that past use at discharge will be obtained through either an exit interview, completion of a discharge form or knowledge obtained while client was participating in treatment.) Grantees that are collecting substance use information at additional time points (e.g., 6 months prior to admission, 6 months post-treatment discharge) can report this additional information as part of their local evaluation. If a given adult being served was not identified as having a substance use disorder and is not in substance abuse treatment, but is receiving other RPG program services, then leave these data elements blank.

81.	Frequency of alcohol use at admission	ALCOHOL1	At treatment intake/entry, how many of the past 30 days clients used alcohol.  For adults who may be incarcerated, record use during most recent 30-day period prior to incarceration.	Integer (2)	Enter number of days	0-30 99 = unknown/ missing	A3	
82.	Frequency of alcohol use at discharge	ALCOHOL2	At treatment discharge, how many of the past 30 days clients used alcohol	Integer (2)	Enter number of days	0-30 99 = unknown/ missing	A3	
83.	Frequency of cocaine/crack use at admission	COCAINE1	At treatment intake/entry, how many of the past 30 days clients used cocaine/crack. For adults who may be incarcerated, record use during most recent 30-day period prior to incarceration.	Integer (2)	Enter number of days	0-30 99 = unknown/ missing	A3	
84.	Frequency of cocaine/crack use at discharge	COCAINE2	At treatment discharge, how many of the past 30 days clients used cocaine/crack.	Integer (2)	Enter number of days	0-30 99 = unknown/ missing	A3	



	Data Element	Variable Name	Definition/Description	Data Type and Length	Values Descriptions/ Labels	Permissible Values	Indicator(s) Data Element Needed For <sup>2</sup>	Existing State Data System Option, if applicable (not required source) <sup>3</sup>
85.	Frequency of marijuana/hashish use at admission	MARIJ1	At treatment intake/entry, how many of the past 30 days clients used marijuana/hashish. For adults who may be incarcerated, record use during most recent 30-day period prior to incarceration.	Integer (2)	Enter number of days	0-30 99 = unknown/ missing	A3	
86.	Frequency of marijuana/hashish use at discharge	MARIJ2	At treatment discharge, how many of the past 30 days clients used marijuana/hashish.	Integer (2)	Enter number of days	0-30 99 = unknown/ missing	A3	
87.	Frequency of heroin/other opiate use at admission	OPIATES1	At treatment intake/entry, how many of the past 30 days clients used heroin or other opiates, not as prescribed for client. Grantees may collect and report all heroin/other opiate use as a single number only or also choose to break it down into the more detailed subcategories of a) heroin, b) oxycontin/oxycodone, c) hydrocodone (or Lortab), d) other opiates/synthetics (codeine, Dilaudid, morphine, Demerol, Darvon, opium, and any other drug with morphine-like effects), and e) non-prescription methadone. See data elements 89, 91, 93, 95 and 97. For adults who may be incarcerated, record use during most recent 30-day period prior to incarceration.	Integer (2)	Enter number of days	0-30 99 = unknown/ missing	A3	
88.	Frequency of heroin/other opiate use at discharge	OPIATES2	At treatment discharge, how many of the past 30 days clients used heroin or other opiates, not as prescribed for client.  Grantees may collect and report all heroin/other opiate use as a single number only or choose to break it down into the more detailed subcategories of a) heroin, b) oxycontin/oxycodone, c) hydrocodone (or Lortab), d) other opiates/synthetics (codeine, Dilaudid, morphine, Demerol, Darvon, opium, and any other drug with morphine-like effects), and e) non-prescription methadone. See data elements 90, 92, 94, 96 and 98.	Integer (2)	Enter number of days	0-30 99 = unknown/ missing	A3	



Data Element	Variable Name	Definition/Description	Data Type and Length	Values Descriptions/ Labels	Permissible Values	Indicator(s) Data Element Needed For <sup>2</sup>	Existing State Data System Option, if applicable (not required source) <sup>3</sup>
89. Frequency of heroin use at admission  This is an optional more detailed subcategory of data element OPIATES1	HEROIN1	At treatment intake/entry, how many of the past 30 days clients used heroin specifically.  This is a subcategory of OPIATES1.  For adults who may be incarcerated, record use during most recent 30-day period prior to incarceration.	Integer (2)	Enter number of days If you are not collecting this optional more detailed subcategory, just leave blank.	0-30 99 = unknown/ missing	A3	
90. Frequency of heroin use at discharge  This is an optional more detailed subcategory of data element OPIATES2	HEROIN2	At treatment discharge, how many of the past 30 days clients used heroin specifically.  This is a subcategory of OPIATES2.	Integer (2)	Enter number of days If you are not collecting this optional more detailed subcategory, leave blank.	0-30 99 = unknown/ missing	A3	
91. Frequency of oxycontin/ oxycodone use at admission  This is an optional more detailed subcategory of data element OPIATES1	OXYCO1	At treatment intake/entry, how many of the past 30 days clients used oxycontin/ oxycodone specifically, not as prescribed for client.  This is a subcategory of OPIATES1.  For adults who may be incarcerated, record use during most recent 30-day period prior to incarceration.	Integer (2)	Enter number of days If you are not collecting this optional more detailed subcategory, leave blank.	0-30 99 = unknown/ missing	A3	
92. Frequency of oxycontin/ oxycodone use at discharge  This is an optional more detailed subcategory of data element OPIATES2	OXYCO2	At treatment discharge, how many of the past 30 days clients used oxycontin/ oxycodone specifically, not as prescribed for client.  This is a subcategory of OPIATES2.	Integer (2)	Enter number of days If you are not collecting this optional more detailed subcategory, leave blank.	0-30 99 = unknown/ missing	A3	



Data Element	Variable Name	Definition/Description	Data Type and Length	Values Descriptions/ Labels	Permissible Values	Indicator(s) Data Element Needed For <sup>2</sup>	Existing State Data System Option, if applicable (not required source) <sup>3</sup>
93. Frequency of hydrocodone (or Lortab) use at admission  This is an optional more detailed subcategory of data element OPIATES1	HYDROCO1	At treatment intake/entry, how many of the past 30 days clients used hydrocodone (or Lortab) specifically, not as prescribed for client.  This is a subcategory of OPIATES1.  For adults who may be incarcerated, record use during most recent 30-day period prior to incarceration.	Integer (2)	Enter number of days If you are not collecting this optional more detailed subcategory, leave blank.	0-30 99 = unknown/ missing	A3	
94. Frequency of hydrocodone (or Lortab) use at discharge  This is an optional more detailed subcategory of data element OPIATES2	HYDROCO2	At treatment discharge, how many of the past 30 days clients used hydrocodone (or Lortab) specifically, not as prescribed for client.  This is a subcategory of OPIATES2.	Integer (2)	Enter number of days If you are not collecting this optional more detailed subcategory, leave blank.	0-30 99 = unknown/ missing	A3	
95. Frequency of other opiate/synthetics use at admission  This is an optional more detailed subcategory of data element OPIATES1	OTHOPIA1	At treatment intake/entry, how many of the past 30 days clients used other opiates/synthetics (codeine, Dilaudid, morphine, Demerol, Darvon, opium, and any other drug with morphine-like effects) specifically, not as prescribed for client.  This is a subcategory of OPIATES1.  For adults who may be incarcerated, record use during most recent 30-day period prior to incarceration.	Integer (2)	Enter number of days If you are not collecting this optional more detailed subcategory, leave blank.	0-30 99 = unknown/ missing	A3	
96. Frequency of other opiate/synthetics use at discharge  This is an optional more detailed subcategory of data element OPIATES2	OTHOPIA2	At treatment discharge, how many of the past 30 days clients used other opiates/synthetics (codeine, Dilaudid, morphine, Demerol, Darvon, opium, and any other drug with morphine-like effects) specifically, not as prescribed for client.  This is a subcategory of OPIATES2.	Integer (2)	Enter number of days If you are not collecting this optional more detailed subcategory, leave blank.	0-30 99 = unknown/ missing	A3	



Data Element	Variable Name	Definition/Description	Data Type and Length	Values Descriptions/ Labels	Permissible Values	Indicator(s) Data Element Needed For <sup>2</sup>	Existing State Data System Option, if applicable (not required source) <sup>3</sup>
97. Frequency of non- prescription methadone use at admission  This is an optional more detailed subcategory of data element OPIATES1	METHADO1	At treatment intake/entry, how many of the past 30 days clients used non-prescription methadone specifically.  This is a subcategory of OPIATES1.  For adults who may be incarcerated, record use during most recent 30-day period prior to incarceration.	Integer (2)	Enter number of days If you are not collecting this optional more detailed subcategory, leave blank.	0-30 99 = unknown/ missing	A3	
98. Frequency of non- prescription methadone use at discharge  This is an optional more detailed subcategory of data element OPIATES2	METHADO2	At treatment discharge, how many of the past 30 days clients used non-prescription methadone specifically.  This is a subcategory of OPIATES2.	Integer (2)	Enter number of days If you are not collecting this optional more detailed subcategory, leave blank.	0-30 99 = unknown/ missing	A3	
99. Frequency of hallucinogen/ psychedelic use at admission	HALLUC1	At treatment intake/entry, how many of the past 30 days clients used hallucinogens/psychedelics (includes PCP, LSD, MDMA, DMT, STP, mescaline, psilocybin, peyote, etc.) For adults who may be incarcerated, record use during most recent 30-day period prior to incarceration.	Integer (2)	Enter number of days	0-30 99 = unknown/ missing	А3	
100. Frequency of hallucinogen/ psychedelic use at discharge	HALLUC2	At treatment discharge, how many of the past 30 days clients used hallucinogens/psychedelics (includes PCP, LSD, MDMA, DMT, STP, mescaline, psilocybin, peyote, etc.)	Integer (2)	Enter number of days	0-30 99 = unknown/ missing	A3	
101. Frequency of methamphetamine use at admission	METH1	At treatment intake/entry, how many of the past 30 days clients used methamphetamine.  For adults who may be incarcerated, record use during most recent 30-day period prior to incarceration.	Integer (2)	Enter number of days	0-30 99 = unknown/ missing	A3	
102. Frequency of methamphetamine use at discharge	METH2	At treatment discharge, how many of the past 30 days clients used methamphetamine.	Integer (2)	Enter number of days	0-30 99 = unknown/ missing	А3	



Data Element	Variable Name	Definition/Description	Data Type and Length	Values Descriptions/ Labels	Permissible Values	Indicator(s) Data Element Needed For <sup>2</sup>	Existing State Data System Option, if applicable (not required source) <sup>3</sup>
103. Frequency of amphetamine/ other stimulant use at admission	OTHSTIM1	At treatment intake/entry, how many of the past 30 days clients used amphetamines or other stimulants, other than methamphetamine (includes amphetamines, Benzedrine, Dexedrine, Preludin, Ritalin, any other amine and related drugs, non-amphetamine stimulants), not as prescribed for client.  For adults who may be incarcerated, record use during most recent 30-day period prior to incarceration.	Integer (2)	Enter number of days	0-30 99 = unknown/ missing	A3	
104. Frequency of amphetamine/ other stimulant use at discharge	OTHSTIM2	At treatment discharge, how many of the past 30 days clients used amphetamines or other stimulants other than methamphetamine (includes amphetamines, Benzedrine, Dexedrine, Preludin, Ritalin, any other amine and related drugs, nonamphetamine stimulants), not as prescribed for client.	Integer (2)	Enter number of days	0-30 99 = unknown/ missing	А3	
105. Frequency of benzodiazepine use at admission	BENZO1	At treatment intake/entry, how many of the past 30 days clients used benzodiazepines (includes diazepam, flurazepam, chlordiazepoxide, clorazepate, lorazepam, alprazolam, estasolam, oxazepam, temazepam, prazepam, triazolam, clonazepam, halazepam, and other unspecified benzodiazepines), not as prescribed for client.  For adults who may be incarcerated, record use during most recent 30-day period prior to incarceration.	Integer (2)	Enter number of days	0-30 99 = unknown/ missing	A3	
106. Frequency of benzodiazepine use at discharge	BENZO2	At treatment discharge, how many of the past 30 days clients used benzodiazepines (includes diazepam, flurazepam, chlordiazepoxide, clorazepate, lorazepam, alprazolam, estasolam, oxazepam, temazepam, prazepam, triazolam, clonazepam, halazepam, and other unspecified benzodiazepines), not as prescribed for client.	Integer (2)	Enter number of days	0-30 99 = unknown/ missing	АЗ	



Data Element	Variable Name	Definition/Description	Data Type and Length	Values Descriptions/ Labels	Permissible Values	Indicator(s) Data Element Needed For <sup>2</sup>	Existing State Data System Option, if applicable (not required source) <sup>3</sup>
107. Frequency of barbiturate use at admission	BARBIT1	At treatment intake/entry, how many of the past 30 days clients used barbiturates (includes Mephobarbital, pentobarbital sodium, Seconal, Nembutal), not as prescribed for client.  For adults who may be incarcerated, record use during most recent 30-day period prior to incarceration.	Integer (2)	Enter number of days	0-30 99 = unknown/ missing	A3	
108. Frequency of barbiturate use at discharge	BARBIT2	At treatment discharge, how many of the past 30 days clients used barbiturates (includes Mephobarbital, pentobarbital sodium, Seconal, Nembutal), not as prescribed for client.	Integer (2)	Enter number of days	0-30 99 = unknown/ missing	A3	
109. Frequency of other tranquilizer or sedative use at admission	TRANQ1	At treatment intake/entry, how many of the past 30 days clients used other tranquilizers or sedatives (includes non-benzodiazepine tranquilizers, non-barbiturate sedatives/hypnotics, chloral hydrate, Placidyl, Doriden), not as prescribed for client.  For adults who may be incarcerated, record use during most recent 30-day period prior to incarceration.	Integer (2)	Enter number of days	0-30 99 = unknown/ missing	A3	
110. Frequency of tranquilizer or sedative use at discharge	TRANQ2	At treatment discharge, how many of the past 30 days clients used other tranquilizers or sedatives (includes non-benzodiazepine tranquilizers, non-barbiturate sedatives/hypnotics, chloral hydrate, Placidyl, Doriden), not as prescribed for client.	Integer (2)	Enter number of days	0-30 99 = unknown/ missing	A3	
111. Frequency of inhalant use at admission	INHAL1	At treatment intake/entry, how many of the past 30 days clients used inhalants (includes ether, glue, chloroform, nitrous oxide, gasoline, paint thinner, etc).  For adults who may be incarcerated, record use during most recent 30-day period prior to incarceration.	Integer (2)	Enter number of days	0-30 99 = unknown/ missing	A3	
112. Frequency of inhalant use at discharge	INHAL2	At treatment discharge, how many of the past 30 days clients used inhalants (includes ether, glue, chloroform, nitrous oxide, gasoline, paint thinner, etc).	Integer (2)	Enter number of days	0-30 99 = unknown/ missing	A3	



Data Element	Variable Name	Definition/Description	Data Type and Length	Values Descriptions/ Labels	Permissible Values	Indicator(s) Data Element Needed For <sup>2</sup>	Existing State Data System Option, if applicable (not required source) <sup>3</sup>
113. Frequency of other substance use at admission	OTHDRUG1	At treatment intake/entry, how many of the past 30 days clients used any other illegal substances not otherwise specified.  For adults who may be incarcerated, record use during most recent 30-day period prior to incarceration.	Integer (2)	Enter number of days	0-30 99 = unknown/ missing	A3	
114. Frequency of other substance use at discharge	OTHDRUG2	At treatment discharge, how many of the past 30 days clients used any other illegal substances not otherwise specified.	Integer (2)	Enter number of days	0-30 99 = unknown/ missing	A3	
115. Employment status at time of treatment intake/admission	EMPLTX1	Parent or caregiver's employment status at treatment intake/admission. This may or may not be the same as the individual's employment status at time of entry to the RPG program (core demographic data element EMPLOY).  Full Time is defined as working 35 or more hours each week; this includes members of uniformed services.  Part Time is defined as working less than 35 hours each week.  Unemployed is defined as not having a job and/or looking for work during the past 30 days.  Not in Labor Force includes individuals who are homemakers, students, disabled, retired or inmate of an institution. Note: Clients identified as Not in Labor Force should be further defined in the next data element Detailed Not In Labor Force at time of treatment admission (NLFTX1).  If the given adult is not in treatment, leave blank.	Char (2)	1 = Full time 2 = Part time 3 = Unemployed 4 = Not in labor force* 99 = Don't know  *Please provide more detailed information for clients coded as Not in Labor Force in data element 116. NLFTX1	1-4, 99	A5	State substance abuse treatment data system Corresponds to TEDS admission variable MDS 13



Data Element	Variable Name	Definition/Description	Data Type and Length	Values Descriptions/ Labels	Permissible Values	Indicator(s) Data Element Needed For <sup>2</sup>	Existing State Data System Option, if applicable (not required source) <sup>3</sup>
116. Detailed Not in Labor Force at time of treatment admission	NLFTX1	This provides more detailed information about those clients whose employment status at admission is coded as Not in Labor Force (see data element EMPLTX1).  If the given adult is not in treatment, leave blank.	Char (2)	1 = Homemaker 2 = Student 3 = Retired 4 = Disabled 5 = Inmate of Institution (prison or institution that keeps a person, otherwise able, from entering labor force) 6 = Other 96 = Not applicable 97 = Unknown 98 = Not collected	1-6, 96-98	A5	State substance abuse treatment system (for those admitted to public treatment) TEDS admission variable SuDS12 (required for NOMs reporting)
117. Employment status at time of treatment discharge	EMPLTX2	Parent or caregiver's employment status at treatment discharge.  See data element EMPLTX1 above for definitions.  If the given adult is not in treatment, leave blank.  Note: Clients identified as Not in Labor Force should be further defined in the next data element Detailed Not In Labor Force at time of treatment discharge (NLFTX2).	Char (2)	1 = Full time 2 = Part time 3 = Unemployed 4 = Not in labor force* 99 = Don't know *Please provide more detailed information for clients coded as Not in Labor Force in data element 118. NLFTX2	1-4, 99	A5	State substance abuse treatment data system Corresponds to TEDS discharge variable DIS 24
118. Detailed Not in Labor Force at time of treatment discharge	NLFTX2	This provides more detailed information about those clients whose employment status at discharge is coded as Not in Labor Force (see data element EMPLTX2).  If the given adult is not in treatment, leave blank.	Char (2)	1 = Homemaker 2 = Student 3 = Retired 4 = Disabled 5 = Inmate of Institution (prison or institution that keeps a person, otherwise able, from entering labor force) 6 = Other 96 = Not applicable 97 = Unknown 98 = Not collected	1-6, 96-98	A5	State substance abuse treatment system (for those admitted to public treatment) TEDS admission variable SuDS12 (required for NOMs reporting)



Data Element	Variable Name	Definition/Description	Data Type and Length	Values Descriptions/ Labels	Permissible Values	Indicator(s) Data Element Needed For <sup>2</sup>	Existing State Data System Option, if applicable (not required source) <sup>3</sup>
119. Enrollment status in an educational (school) or vocational training program at treatment intake/admission	EDVOC1	Parent or caregiver's enrollment status in an educational (school) or vocational training program at substance abuse treatment intake/admission.  If the given adult is not in treatment, leave blank.	Char (2)	0 = Not enrolled 1 = Enrolled full time 2 = Enrolled part time 3 = Other 99 = Don't know	0-3, 99	A5	
120. Enrollment status in an educational (school) or vocational training program at treatment discharge	EDVOC2	Parent or caregiver's enrollment status in an educational (school) or vocational training program at discharge from substance abuse treatment.  If the given adult is not in treatment, leave blank.	Char (2)	0 = Not enrolled 1 = Enrolled full time 2 = Enrolled part time 3 = Other 99 = Don't know	0-3, 99	A5	
121. Number of arrests in past 30 days at treatment intake/admission	ARREST1	At time of substance abuse treatment intake/admission, number of times parent or caregiver had been arrested in the past 30 days. Do not include arrests for traffic infractions unless they are for driving under the influence of alcohol or drugs, or if the traffic arrest led to a booking.  If the given adult is not in treatment, leave blank.	Integer (2)	Enter number of arrests	0-30	A6	State substance abuse treatment data system Corresponds to TEDS admission variable SuDS 16
122. Number of arrests in past 30 days at treatment discharge	ARREST2	At time of discharge from substance abuse treatment, number of times parent or caregiver has been arrested in the past 30 days.  If the given adult is not in treatment, leave blank.	Integer (2)	Enter number of arrests	0-30	A6	State substance abuse treatment data system Corresponds to TEDS discharge variable DIS 26



Data Element	Variable Name	Definition/Description	Data Type and Length	Values Descriptions/ Labels	Permissible Values	Indicator(s) Data Element Needed For	Existing State Data System Option, if applicable (not required source)
service, grantees are those supportive serv	e to collect two vices they indi	those grantees that are collecting indic o data elements: whether assessed for icated they would provide. Grantees ma rt information on these other supportive	given servi ay plan to p	ce and whether services provide other adult suppo	initiated. Each rtive services, ii	grantee's data n addition to t	a plan will include only hose specified in A4.
123. Adult assessed for primary medical care	AMED1	Adult assessed for primary medical care needs.  If your program does not provide this assessment, please enter 88.	Char (2)	0 = No 1 = Yes (either prior to or at time of entry to RPG program) 2 = N/A – not identified as a need 88 = N/A – our program does not provide and/or is not reporting on this assessment 99 = Unknown	0-2, 88, 99	A4	
124. Primary medical care initiated	AMED2	Primary medical care and health services will be determined by the grantee according to their program model, but may include medical assessments; prenatal and postnatal care; emergency and hospital care; health supervision and anticipatory guidance; screening, diagnosis and treatment of acute and chronic disorders; management of serious and life-threatening illness; referrals to specialists for more complex conditions where appropriate; testing, treatment, and counseling for HIV, tuberculosis, and sexually transmitted diseases; obstetric and gynecologic services; nutrition counseling; and family planning and reproductive health services, among other things.	Char (2)	0 = No 1 = Yes - either initiated or continued/expanded (if already receiving upon RPG program entry) 2 = N/A - not identified as a need 88 = N/A - our program does not provide and/or is not reporting on this support service 99 = Unknown	0-2, 88, 99	A4	



Data Element	Variable Name	Definition/Description	Data Type and Length	Values Descriptions/ Labels	Permissible Values	Indicator(s) Data Element Needed For	Existing State Data System Option, if applicable (not required source)
125. Adult assessed for dental care services	ADENTAL1	Adult assessed for dental care needs.  If your program does not provide this assessment, please enter 88.	Char (2)	0 = No 1 = Yes (either prior to or at time of entry to RPG program) 2 = N/A – not identified as a need 88 = N/A – our program does not provide and/or is not reporting on this assessment 99 = Unknown	0-2, 88, 99	A4	
126. Dental care services initiated	ADENTAL2	Dental care services will be determined by the grantee according to their program model, but may include services such as dental check-ups and cleaning, evaluation, diagnosis, and/or treatment (nonsurgical, surgical, or related procedures) of diseases, disorders, and/or conditions of the oral cavity, maxillofacial area, and/or the adjacent and associated structures.	Char (2)	0 = No 1 = Yes - either initiated or continued/expanded (if already receiving upon RPG program entry) 2 = N/A - not identified as a need 88 = N/A - our program does not provide and/or is not reporting on this support service 99 = Unknown	0-2, 88, 99	A4	
127. Adult assessed for mental health services	AMH1	Adult assessed for mental health care needs.  If your program does not provide this assessment, please enter 88.	Char (2)	0 = No 1 = Yes (either prior to or at time of entry to RPG program) 2 = N/A – not identified as a need 88 = N/A – our program does not provide and/or is not reporting on this assessment 99 = Unknown	0-2, 88, 99	A4	



Data Element	Variable Name	Definition/Description	Data Type and Length	Values Descriptions/ Labels	Permissible Values	Indicator(s) Data Element Needed For	Existing State Data System Option, if applicable (not required source)
128. Mental health services initiated	AMH2	Mental health services will be determined by the grantee according to their program model, but may include services such as cognitive-behavioral therapy; individual therapy, family therapy and/or group therapy; services for depression, anxiety, affective and somatization disorders; therapy for trauma and PTSD.	Char (2)	0 = No 1 = Yes - either initiated or continued/expanded (if already receiving upon RPG program entry) 2 = N/A - not identified as a need 88 = N/A - our program does not provide and/or is not reporting on this support service 99 = Unknown	0-2, 88, 99	A4	
129. Adult assessed for child care needs	ACHCARE1	Adult assessed for child care needs.  If your program does not provide this assessment, please enter 88.	Char (2)	0 = No 1 = Yes (either prior to or at time of entry to RPG program) 2 = N/A - not identified as a need 88 = N/A - our program does not provide and/or is not reporting on this support service 99 = Unknown	0-2, 88, 99	A4	
130. Child care services initiated	ACHCARE2	Child care services will be determined by the grantee according to their program model, but may include things such as preschool, child care, after-school care programs, and respite care.	Char (2)	0 = No 1 = Yes - either initiated or continued/expanded (if already receiving upon RPG program entry) 2 = N/A - not identified as a need 88 = N/A - our program does not provide and/or is not reporting on this support service 99 = Unknown	0-2, 88, 99	A4	



Data Element	Variable Name	Definition/Description	Data Type and Length	Values Descriptions/ Labels	Permissible Values	Indicator(s) Data Element Needed For	Existing State Data System Option, if applicable (not required source)
131. Adult assessed for transportation needs	ATRANSP1	Adult assessed for transportation needs.  If your program does not provide this assessment, please enter 88.	Char (2)	0 = No 1 = Yes (either prior to or at time of entry to RPG program) 2 = N/A – not identified as a need 88 = N/A – our program does not provide and/or is not reporting on this assessment 99 = Unknown	0-2, 88, 99	A4	
132. Transportation services initiated	ATRANSP2	Transportation services will be determined by the grantee according to their program model, but may include services such as transportation to and from the recovery and treatment site, and to and from ancillary services.	Char (2)	0 = No 1 = Yes - either initiated or continued/expanded (if already receiving upon RPG program entry) 2 = N/A - not identified as a need 88 = N/A - our program does not provide and/or is not reporting on this support service 99 = Unknown	0-2, 88, 99	A4	
133. Adult assessed for housing needs	AHOUSE1	Adult assessed for housing needs.  If your program does not provide this assessment, please enter 88.	Char (2)	0 = No 1 = Yes (either prior to or at time of entry to RPG program) 2 = N/A – not identified as a need 88 = N/A – our program does not provide and/or is not reporting on this assessment 99 = Unknown	0-2, 88, 99	A4	



Data Element	Variable Name	Definition/Description	Data Type and Length	Values Descriptions/ Labels	Permissible Values	Indicator(s) Data Element Needed For	Existing State Data System Option, if applicable (not required source)
134. Housing services initiated	AHOUSE2	Housing assistance will be determined by the grantee according to their program model, but may include services such as help with housing applications, advocacy, transportation, encouragement and motivation, understanding and complying with the housing program's regulations, assistance in obtaining safe, affordable, permanent housing, developing adequate independent living skills to maintain housing.	Char (2)	0 = No 1 = Yes - either initiated or continued/expanded (if already receiving upon RPG program entry) 2 = N/A - not identified as a need 88 = N/A - our program does not provide and/or is not reporting on this support service 99 = Unknown	0-2, 88, 99	A4	
135. Adult assessed for parenting training/child development education needs	APARENT1	Adult assessed for parenting training or education needs.  If your program does not provide this assessment, please enter 88.	Char (2)	0 = No 1 = Yes (either prior to or at time of entry to RPG program) 2 = N/A – not identified as a need 88 = N/A – our program does not provide and/or is not reporting on this assessment 99 = Unknown	0-2, 88, 99	A4	
136. Parenting training/education services initiated	APARENT2	Parenting training/child development education will be determined by the grantee according to their program model, but may include services such as parent counseling, parenting skills training, child development and care taking education and training, skill building.	Char (2)	0 = No 1 = Yes - either initiated or continued/expanded (if already receiving upon RPG program entry) 2 = N/A - not identified as a need 88 = N/A - our program does not provide and/or is not reporting on this support service 99 = Unknown	0-2, 88, 99	A4	



Data Element	Variable Name	Definition/Description	Data Type and Length	Values Descriptions/ Labels	Permissible Values	Indicator(s) Data Element Needed For	Existing State Data System Option, if applicable (not required source)
137. Adult assessed for domestic violence	ADOMVIO1	Adult screened and/or assessed for domestic violence.  If your program does not provide this assessment, please enter 88.	Char (2)	0 = No 1 = Yes (either prior to or at time of entry to RPG program) 2 = N/A – not identified as a need 88 = N/A – our program does not provide and/or is not reporting on this assessment 99 = Unknown	0-2, 88, 99	A4	
138. Domestic violence services initiated	ADOMVIO2	Domestic violence services will be determined by the grantee according to their program model, but may include services such as domestic violence prevention and treatment services, referrals to or provision of safe housing/shelter, trauma-informed and trauma-specific services, legal advocacy and assistance.	Char (2)	0 = No 1 = Yes - either initiated or continued/expanded (if already receiving upon RPG program entry) 2 = N/A - not identified as a need 88 = N/A - our program does not provide and/or is not reporting on this support service 99 = Unknown	0-2, 88, 99	A4	
139. Adult assessed for employment or vocational training/education needs	AEMPLY1	Adult assessed for employment or vocational training/education needs.  If your program does not provide this assessment, please enter 88.	Char (2)	0 = No 1 = Yes (either prior to or at time of entry to RPG program) 2 = N/A – not identified as a need 88 = N/A – our program does not provide and/or is not reporting on this assessment 99 = Unknown	0-2, 88, 99	A4	



Variable Name	Definition/Description	Data Type and Length	Values Descriptions/ Labels	Permissible Values	Indicator(s) Data Element Needed For	Existing State Data System Option, if applicable (not required source)
AEMPLY2	Employment or vocational training/education	Char (2)	0 = No	0-2, 88, 99	A4	
	to their program model, but may include services such as educational and vocational screening and assessment, pre-vocational		1 = Yes - either initiated or continued/expanded (if already receiving upon RPG program entry)			
	employment/vocational counseling, training		2 = N/A – not identified as a need			
and vocational services.		88 = N/A – our program does not provide and/or is not reporting on this support service				
ACONTCR1	Adult assessed for continuing care/recovery support needs.  If your program does not provide this assessment, please enter 88.	Char (2)	0 = No 1 = Yes (either prior to or at time of entry to RPG program) 2 = N/A – not identified as a need 88 = N/A – our program does not provide and/or is not reporting on this assessment	0-2, 88, 99	A4	
			99 = Unknown			
ACONTCR2	Continuing care/recovery support will be determined by the grantee according to their program model, but may include services such as aftercare, relapse prevention, peer recovery support, recovery coaching, self-help support groups, spiritual support, etc.	Char (2)	1 = Yes - either initiated or continued/expanded (if already receiving upon RPG program entry) 2 = N/A - not identified as a need 88 = N/A - our program does not provide and/or is not reporting on this assessment	0-2, 88, 99	A4	
	Name	AEMPLY2  Employment or vocational training/education will be determined by the grantee according to their program model, but may include services such as educational and vocational screening and assessment, pre-vocational counseling, basic life skills training, employment/vocational counseling, training and educational programs, and employment and vocational services.  ACONTCR1  Adult assessed for continuing care/recovery support needs.  If your program does not provide this assessment, please enter 88.  ACONTCR2  Continuing care/recovery support will be determined by the grantee according to their program model, but may include services such as aftercare, relapse prevention, peer recovery support, recovery coaching, self-	AEMPLY2  Employment or vocational training/education will be determined by the grantee according to their program model, but may include services such as educational and vocational screening and assessment, pre-vocational counseling, basic life skills training, employment/vocational counseling, training and educational programs, and employment and vocational services.  ACONTCR1  Adult assessed for continuing care/recovery support meeds.  If your program does not provide this assessment, please enter 88.  Char (2)  ACONTCR2  Continuing care/recovery support will be determined by the grantee according to their program model, but may include services such as aftercare, relapse prevention, peer recovery support, recovery coaching, self-	AEMPLY2  Employment or vocational training/education will be determined by the grantee according to their program model, but may include services such as aftercare, relapse prevention, peer recovery support groups, spiritual support, etc.  Char (2)  Char (2)  Char (2)  Char (2)  Char (2)  1 = Yes - either initiated or continued/expanded (if already receiving upon RPG program entry)  2 = N/A - not identified as a need  88 = N/A - our program does not provide and/or is not reporting on this support service  99 = Unknown  Char (2)  Char (2)  1 = Yes - either initiated or continued/expanded (if already receiving upon RPG program entry)  2 = N/A - not identified as a need  88 = N/A - our program does not provide this assessment, please enter 88.  Char (2)  1 = Yes (either prior to or at time of entry to RPG program)  2 = N/A - not identified as a need  88 = N/A - our program does not provide and/or is not reporting on this assessment  99 = Unknown  Char (2)  1 = Yes - either initiated or continued for their program model, but may include services such as aftercare, relapse prevention, peer recovery support, recovery coaching, self-help support groups, spiritual support, etc.  Char (2)  Char (2)  1 = Yes - either initiated or continued/expanded (if already receiving upon RPG program entry)  2 = N/A - not identified as a need  8 = N/A - not identified as an need	AEMPLY2  Employment or vocational training/education will be determined by the grantee according to their program model, but may include services such as educational and vocational screening and assessment, pre-vocational counseling, basic life skills training, employment/vocational counseling, training and expensions, and employment and vocational services.  ACONTCR1  ACONTCR1  ACONTCR1  ACONTCR2  Continuing care/recovery support will be determined by the grantee according to their program does not provide and/or is not reporting on this assessment, please enter 88.  Char (2)  Char (2)  Char (2)  Char (2)  Char (2)  Char (2)  Char (3)  Char (4)  Char (5)  Char (6)  Char (6)  Char (7)  Char (8)  Char (9)  Char (9)  Char (9)  Char (10)  Ch	AEMPLY2  Employment or vocational training/education will be determined by the grantee according to their program model, but may include services such as educational and vocational screening and assessment, pre-vocational counseling, basic life skills training, employment/vocational counseling, training and educational programs, and employment and vocational services.  Char (2)  Char (2)  1 = Yes - either initiated or continue/dexpanded (if already receiving upon RPC program entry) 2 = N/A - not identified as a need as = N/A - our program does not provide and/or is not reporting on this support service 99 = Unknown  ACONTCR1  Adult assessed for continuing care/recovery support needs.  If your program does not provide this assessment, please enter 88.  Char (2)  Char (2)  0 = No 1 = Yes (either prior to or at time of entry to RPG program) 2 = N/A - our program does not provide and/or is not reporting on this assessment 99 = Unknown  ACONTCR2  Continuing care/recovery support will be determined by the grantee according to their program model, but may include services such as aftercare, relapse prevention, peer recovery support, recovery coaching, self-help support groups, spiritual support, etc.  Char (2)  1 = No 1 = Yes - either initiated or continued/expanded (if already receiving upon RPG program entry) 2 = N/A - our program does not provide and/or is not reporting on this assessment  Char (2) 2 = N/A - not identified as a need 8 = N/A - our program does not provide and/or is not reporting on this assessment



Data Element	Variable Name	Definition/Description	Data Type and Length	Values Descriptions/ Labels	Permissible Values	Indicator(s) Data Element Needed For	Existing State Data System Option, if applicable (not required source)
143. Adult assessed for use of alternative therapies/natural healing practices	AALT1	Adult assessed for use of alternative therapies/natural healing practices.  If your program does not provide this assessment, please enter 88.	Char (2)	0 = No 1 = Yes (either prior to or at time of entry to RPG program) 2 = N/A - not identified as a need 88 = N/A - our program does not provide and/or is not reporting on this assessment 99 = Unknown	0-2, 88, 99	A4	
144. Alternative therapies/natural healing practices initiated	AALT2	Alternative therapies/natural healing practices will be determined by the grantee according to their program model, but may include services or strategies such as acupuncture, alternative medicine and traditional healing practices used in Tribal communities (e.g., use of a medicine person, who may perform a ceremony or provide natural herbs, teas or spiritual interventions.	Char (2)	0 = No 1 = Yes - either initiated or continued/expanded (if already receiving upon RPG program entry) 2 = N/A - not identified as a need 88 = N/A - our program does not provide and/or is not reporting on this support service 99 = Unknown	0-2, 88, 99	A4	



Data Element	Variable Name	Definition/Description	Data Type and Length	Values Descriptions/ Labels	Permissible Values	Indicator(s) Data Element Needed For	Existing State Data System Option, if applicable (not required source)	
SPECIFIC DATA ELEMENTS TO BE USED TO CALCULATE <u>REGIONAL PARTNERSHIP/SERVICE CAPACITY</u> INDICATOR MEASURES								
will not need to be	Please note that the Collaborative Capacity Inventory (CCI) scores, which will be used to measure indicator R1. Collaborative Capacity, will not need to be submitted to the RPG Data System because the regional partnerships complete the CCI via the Internet and the results are automatically submitted to the Center for Children and Family Futures (CCFF) for tabulation and analysis for the sites.							
Not all grantees w indicators.	ill collect a	nd report every data element; the	number	of data elements will	depend on th	e grantee's	final set of	
145. Number of substance abuse treatment programs 12 months prior to RPG program implementation	TXPGMS_0	Twelve (12) months prior to the implementation of the RPG program, the number of substance abuse treatment programs for the target population managed by RPG partner agencies. This number to serve as baseline.  Related optional data element: TXSLOTS_0	Integer	Enter number of treatment programs	>=0	R2		
146. Number of substance abuse treatment programs at the end of each semi-annual progress reporting period	TXPGMS_1	At the end of each semi-annual progress reporting period, the number of available substance abuse treatment programs for the target population managed by RPG partner agencies.  The two progress reporting periods reflect the period October 1 - March 31 and April 1 - September 30 of each year.  Program is defined by adding additional services or a new level of care that didn't previously exist or wasn't available for families in the child welfare system.  Related optional data element: TXSLOTS_1	Integer	Enter number of treatment programs	>=0	R2		



Data Element	Variable Name	Definition/Description	Data Type and Length	Values Descriptions/ Labels	Permissible Values	Indicator(s) Data Element Needed For	Existing State Data System Option, if applicable (not required source)
147. Number of adults who received substance abuse treatment 12 months prior to RPG program implementation	ADSVD_0	Twelve (12) months prior to implementation of the RPG program, number of adults (unduplicated count) in the target population served by RPG partner agencies who received substance abuse treatment (serves as baseline). There may be more than one parent/caregiver per family receiving treatment. Each adult should be counted separately.	Integer	Enter number of adults	>=0	R2	
148. Number of adults who received substance abuse treatment at the end of each semi-annual progress reporting period	ADSVD_1	At end of each semi-annual progress reporting period, number of adults (unduplicated count) in the target population served by RPG partner agencies who received substance abuse treatment. There may be more than one parent/caregiver per family receiving treatment. Each adult should be counted separately.  The two progress reporting periods reflect the period October 1 - March 31 and April 1 - September 30 of each year.	Integer	Enter number of adults	>=0	R2	
149. Number of children, of adults who received substance abuse treatment, who received services 12 months prior to RPG program implementation	CHSVD_0	Twelve (12) months prior to implementation of the RPG program, the number of children (unique count) – of adults in the target population served by RPG partner agencies who received substance abuse treatment – who received any type of services, such as those listed in indicator C8, that are designed to meet a child's education, physical and mental health needs.  This serves as baseline.	Integer	Enter number of children	>=0	R2	



Data Element	Variable Name	Definition/Description	Data Type and Length	Values Descriptions/ Labels	Permissible Values	Indicator(s) Data Element Needed For	Existing State Data System Option, if applicable (not required source)
150. Number of children, of adults who received substance abuse treatment, who received services at the end of each semi-annual progress reporting period	CHSVD_1	At end of each semi-annual progress reporting period, number of children (unique count) – of adults in the target population served by RPG partner agencies who received substance abuse treatment – who received any type of services, such as those listed in indicator C8, that are designed to meet a child's education, physical and mental health needs.  The two progress reporting periods reflect the period October 1 - March 31 and April 1 - September 30 of each year.	Integer	Enter number of children	>=0	R2	
151. Number of substance abuse treatment slots 12 months prior to RPG program implementation	TXSLOT_0	Twelve (12) months prior to the implementation of the RPG program, the total number of substance abuse treatment slots for the target population managed by RPG partner agencies. This number to serve as baseline.	Integer	Enter number of treatment slots If you are not collecting this optional data element, leave blank.	>=0	R2	
Optional Data Element		This is an optional data element for those grantees reporting indicator R2.					
152. Number of substance abuse treatment slots, at the end of each semi-annual progress reporting period	TXSLOT_1	At the end of each semi-annual progress reporting period, the total number of substance abuse treatment slots for the target population managed by RPG partner agencies.  The progress reports reflect the period ending March 31 and September 30 of each year.	Integer	Enter number of treatment slots If you are not collecting this optional data element, leave blank.	>=0	R2	
Optional Data Element		This is an optional data element for those grantees reporting indicator R2.					



# III. Calculation of the Indicator Measures

This section includes the final wording of each of the 23 indicators, provides additional information describing or defining the indicator, as needed; lists the data elements to be used to calculate the indicator and conduct data analyses; and explains how the measure will be calculated. For some indicators, not all data elements listed may be included in the outlined calculation. This is because in certain instances, additional data elements are needed and will be used for contextual/background information when the RPG SC Project Team conducts supplemental data analyses and prepares reports for the Children's Bureau and/or Congress.

# **CHILD/YOUTH INDICATORS**

C1. Children remain at home: Percentage of children identified as at risk of removal from the home who are able to remain in the custody of a parent or caregiver through RPG case closure

Additional Clarifying Information/Guidelines

This indicator applies to grantees that are serving families where at least one child has not been removed from the home and program services are targeted at keeping child(ren) with the parent or caregiver. "Children identified at risk of removal" are defined as those with an open file – either with the child welfare, substance abuse treatment or other primary service agency under the grantee's RPG project; "at risk" is not limited to only those with a substantiated/indicated finding of child maltreatment.

### Data Elements

- 36. Date file opened with the RPG program (FILE O)
- 37. Date file closed with the RPG program (FILE\_C)
- 38. Child victim of substantiated maltreatment (MALTXVIC)
- 40. Date of maltreatment report (RPTDT)
- 41. Date of maltreatment report disposition (RPTDISDT)
- 42 45. Type of maltreatment (CHMAL1, CHMAL2, CHMAL3, CHMAL4)
- 46. Child removed from home (REMOVED)
- 47. Date of latest removal from home (REMOVDT)
- 48. Date of current placement in foster care setting (PLACEDT)

### Calculation

Numerator: Of all closed RPG cases, number of children at risk of removal who remained in

custody of parent/caregiver through RPG case closure

Denominator: Of all closed RPG cases, number of children in the home at time of RPG

enrollment at risk of removal whose RPG case is now closed

The numerator will be determined by selecting out those children whose RPG case is closed (FILE\_C ≠ missing) and were either not removed from home at all (REMOVED=0) or were removed after RPG case closure (REMOVED=1 and REMOVDT>FILE C).



Additional data elements will be used for more detailed analyses for inclusion in reports or briefings to the Children's Bureau and Congress. For example, it will be useful to know if there was a substantiated child maltreatment incident, as well as the type of maltreatment and outcome, on children who remained at home.

Because this indicator is centered on closed RPG cases, it is likely that there will be a small number of cases to report on initially. As such, the RPG SC Project Team will explore looking at open RPG cases at the end of each reporting period for children being served in the home and never removed (this would be supplemental analysis and not affect the reporting on the indicator as specified).

C2. Occurrence of child maltreatment: Percentage of children who had an initial occurrence and/or recurrence of substantiated/indicated child maltreatment within 6, 12, 18 and 24 months after enrolling in the RPG program

Additional Clarifying Information/Guidelines

For consistency and comparability with the CFSR measure on recurrence, the definition of substantiated/indicated maltreatment does not include those with disposition of alternative response victim.

A special note about reporting maltreatment at 6, 12, 18 and 24 months: Grantees will not have to calculate these figures. Grantees' reporting of any incidents of maltreatment will simply take place within the context of their required semi-annual progress reporting period dates. It will then be the responsibility of the RPG SC Project Team to use the various date data elements to figure maltreatment rates at the given time points after enrollment in the RPG program.

### Data Elements

- 36. Date file opened with the RPG program (FILE\_O)
- 38. Child victim of substantiated maltreatment (MALTXVIC)
- 40. Date of maltreatment report (RPTDT)
- 41. Date of maltreatment report disposition (RPTDISDT)
- 42 45. Type of maltreatment (CHMAL1, CHMAL2, CHMAL3, CHMAL4)

### Calculation

Numerator: Number of children who had a substantiated/indicated child maltreatment report

after enrolling in the RPG program

Denominator: Number of children enrolled in the RPG program

The numerator will be determined selecting out those children who had a substantiated/indicated maltreatment report (MALTXVIC=1) after enrolling in the RPG program (RPTDT>=FILE O).



Both the report and disposition date are collected because each offers important information. The report date tells us when the incident took place, while the disposition date tells us when the child welfare agency or court made a determination about the report. A disposition is needed to determine whether a report was substantiated or indicated. For consistency and comparability with the CFSR measures, occurrence and recurrence within the specified 6, 12, 18 and 24-month time frames will be calculated using the report date(s). Additional data elements related to type of maltreatment will be used for more detailed analyses for inclusion in reports/briefings to the Children's Bureau and Congress.

# C3. Average length of stay in foster care: For children discharged from foster care, their average length of stay (in days) from date of most recent entry into such care until date of discharge

## Additional Clarifying Information/Guidelines

This indicator applies to children who have been removed from home and placed in out-of-home care. In addition to the State's legal definition of reunification, it is important to also collect the functional (physical) reunification date (i.e., parent and child are together physically, even if legal custody is with the State). Both dates are needed to track reunification because the two dates may be months apart based on a court backlog, rather the actual time that the parent was able to resume custody. Only using the legal date could therefore skew the data substantially. In obtaining the functional reunification date, the specific data variables may differ by grantee, depending on how their State system works. In some cases, this date may be the last completion date entered; for other States, it may be gleaned elsewhere from their State's child welfare administrative system.

To accommodate different client pathways into a RPG program, data elements have been included that provide us with various key dates, including date file was opened with the RPG, date file opened with child welfare system, date child removed from home, and date of current placement (to determine if child was in a trial discharge arrangement). In addition to date of latest removal from home, which could have preceded RPG, placement date will also be important in conducting data analyses and preparing reports. Having the different dates provides needed discretion for analyzing and reporting the data in a way that most accurately reflects the progress of grantees.

### Data Elements

- 36. Date file opened with the RPG program (FILE O)
- 67. Date file opened with child welfare system (CWFILE O)
- 46. Child removed from home (REMOVED)
- 47. Date of latest removal from home (REMOVDT)
- 48. Date of current placement in foster care setting (PLACEDT)
- 49. Date child reunified with parent/caregiver (REUNDT)
- 50. Date of discharge from foster care (FCDISDT)
- 51. Reason for foster care discharge (FCDISP)



### Calculation

Within a given reporting period, select out those children who entered foster care and were subsequently reunified with their parent or caregiver and/or legally discharged from foster care (REMOVED=1 and REUNDT or FCDISDT<=end date of reporting period).

Average length of stay will be calculated as follows: (REUNDT or FCDISDT) - (REMOVDT).

Date fields will be converted to numeric fields as needed for calculation of this indicator. As stated above, the analysis will look at extent of variance between functional reunification date (REUNDT) and legal discharge date (FCDISDT) to determine the appropriate date to use in calculating average length of stay. The average length of stay will be calculated by summing the number of days in foster care for all children entering foster care and dividing the total by the number of discharges from foster care.

Additional data elements will be used for contextual/background information when the RPG SC Project Team conducts data analyses and prepares reports for Children's Bureau and/or Congress.

# C4. Re-entries to foster care: Percentage of children returned home from foster care that re-entered foster care in less than 6, 12, 18 and 24 months

# Additional Clarifying Information/Guidelines

This indicator applies to children who were removed from home and reunified with their parent/caregiver. Grantees will not have to calculate these figures. Reporting of any re-entries will simply take place within the context of their required semi-annual progress reporting due dates. The RPG SC Project Team will use the various date data elements to figure out re-entry rates that occurred within the given time periods specified.

See comments under C3 regarding the importance of obtaining both the functional (physical) date of reunification and the legal date of reunification to track reunification. In addition to date of latest removal from home, which could have preceded RPG, placement date will also be important in conducting data analyses and preparing reports. Having the different dates provides needed discretion for analyzing and reporting the data in a way that most accurately reflects the progress of grantees.

### Data Elements

- 46. Child removed from home (REMOVED)
- 47. Date of latest removal from home (REMOVDT)
- 48. Date of current placement in foster care setting (PLACEDT)
- 49. Date child reunified with parent/caregiver (REUNDT)
- 50. Date of discharge from foster care (FCDISDT)
- 51. Reason for foster care discharge (FCDISP)



### Calculation

Numerator: Number of children who were returned home from foster care who re-entered

foster care

Denominator: Number of children who were returned home from foster care

The numerator will be determined by selecting those children who had been removed from home and placed in foster care, were reunified with their parent/caregiver, and then re-entered foster care.

The denominator will be determined by selecting out those who had been removed from home and placed in foster care and were reunified with their parent/caregiver.

The various date fields will be converted to numeric fields as needed to calculate re-entry within the specified time frames. As stated above, the analysis will look at extent of variance between functional reunification date (REUNDT) and legal discharge date (FCDISDT) to determine the appropriate date to use.

# C5. Timeliness of reunification: Percentage of children who were reunified in less than 12 months from the date of the most recent entry into foster care

# Additional Clarifying Information/Guidelines

See comments under C3 regarding the importance of obtaining both the functional (physical) date of reunification and the legal date of reunification to track reunification. In addition to date of latest removal from home, which could have preceded RPG, current placement date will also be important in conducting data analyses and preparing reports. Having the different dates provides needed discretion for analyzing and reporting the data in a way that most accurately reflects the progress of grantees.

### Data Elements

- 47. Date of latest removal from home (REMOVDT)
- 48. Date of current placement in foster care setting (PLACEDT)
- 49. Date child reunified with parent/caregiver (REUNDT)
- 50. Date of discharge from foster care (FCDISDT)
- 51. Reason for foster care discharge (FCDISP)

### Calculation

Numerator: Number of children reunified in less than 12 months

Denominator: Number of children in foster care who exited foster care to reunification

The numerator will be determined by selecting those children who were discharged to reunification or living with other relative (FCDISP=1 or 2) in less than 12 months ([REUNDT or FCDISDT] – REMOVDT=364 days or less). Date fields will be converted to numeric fields for calculation.



The denominator will be determined by selecting out those who had been placed in foster care and discharged to reunification or living with other relative (REMOVED=1 and FCDISP=1 or 2).

Please note that for purposes of calculating the CFSR measures, ACF counts those coded as "living with other relative" as a valid reunification. Children who are discharged from foster care to the official responsibility of a relative are considered to be in a permanent placement and, for CFSR purposes, this is deemed reunification. To be consistent with the CFSRs, this project will also combine these two codes, as indicated above.

C6. Timeliness of permanency: Percentage of children placed in foster care who, in less than 24 months from the date of the most recent foster care placement, achieved a) a finalized adoption or b) legal guardianship

Additional Clarifying Information/Guidelines

Nothing of special note; indicator is self-explanatory.

### Data Elements

- 47. Date of latest removal from home (REMOVDT)
- 48. Date of current placement in foster care setting (PLACEDT)
- 50. Date of discharge from foster care (FCDISDT)
- 51. Reason for foster care discharge (FCDISP)

### Calculation

Numerator: Number of children in foster care who achieved a finalized adoption in less than

24 months

Denominator: Number of children in foster care who exited foster care to a finalized adoption

Numerator: Number of children in foster care who achieved a legal guardianship in less than

24 months

Denominator: Number of children in foster care who exited foster care to a legal guardianship

The numerator will be determined by selecting those children who achieved a finalized adoption (FCDISP=3) or legal guardianship (FCDISP=5) in less than 24 months (FCDISDT–REMOVDT=729 days or less).

The denominator will be determined by selecting out those who have been discharged from foster care to a finalized adoption (FCDISP=3) or legal guardianship (FCDISP=5) and FCDISDT>=[ending date of given reporting period])

Date fields will be converted to numeric fields as needed for calculation of this indicator. Percentages will be reported separately for adoption and guardianship.



# C7. Prevention of substance-exposed newborns: Percentage of pregnant women who had a substance exposed newborn (first or subsequent), as detected at birth

### Additional Clarifying Information/Guidelines

This indicator was defined as substance exposure, as detected at birth. This means that the determination would come from a doctor or other health care professional assessing the newborn baby's health. Identification of substance-exposed newborns is determined primarily by clinical indicators, including maternal and newborn presentation, history of mother's substance use/abuse, medical history and/or toxicology results. For purposes of reporting this indicator, tobacco is not included in the definition of "other drugs" (though it is recognized that tobacco exposure can have significant consequences to the baby's health). A grantee may collect information on tobacco exposure and report that separately in their local evaluation. In addition, recognizing that the different substances may have different effects on a newborn's health and development, grantees who are able to identify the specific substance of exposure may report that more detailed information as part of their local evaluation as well.

Grantees that are focused on reducing the incidence of prenatal substance use and who are planning to capture risk of exposure as determined by prevalence of substance use during the prenatal period should collect and report use during pregnancy as a different measure that is part of their local evaluation.

A substance-exposed birth may be considered a *subsequent* occurrence regardless of when the initial substance-exposed birth occurred (i.e., the initial substance-exposed birth may have occurred prior to the client's enrollment into the RPG program).

### Data Elements

If reporting on case level:

52. Newborn date of birth (NEWDOB)

53. Substance exposure detected at birth

54. Subsequent substance-exposed birth (SEB2)

If reporting in aggregate:

Total number of births (TOTBIRTHS)

Total number of births in which substance exposure was detected (TOTSEB)

Total number of subsequent substanceexposed births (TOTSEB2)

### Calculation

For any substance-exposed birth:

Numerator: Number of pregnant women with a substance-exposed birth

Denominator: Number of pregnant women

For subsequent substance-exposed birth:

Numerator: Of pregnant women with a substance-exposed birth, number with a subsequent

substance-exposed birth

Denominator: Number of pregnant women with a substance-exposed birth



C8. Children connected to supportive services: Percentage of children who were assessed for and received the following supportive services: developmental services, mental health or counseling, primary pediatric care, substance abuse prevention and education, substance abuse treatment, educational services, and other supportive services.

### Additional Clarifying Information/Guidelines

For the purposes of this grant program, the supportive services delineated for this measure are defined as follows:

- Developmental services may include but not be limited to screening and assessments for any physical, social/emotional, cognitive and/or behavioral delays and/or concerns, early intervention and/or therapy services (speech, physical, occupational, play and/or individual, family and/or parent/child mental health therapy) vision and hearing services, infant development programs, nutrition/feeding services, community-based rehabilitative services.
- Mental health or counseling may include but not be limited to cognitive-behavioral therapy, individual therapy, family therapy, group therapy, PTSD services (for trauma, violence, abuse), play therapy, art therapy, services for depression and anxiety.
- Primary pediatric care may include but not be limited to well-child or routine check-ups to
  monitor physical and psychosocial growth and development, immunizations, health
  supervision and anticipatory guidance, age-appropriate screening, diagnosis and
  treatment of acute and chronic disorders, management of serious and life-threatening
  illness, and referrals to specialists for more complex conditions where appropriate.
- Substance abuse prevention and education may include but not be limited to support
  groups for children of substance abusing parents or divorced parents; education
  programs for youth who have problems managing their anger; community support
  activities such as mentoring programs for youth who are truant, failing in school or
  having difficulties in relationships with peers and family; early identification of substance
  abuse problems and referral to treatment services for youth in schools; programs that
  provide opportunities for youth to learn skills that help them relate to others,
  communicate, problem-solve more effectively and set future goals, etc.
- Substance abuse treatment services may include clinical treatment services provided in a residential, inpatient or outpatient setting and related clinical and community support services.
- Educational services may include but not be limited to mentoring, tutoring, reading
  instruction, remediation, school assessments, services, drop-out prevention programs,
  school-based early intervention programs, and similar services. This may include
  IEP/IFSP planning and services for children who qualify for Special Education Services
  and/or services under IDEA Part C, as well as remedial, school readiness and other
  early intervention services for children who do not qualify.
- Other supportive services include any other services a grantee is proposing to provide (either directly or by referral); grantees should report information on these other support services in their Semi-Annual Progress Reports and/or local evaluations.



Where and when an assessment takes place may vary from site to site. For instance, parents may be admitted to treatment before being referred to RPG services. It will depend on your grant program where an assessment for these services occurs; it is anticipated that the need for these services could be identified in a child welfare intake and/or a substance abuse treatment intake. If your RPG is providing any of these services, either directly or through referrals or linkages, then they would be reported. Data should be collected on all children named in the child welfare case or on all children living in the household, and on any parent or caregiver with a substance use disorder that is part of the child welfare or substance abuse treatment case.

### Data Elements

- 55. Child assessed for developmental services (CHDEV1)
- 56. Developmental services initiated (CHDEV2)
- 57. Child assessed for mental health or counseling services (CHMH1)
- 58. Mental health or counseling services initiated (CHMH2)
- 59. Child assessed for primary pediatric care (CHMED1)
- 60. Primary pediatric care initiated (CHMED2)
- 61. Child assessed for substance abuse prevention services (CHSAP1)
- 62. Substance abuse prevention services initiated (CHSAP2)
- 63. Child assessed for substance abuse treatment (CHSATX1)
- 64. Substance abuse treatment initiated (CHSATX2)
- 65. Child assessed for educational services (CHEDUC1)
- 66. Educational services initiated (CHEDUC2)

#### Calculation

For percentage assessed:

Numerator: Number of children assessed for [given supportive service]

Denominator: Number of children enrolled in the RPG program

For percentage that received services:

Numerator: Number of children for whom [given supportive service] was initiated

Denominator: Number of children assessed for [given supportive service]

C9. Improved child well-being: Percentage of children who show an increase in socioemotional, behavioral, developmental and/or cognitive functioning.

### Additional Clarifying Information/Guidelines

The purpose of this indicator is to measure improvement in the areas of child socio-emotional, behavioral, developmental and/or cognitive functioning. Grantees reporting on this indicator will measure change over time using a valid and reliable standardized tool or instrument that they deem most appropriate for their target population and program model. Baseline and subsequent instrument/test scores will be submitted without client identifying information. Grantees reporting on this indicator are using tools such as the Child Behavior Checklist (which has scales to measure affective problems, anxiety problems, pervasive developmental problems, Attention Deficit/Hyperactivity Problems, Oppositional Defiant problems, and language delays), the North



Carolina Family Assessment Scale (NCFAS) Child Well-Being subscales (which rate children's behavior and school problems), and the Ages and Stages Questionnaire (which screens for developmental delays).

As previously stated, once grantees finalize their selection of instruments and the estimated number of children who will be administered each instrument, the RPG SC Project Team will work with grantees to determine the most appropriate method for grantees to submit this data to the Children's Bureau. The number of grantees who are using a particular tool will influence this determination (e.g., whether grantees enter the data into the RPG Data System, include it in their Semi-Annual Progress Report, or submit in some other manner acceptable to the Children's Bureau and grantees).

#### Data Elements

To be determined based on the recommendations and protocols associated with the standardized instrument a grantee is using for their target population and the specific nature of the grantee's intervention and/or services designed to impact this indicator. Grantees selecting this indicator will measure a child's well-being at a minimum of two time periods (e.g., at program or treatment intake/entry for the baseline and at a follow-up period that is appropriate to the grantee's program design, such as program or treatment discharge).

### Calculation

To be determined based on the protocols associated with the standardized instrument a grantee is using. However, it may be calculated as the change in score at selected points of administration (e.g., baseline and discharge), as directed for a given instrument.

## **ADULT INDICATORS**

A1. Access to treatment: Percentage of parents or caregivers who were able to access timely and appropriate\* substance abuse treatment; number of days between program entry and treatment entry

Additional Clarifying Information/Guidelines

\* Because there is no agreed-upon standardized definition of "appropriate" treatment at this time, appropriate is an optional aspect of the indicator definition and geared toward those grantees who are using the American Society of Addiction Medicine Uniform Patient Placement Criteria (ASAM PPC), or a standardized assessment process that determines level of care in a manner consistent with the ASAM PPC, in which case appropriate would be defined as receiving the level of care assessed for, for those using the ASAM PPC (or consistent assessment process).

With regards to timely access to substance abuse treatment, the intent is to determine how long it takes someone to access treatment once they have entered the child welfare system (or the RPG program if they are focused on preventing child welfare involvement). So there are three data points to measure this: when a family enters the child welfare system, when a client receives a substance abuse assessment, and when a client enters substance abuse treatment.



Each RPG will operationalize this measure depending on the pathways by which a family enters the child welfare system and the RPG program, and substance abuse assessment and treatment.

In instances where a client receives multiple assessments, use the date of the assessment that resulted in the referral to treatment (rather than the date of an initial screen that resulted in a referral for a more extensive assessment). If it is not clear which one of multiple assessments led to treatment, then typically you will use the first assessment date. However, if your program's target population is existing child welfare clients and the assessment was completed before your program's start up, it would not be accurate to record that date. For this reason, the date the case was opened with the RPG program is included as a data element.

It is understood that data may not be available from private providers, unless they are a member of the regional partnership, or a grantee is able to obtain releases of information for their clients. If you cannot get the date someone entered private treatment, we are hoping that RPGs would at least be able to report whether an individual actually received treatment services from a private treatment facility (data element PUBPRVTX).

There will likely be some variability among grantees on what is considered "program entry" depending on their target population. Both date file opened with child welfare system and date file opened with RPG program are included because those dates may in fact be different; if the client was involved with the child welfare system first (which led to enrolling in RPG services), then that date will more accurately gauge length of time to treatment and assess larger system impact. However, a grantee's performance will be measured based on the time between when a parent/caregiver enters the RPG program and treatment.

### Data Elements

- 36. Date file opened with the RPG program (FILE O)
- 67. Date file opened with child welfare system (CWFILE O)
- 69. Date of parent/caregiver substance abuse assessment/intake (SAASSESS)
- 70. Level of care parent or caregiver assessed for (LOCRECOM) [optional data element]
- 71. Level of care parent or caregiver received at admission (LOCRECVD) [optional data element]
- 72. Parent/caregiver entered public or private treatment (PUBPRVTX)
- 73. Date parent/caregiver entered substance abuse treatment (TXADMIT)
- 74. Substance abuse treatment setting (TXSET)

### Calculation

Numerator: Number of parents/caregivers who were able to access timely and appropriate

treatment

Denominator: Number of parents/caregivers who entered substance abuse treatment

(PUBPRVTX=1 or 2)

To calculate the numerator, date fields will be converted to numeric fields to calculate number of days. Time to treatment will be calculated as follows: TXADMIT-(CWFILE\_O or FILE\_O or SAASSESS). As indicated above, the date used for "program entry" may differ depending on the grantee's target population. Time between entrance to child welfare and time to treatment will be looked at, as well as time between entrance to the RPG program and time to treatment.



Appropriate treatment (for those using the ASAMPPC) will be calculated as LOCRECOM=LOCRECVD.

A2. Retention in substance abuse treatment: a) Percentage of parents or caregivers referred to substance abuse treatment who remained until treatment completion; and b) Average length of stay in treatment for referred parents or caregivers

### Additional Clarifying Information/Guidelines

It is likely that a parent or caregiver may have multiple treatment episodes over the course of the grant project. Information should be recorded for each treatment episode. For purposes of this grant program, you do not need to record all placements or transitions from one level of care to another that may happen within an overall single treatment episode.

Treatment completion is defined according to TEDS discharge status variable (see data element TXSTATUS). It is understood that the California substance abuse treatment system (CalOMS) uses a slightly different discharge coding system. For California grantees, the table below indicates how CalOMS coding should be mapped to TEDS for RPG program purposes.

CalOMS	TEDS/RPG Data System
1 = Completed treatment/recovery plan, goals/referred. This occurs when a program participant completes his/her treatment/recovery plan and is being referred to another treatment/recovery program. For example, the individual is moving from one modality or type of service to another within a treatment episode.	1 = Treatment completion. All parts of treatment plan or program were completed.
2 = Completed treatment/recovery plan, goals/not referred. This occurs when a program participant completes his/her treatment/recovery plan and is not referred. For example, the participant has successfully completed an entire treatment episode and therefore is not referred for further services.	1 = Treatment completion. All parts of treatment plan or program were completed.
3 = Left before completion with satisfactory progress/referred. This occurs when a participant has made satisfactory progress in a program and was referred to a different program to continue with the services or to receive different services in a different program in the state.	4 = Transferred to another substance abuse treatment program or facility (and known to report). This code is used for all clients who have a change of service or provider within an episode of treatment, except when it is known that the client did not report to the next program.
4 = Left before completion with satisfactory progress and was not referred. This may occur if the participant was doing well in his/her treatment and stopped coming in without notice for a period of time exceeding the amount defined for the service modality in which the participant was enrolled	2 = Left against professional advice. Client chose not to complete treatment program, with or without specific advice to continue treatment. Includes clients who dropped out for unknown reason.
5 = Left before completion with unsatisfactory progress/referred. This occurs when a participant is referred to another program or service modality because they are not making satisfactory progress in the service/program in which they are participating	4 = Transferred to another substance abuse treatment program or facility (and known to report). This code is used for all clients who have a change of service or provider within an episode of treatment, except when it is known that the client did not report to the next program.



CalOMS	TEDS/RPG Data System
6 = Left before completion with unsatisfactory progress and was not referred. This code is intended for those individuals who are expelled from treatment prior to completing their services, under circumstances in which no exit interview would be completed. An example of when this would apply is if an individual participating in the treatment program is found with drugs on the premises and is immediately expelled from the program	3 = Terminated by facility. Treatment terminated by action of facility (not because client dropped out of treatment, or client incarcerated or other client reason
<b>7 = Death.</b> This should be used for individuals who die prior to completing the services in which they are participating	6 = Death
<b>8 = Incarceration.</b> individuals who become incarcerated prior to completing the services in which they are participating	5 = Incarcerated

#### Data Elements

- 72. Parent/caregiver entered public or private treatment (PUBPRVTX)
- 73. Date parent/caregiver entered substance abuse treatment (TXADMIT)
- 74. Substance abuse treatment setting (TXSET)
- 75. Date of last contact while in substance abuse treatment (TXLSTCON)
- 76. Date parent/caregiver discharged from substance abuse treatment (TXDISDT)
- 77. Substance abuse treatment discharge status (TXSTATUS)

### Calculation

For percentage who remained until treatment completion:

Numerator: Number of parents/caregivers referred to treatment who remained until treatment

completion

Denominator: Number of parents/caregivers who entered substance abuse treatment

(PUBPRVTX=1 or 2)

Because both treatment completion and transfer to further treatment represent positive conclusions to a treatment episode, the rates for treatment completion (TXSTATUS=1) and transfer (TXSTATUS=4) may be combined in some of the analyses. (This aligns with how discharge information is presented in the TEDS Discharge Reports.<sup>4</sup>)

Length of stay for parents/caregivers who entered substance abuse treatment ((PUBPRVTX=1 or 2) will be calculated by subtracting their treatment admission date from either the treatment discharge date or the last date of contact: (TXDISDT or TXLSTCON) – TXADMIT. As indicated in the data elements table in Section II, there may be certain instances in which a client drops out of treatment, but is not "discharged" for weeks or months after the end of treatment. Such delayed discharge dates result in invalid length of treatment calculations. For this reason, grantees should report both dates; the analyst will determine the most appropriate date to use in calculating length of treatment. All date fields will be converted to numeric fields to calculate number of days. The average length of stay will be calculated by summing the number of days in treatment for all discharges and dividing the total by the number of discharges.

<sup>&</sup>lt;sup>4</sup> See Substance Abuse and Mental Health Services Administration, Office of Applied Studies (2006). *Treatment Episode Data Set (TEDS): 2004. Discharges from Substance Abuse Treatment Services.* DASIS Series: S-35, DHHS Publication No. (SMA) 06-4207, Rockville, MD.



Additional data elements will be used for contextual/background information when the RPG SC Project Team conducts data analyses and prepares reports for the Children's Bureau and/or Congress.

A3. Substance use: Percentage of parents or caregivers who report a reduction in substance use, as measured by number of days of use in past 30 days at treatment intake and discharge.

Additional Clarifying Information/Guidelines

Due to the focus and nature of this grant program, it is important to distinguish which substances are being used – in particular, methamphetamine. Grantees need to record number of days of use in past 30 days at treatment intake and discharge for the substances listed below. For adults who may be incarcerated, record use during most recent 30-day period prior to incarceration. It is anticipated that past use at discharge will be obtained through either an exit interview, completion of a discharge form or knowledge obtained while client was participating in treatment.

Please note that methamphetamine needs to be broken out from other amphetamines or stimulants. For heroin and other opiates, grantees will have the option of collecting and reporting this information as a roll-up of all "heroin/other opiates" or breaking it down into more detailed subcategories, as indicated below. **Grantees using a standardized instrument, such as the Addiction Severity Index (ASI) or GPRA, to collect substance use information may need to modify their tool to cover the listing of substances below.** 

- 1. Alcohol
- 2. Cocaine/crack
- 3. Marijuana/hashish
- 4. Heroin/other opiates (note: grantees can report one total number here or break it down into the more detailed subcategories a e)
  - a. Heroin
  - b. Oxycontin/oxycodone
  - c. Hydrocodone (or Lortab)
  - d. Other opiates/synthetics (codeine, Dilaudid, morphine, Demerol, Darvon, opium, and any other drug with morphine-like effects)
  - e. Non-prescription methadone
- 5. Hallucinogens/psychedelics (includes PCP, LSD, MDMA, DMT, STP, mescaline, psilocybin, peyote, etc.)
- 6. Methamphetamine
- 7. Other amphetamines/stimulants (includes amphetamines, Benzedrine, Dexedrine, Preludin, Ritalin, any other amine and related drugs, non-amphetamine stimulants)
- 8. Benzodiazepines (includes diazepam, flurazepam, chlordiazepoxide, clorazepate, lorazepam, alprazolam, estasolam, oxazepam, temazepam, prazepam, triazolam, clonazepam, halazepam, and other unspecified benzodiazepines)
- 9. Barbiturates (includes Mephobarbital, pentobarbital sodium, Seconal, Nembutal)
- 10. Other tranquilizers or sedatives (includes non-benzodiazepine tranquilizers, non-barbiturate sedatives/hypnotics, chloral hydrate, Placidyl, Doriden)
- 11. Inhalants (includes ether, glue, chloroform, nitrous oxide, gasoline, paint thinner, etc.)



# 12. Other (all substances not otherwise specified)

Those grantees that plan to conduct drug testing and/or additional or follow-up assessments of substance use/abstinence at different time points (e.g., 3, 6, 9 months during and after completing treatment and following reunification) can report that information in their local evaluation and/or as an attachment to their Semi-Annual Progress Reports.

### Data Elements

- 73. Date parent/caregiver entered substance abuse treatment (TXADMIT)
- 75. Date of last contact while in substance abuse treatment (TXLSTCON)
- 76. Date parent/caregiver discharged from substance abuse treatment (TXDISDT)
- 77. Substance abuse treatment discharge status (TXSTATUS)
- 78. Primary substance problem at admission (SUB1)
- 79. Secondary substance problem at admission (SUB2) [optional data element]
- 80. Tertiary substance problem at admission (SUB3) [optional data element]
- 81-82. Frequency of alcohol use at admission (ALCOHOL1) and discharge (ALCOHOL2)
- 83-84. Frequency of cocaine/crack use at admission (COCAINE1) and discharge (COCAINE2)
- 85-86. Frequency of marijuana/hashish use at admission (MARIJ1) and discharge (MARIJ2)
- 87-88. Frequency of heroin/other opiate use at admission (OPIATES1) and discharge (OPIATES2)
  - 89-90. Frequency of heroin use at admission (HEROIN1) and discharge (HEROIN2) [optional additional detail for subcategory OPIATES1 and OPIATES2]
  - 91-92. Frequency of oxycontin/oxycodone use at admission (OXYCO1) and discharge (OXYCO2) [optional additional detail for subcategory OPIATES1 and OPIATES2]
  - 93-94. Frequency of hydrocodone (or Lortab) use at admission (HYDROCO1) and discharge (HYDROCO2) [optional additional detail for subcategory OPIATES1 and OPIATES2]
  - 95-96. Frequency of other opiate/synthetics use at admission (OTHOPIAT1) and discharge (OTHOPIAT2) [optional additional detail for subcategory OPIATES1 and OPIATES2]
  - 97-98. Frequency of non-prescription methadone use at admission (METHADO1) and discharge (METHADO2) [optional additional detail for subcategory OPIATES1 and OPIATES2]
- 99-100. Frequency of hallucinogen/psychedelic use at admission (HALLUC1) and discharge (HALLUC2)
- 101-102. Frequency of methamphetamine use at admission (METH1) and discharge (METH2)
- 103-104. Frequency of amphetamine/other stimulant use at admission (OTHSTIM1) and discharge (OTHSTIM2)
- 105-106. Frequency of benzodiazepine use at admission (BENZO1) and discharge (BENZO2)
- 107-108. Frequency of barbiturate use at admission (BARBIT1) and discharge (BARBIT2)
- 109-110. Frequency of other tranquilizer or sedative use at admission (TRANQ1) and discharge (TRANQ2)
- 111-112. Frequency of inhalant use at admission (INHAL1) and discharge (INHAL2)
- 113-114. Frequency of other substance use at admission (OTHDRUG1) and discharge (OTHDRUG2)

It is understood that primary substance problem at admission (SUB1) may not be available for those who were not admitted to publicly-funded treatment. The core demographic variable, parent or caregiver methamphetamine use is a contributing factor to the risk of child



maltreatment (METHFACT), provides a way to gauge what percent of families are impacted specifically by methamphetamine.

# Calculation

Reduction in use will be measured by subtracting number of days of use at admission from number of days of use at discharge.

Additional data elements will be used for contextual/background information when the RPG SC Project Team conducts data analyses and prepares reports for the Children's Bureau and/or Congress.

A4. Parents or caregivers connected to supportive services: Percentage of parents or caregivers who were assessed for and received supportive services that include:

- a. Primary medical care
- b. Dental care
- c. Mental health
- d. Child care
- e. Transportation
- f. Housing assistance
- g. Parenting training/child development education
- h. Domestic violence services
- i. Employment or vocational training/education
- j. Continuing care/recovery support services
- k. Alternative therapies/natural healing practices
- I. Other support services

Additional Clarifying Information/Guidelines

For purposes of this grant program, the supportive services delineated for this indicator are defined as follows:

- Primary medical care may include but not be limited to medical assessments; prenatal
  and postnatal care; emergency and hospital care; health supervision and anticipatory
  guidance; screening, diagnosis and treatment of acute and chronic disorders;
  management of serious and life-threatening illness; referrals to specialists for more
  complex conditions where appropriate; testing, treatment, and counseling for HIV,
  tuberculosis, and sexually transmitted diseases; obstetric and gynecologic services;
  nutrition counseling; family planning and reproductive health services.
- Dental care may include but not be limited to dental check-ups and cleaning, evaluation, diagnosis, and/or treatment (nonsurgical, surgical, or related procedures) of diseases, disorders, and/or conditions of the oral cavity, maxillofacial area, and/or the adjacent and associated structures.
- Mental health services may include but not be limited to cognitive-behavioral therapy; individual therapy, family therapy and/or group therapy; services for depression, anxiety, affective and somatization disorders; therapy for trauma and PTSD.



- Child care may include but not be limited to preschool, child care, after-school care programs, and respite care.
- Transportation may include but not be limited to transportation to and from the recovery and treatment site, and to and from ancillary services.
- Housing assistance may include but not be limited to help with housing applications, advocacy, transportation, encouragement and motivation, understanding and complying with the housing program's regulations, assistance in obtaining safe, affordable, permanent housing, developing adequate independent living skills to maintain housing.
- Parenting training/child development education may include but not be limited to parent counseling, parenting skills training, child development and care taking education and training, skill building.
- Domestic violence services may include but not be limited to screening for domestic violence, domestic violence prevention and treatment services, referrals to or provision of safe housing/shelter, trauma-informed and trauma-specific services, legal advocacy and assistance.
- Employment or vocational training/education may include but not be limited to
  educational and vocational screening and assessment, pre-vocational counseling, basic
  life skills training, employment/vocational counseling, training and educational programs,
  and employment and vocational services.
- Continuing care/recovery support services may include but not be limited to aftercare, relapse prevention, peer recovery support, recovery coaching, self-help support groups, spiritual support, etc.
- Alternative therapies/natural healing practices may include but not be limited to acupuncture, alternative medicines or traditional healing practices used in Tribal communities (e.g., the use of a medicine person who may perform a ceremony or provide natural herbs, teas or spiritual interventions).
- Other supportive services include any other services a grantee is proposing to provide (either directly or by referral); grantees should report information on these other support services in their Semi-Annual Progress Reports and/or local evaluations.

Where and when an assessment takes place may vary from site to site. For instance, parents may be admitted to treatment before being referred to RPG services. It will depend on your grant program where an assessment for these services occurs; it is anticipated that the need for these services could be identified in a child welfare intake and/or a substance abuse treatment intake. If your RPG is providing any of these services, either directly or through referrals or linkages, then they would be reported. Data should be collected on any parent or caregiver with a substance use disorder that is part of the child welfare or substance abuse treatment case.

#### Data Elements

- 123. Adult assessed for primary medical care (AMED1)
- 124. Primary medical care initiated (AMED2)
- 125. Adult assessed for dental care services (ADENTAL1)
- 126. Dental care services initiated (ADENTAL2)
- 127. Adult assessed for mental health services (AMH1)
- 128. Mental health services initiated (AMH2)



- 129. Adult assessed for child care needs (ACHCARE1)
- 130. Child care services initiated (ACHCARE2)
- 131. Adult assessed for transportation needs (ATRANSP1)
- 132. Transportation services initiated (ATRANSP2)
- 133. Adult assessed for housing needs (AHOUSE1)
- 134. Housing services initiated (AHOUSE2)
- 135. Adult assessed for parenting training/child development education needs (APARENT1)
- 136. Parenting training/education services initiated (APARENT2)
- 137. Adult assessed for domestic violence (ADOMVIO1)
- 138. Domestic violence services initiated (ADOMVIO2)
- 139. Adult assessed for employment or vocational training/education needs (AEMPLY1)
- 140. Employment or vocational training/education services initiated (AEMPLY2)
- 141. Adult assessed for continuing care/recovery support needs (ACONTCR1)
- 142. Continuing care/recovery support services initiated (ACONTCR2)
- 143. Adult assessed for use of alternative therapies/natural healing practices (AALT1)
- 144. Alternative therapies/natural healing practices initiated (AALT2)

#### Calculation

For percentage assessed:

Numerator: Number of adults assessed for [given supportive service]

Denominator: Number of adults enrolled in the RPG program

For percentage that received services:

Numerator: Number of adults for whom [given supportive service] was initiated

Denominator: Number of adults assessed for [given supportive service]

A5. Employment: Percentage of parents or caregivers participating in substance abuse treatment who are:

- a. Employed full time
- b. Employed part time
- c. Currently enrolled in an educational or vocational training program

# Additional Clarifying Information/Guidelines

Employment is an important component of recovery and this indicator is designed to examine whether substance abuse treatment participation has a positive effect on employment status. This indicator applies to those in substance abuse treatment and will be measured at two time periods: treatment intake/entry and discharge. Employment definitions are derived from TEDS (see EMPLTX1) and educational/vocational training program enrollment status is derived from GPRA (see EDVOC1). Grantees should ask about both, as an adult can be employed and enrolled in an educational/vocational training program concurrently.



- 72. Parent/caregiver entered public or private treatment (PUBPRVTX)
- 115. Employment status at time of treatment intake/admission (EMPLTX1)
- 116. Detailed "Not in Labor Force" at time of treatment intake/admission (NLFTX1)
- 117. Employment status at time of treatment discharge (EMPLTX2)
- 118. Detailed "Not in Labor Force" at time of treatment discharge (NLFTX2)
- 119. Enrollment status in an educational (school) or vocational training program at treatment intake/admission (EDVOC1)
- 120. Enrollment status in an educational (school) or vocational training program at treatment discharge (EDVOC2)

# Calculation

Numerator: Number of parents/caregivers in treatment employed full time or part time

(EMPLTX1/2= 1 or 2) and/or enrolled in a vocational training/education program

(EDVOC1/2=1 or 2)

Denominator: Number of parents/caregivers in substance abuse treatment (PUBPRVTX=1 or

2)

Change will be measured by whether there is an increase in the percentage of those employed and/or enrolled in a vocational training/education program from admission to discharge.

# A6. Criminal behavior: Percentage of parents or caregivers who show a decrease in criminal behavior

# Additional Clarifying Information/Guidelines

This indicator applies to those in substance abuse treatment and will be measured at two time periods: treatment intake/entry and discharge.

# Data Elements

- 72. Parent/caregiver entered public or private treatment (PUBPRVTX)
- 121. Number of arrests in past 30 days at treatment intake/admission (ARREST1)
- 122. Number of arrests in past 30 days at treatment discharge (ARREST2)

#### Calculation

Decrease in arrests for parents/caregivers participating in substance abuse treatment (PUBPRVTX=1 or 2) will be measured by subtracting number of arrests at admission (ARREST1) from number of arrests at discharge (ARREST2).



# A7. Mental health status: Percentage of parents or caregivers who show an improvement in mental health functioning

# Additional Clarifying Information/Guidelines

The purpose of this indicator is to measure improvement in the area of adult mental health functioning. Grantees reporting on this indicator will measure change over time using a valid and reliable standardized tool or instrument that they deem most appropriate for their target population and program model. Baseline and subsequent instrument/test scores will be submitted without client identifying information. Grantees reporting on this indicator are using tools such as the Addiction Severity Index (ASI), which provides an addiction severity profile in seven domains (medical, employment, alcohol use, other drug use, legal status, family/social relationships and psychiatric/psychological status), the Beck Depression Inventory, which measures severity of depression, or the Global Appraisal of Individual Needs (GAIN) tool, which includes a core section on mental and emotional health.

As previously stated, once grantees finalize their selection of instruments and the estimated number of adults who will be administered each instrument, the RPG SC Project Team will work with grantees to determine the most appropriate method for grantees to submit this data to the Children's Bureau. The number of grantees who are using a particular tool will influence this determination (e.g., whether grantees enter the data into the RPG Data System, include it in their Semi-Annual Progress Report, or submit in some other manner acceptable to the Children's Bureau and grantees).

# Data Elements

To be determined based on the recommendations and protocols associated with the standardized instrument a grantee is using for their target population and the specific nature of the grantee's intervention and/or services designed to impact this indicator. Grantees selecting this indicator will measure an adult's mental health status at a minimum of two time periods (e.g., at program or treatment intake/entry for the baseline and at a follow-up period that is appropriate to the grantee's program design, such as program or treatment discharge).

# Calculation

To be determined based on the protocols associated with the standardized instrument a grantee is using. However, it may be calculated as the change in score at selected points of administration (e.g., baseline and discharge), as directed for a given instrument.



# FAMILY/RELATIONSHIP INDICATORS

In the narrative descriptions that follow, data elements for Family/Relationship indicators F1 — F3 will be specified based on grantee-specific instrumentation. Grantees will report data on these indicators (if included in a grantee's final set of FPO-approved indicators) by submitting data from the finalized set of instruments included in their evaluation plan. Data collected by grantees will be defined according to the appropriate standardized tool or instrument they have selected for their target population(s) and program model; therefore, specific data elements may vary across grantees. Grantees using the same instrument will submit those data in the same format. Where appropriate, we will negotiate common instrumentation across grantees for these indicators and obtain their de-identified case level data for secondary analysis and reporting.

As each grantee finalizes their selection of instruments and the estimated number of children and/or adults who will be administered each instrument, the RPG SC Project Team will work with grantees to determine the most suitable method for grantees to submit this data to the Children's Bureau (e.g., whether grantees enter the data into the RPG Data System, include it in their Semi-Annual Progress Report, or submit in some other manner acceptable to the Children's Bureau and grantees). The number of grantees who are using a particular tool will influence this determination. The narrative descriptions that follow highlight some of the data collection tools/instruments that grantees indicated they plan to use or are considering using to measure these indicators.

# F1. Parenting: Percentage of parents or caregivers who demonstrate increased parental capacity to provide for their children's needs and family's well-being

# Additional Clarifying Information/Guidelines

For the purposes of this grant program, parenting capacity is thought of as the ability of parents/caregivers to understand and give priority to their child's basic needs (e.g., health, educational, developmental, safety, social, housing), to adapt to the child's changing needs over time, and to address any challenges posed by their child's temperament and development. Grantees reporting on this indicator will measure change over time using a valid and reliable standardized tool or instrument that they deem most appropriate for their target population and program model. Baseline and subsequent instrument/test scores will be submitted without client identifying information. Grantees reporting on this indicator are using tools, such as the NCFAS – Parental Capabilities subscale, the Parenting Stress Index (PSI) or the Adult-Adolescent Parenting Inventory (AAPI), that may ask questions about disciplinary practices, supervision of children, expectations of children, parental empathy, parenting competence, etc.

# Data Elements

To be determined based on the recommendations and protocols associated with the standardized instrument a grantee is using for their target population and the specific nature of the grantee's intervention and/or services designed to impact this indicator. Grantees selecting this indicator will measure parenting capacity at a minimum of two time periods (e.g., at program or treatment intake/entry for the baseline and at a follow-up period that is appropriate to the grantee's program design, such as program or treatment discharge).



# Calculation

To be determined based on the protocols associated with the standardized instrument a grantee is using. However, it may be calculated as the change in score at selected points of administration (e.g., baseline and discharge), as directed for a given instrument.

# F2. Family relationships and functioning: Percentage of parents or caregivers who show improved parent-child and other family interactions

# Additional Clarifying Information/Guidelines

For purposes of this grant program, family functioning refers to how family members communicate, relate to one another and maintain relationships, as well as how they make decisions and solve problems. Grantees reporting on this indicator will measure change over time using a valid and reliable standardized tool or instrument that they deem most appropriate for their target population and program model. Baseline and subsequent instrument/test scores will be submitted without client identifying information. Grantees reporting on this indicator are using tools such as the NCFAS – Family Interactions Subscale or the Strengthening Families Program (SFP), which ask questions about a parent's bonding and communication with children, family conflict, family communication, family cohesions and family organization.

#### Data Elements

To be determined based on the recommendations and protocols associated with the standardized instrument a grantee is using for their target population and the specific nature of the grantee's intervention and/or services designed to impact this indicator. Grantees selecting this indicator will measure family functioning at a minimum of two time periods (e.g., at program or treatment intake/entry for the baseline and at a follow-up period that is appropriate to the grantee's program design, such as program or treatment discharge).

# Calculation

To be determined based on the protocols associated with the standardized instrument a grantee is using. However, it may be calculated as the change in score at selected points of administration (e.g., baseline and discharge), as directed for a given instrument.

# F3. Risk/protective factors: Percentage of parents or caregivers who show a decrease in risk factors associated with reasons for service and/or an increase in protective factors to prevent child maltreatment

# Additional Clarifying Information/Guidelines

For purposes of this grant program, risk factors may include things such as acute life stress or everyday stress, physical and mental health crisis, acute school problems, family relationship conflict, social isolation, child behavior/mental health/physical health problems, caregiver mental health/physical health problems, impaired caregiver-child relationship, poverty, violence in community, or caregiver childhood adversity. Protective factors may include things such as



family systems strengths, coping strategies, social support, spirituality, community connections, housing stability, and safe neighborhood. Grantees reporting on this indicator will measure change over time in their specific set of risk/protective factors using a valid and reliable standardized tool or instrument that they deem most appropriate for their target population and program's primary services and activities. Baseline and subsequent instrument/test scores will be submitted without client identifying information. Grantees reporting on this indicator are using tools such as the NCFAS (overall and subscales such as Environment, Family Safety, Social/Community Life), the PSI (described above in indicator F1), the Addiction Severity Index (ASI), which includes medical, employment, alcohol and drug, legal status, family/social and psychiatric problem subscales, and the Structured Decision Making (SDM) Risk Assessment, which identifies families who have low, moderate, high, or very high probabilities of future child abuse or neglect.

# Data Elements

To be determined based on the recommendations and protocols associated with the standardized instrument a grantee is using for their target population and the specific nature of the grantee's intervention and/or services designed to impact this indicator. Grantees selecting this indicator will measure a family's risk/protective factors at a minimum of two time periods (e.g., at program or treatment intake/entry for the baseline and at a follow-up period that is appropriate to the grantee's program design, such as program or treatment discharge).

# Calculation

To be determined based on the protocols associated with the standardized instrument a grantee is using. However, it may be calculated as the change in score at selected points of administration (e.g., baseline and discharge), as directed for a given instrument.

F4. Coordinated case management: Percentage of families that receive appropriate, coordinated case management services:

- a. Percentage of families that report active involvement in various aspects of the case planning process, including identifying strengths, needs, and needed services, and establishing and evaluating progress toward goals
- b. Percentage of families who received joint case management services coordinated between a substance abuse treatment provider and a child welfare agency (i.e., a single case plan coordinated across systems)
- c. Percentage of families receiving joint case management services who received a cross-agency assessment conference every 90 days or less

# Additional Clarifying Information/Guidelines

The intent of this indicator is to determine whether families are receiving coordinated case management services across multiple service systems that facilitate the child's safety, permanency and well-being, as well as the parent/caregiver's recovery, self-sufficiency, well-being and ability to provide for his/her children's needs. Grantees reporting on this indicator are obtaining the information from program or case records and/or client satisfaction surveys or similar questionnaires.



Not applicable for RPG Data System. Grantees will report information on percentage of families receiving coordinated case management as part of their Semi-Annual Progress Report (Section B. Partnership and Client Data).

Calculation

For subpart a:

Numerator: Number of families who report active involvement in various aspects of the case

planning process

Denominator: Number of families served by the RPG program

For subpart b:

Numerator: Number of families who received joint case management services coordinated

between the substance abuse and child welfare systems

Denominator: Number of families served who have open cases in both systems

For subpart c:

Numerator: Number of families receiving joint case management services who received a

cross-agency assessment conference every 90 days or less.

Denominator: Number of families served who have open cases in both systems

F5. Substance abuse education and training for foster care parents and other substitute caregivers: Among homes where children have been placed in foster care, percentage of children's foster parents or substitute caregivers who received education and training about

- a. addiction and substance abuse treatment
- b. special needs of children who have suffered from maltreatment and whose parents have a substance use disorder
- c. family recovery issues

Additional Clarifying Information/Guidelines

Nothing of note; indicator is self-explanatory. Grantees that have selected this indicator will report the results as part of their Grantee Semi-Annual Progress Report (Section B. Partnership and Client Data, Trainings Conducted) and local evaluations.



Not applicable for RPG Data System. Grantees will report information on foster parent and other substitute caregiver training as part of their Semi-Annual Progress Report (Section B. Partnership and Client Data).

Calculation

Numerator: Number of substitute caregivers who received education and training about

substance abuse treatment, special needs of children, and family recovery issues

Denominator: Number of substitute caregivers caring for children enrolled in the RPG program

who have been placed in out-of-home care

# REGIONAL PARTNERSHIP/SERVICE CAPACITY INDICATORS

R1. Collaborative capacity: Regions have new or increased ability to address parental or caregiver substance abuse and its effect on children, as measured by increased cross-systems understanding and collaborative activities

Additional Clarifying Information/Guidelines

Collaborative capacity will be measured by the Collaborative Capacity Instrument (CCI), which measures how a collaborative is doing in each of the following 10 domains:

- 1. Underlying Values and Principles of Collaborative Relationships
- 2. Daily Practice Screening and Assessment
- 3. Daily Practice Client Engagement and Retention
- 4. Daily Practice Services to Children
- 5. Joint Accountability and Shared Outcomes
- 6. Information Sharing and Data Systems
- 7. Training and Staff Development
- 8. Budgeting and Program Sustainability
- 9. Working with Related Agencies
- 10. Working with the Community and Supporting Families

Grantees will complete a baseline CCI in Year 1 and a follow-up in Year 3 and, for 5-year grantees, again in Year 5. Because regional partnerships complete the CCI via the Internet and the results are automatically submitted to the Center for Children and Family Futures (CCFF) for tabulation and analysis for the sites, grantees will not need to include their CCI scores as part of their 6-month data upload to the RPG Data System.

Grantees who are also doing pre/post tests of knowledge gained from trainings or other client/staff surveys or interviews that address collaboration will report these outcomes in their local evaluations.



Overall mean score and mean score for each of the 10 domains at baseline and follow-up.

#### Calculation

Measurement of this indicator will be calculated by looking at the difference in the overall mean score and mean scores for each of the 10 domains between the various time points the CCI was administered.

R2. Capacity to serve families: Regions have new or increased capacity to serve families in which a parent or caregiver has an identified substance use disorder and there is current or potential involvement with the child welfare system:

- a. Percentage of regional partnership member agencies that increased the number of appropriate treatment programs for the targeted region
- b. Among those partner agencies, increase in the number or percentage of families served or the number or percentage of treatment slots\* available in the targeted region

# Additional Clarifying Information/Guidelines

This indicator is designed to measure how access to treatment for those with current or potential involvement with the child welfare system has improved since implementation of the RPG program. The challenge may be whether a substance abuse agency can identify those adults involved in the child welfare who are in treatment. However, it more likely that the substance abuse treatment agency, rather than the child welfare agency, would have this information.

In determining what constitutes a new or added program, for purposes of this project, a "program" is defined by the addition of new services or a new level of care that did not previously exist or was not available for families in the child welfare system (e.g., services expanded to another county or geographic area where they were not previously available, residential treatment was added).

# Data Elements

- 145. Number of substance abuse treatment programs 12 months prior to RPG program implementation (TXPGMS\_0)
- 146. Number of substance abuse treatment programs at the end of each semi-annual progress reporting period (TXPGMS 1)
- 147. Number of adults who received substance abuse treatment 12 months prior to RPG program implementation (ADSVD\_0)
- 148. Number of adults who received substance abuse treatment at the end of each semi-annual progress reporting period (ADSVD\_1)
- 149. Number of children (of adults who received substance abuse treatment) who received services 12 months prior to RPG program implementation (CHSVD\_0)



<sup>\*</sup> Treatment slots would be an optional aspect of the indicator that grantees may choose to report through their local evaluation.

150. Number of children (of adults who received substance abuse treatment) who received services at the end of each semi-annual progress reporting period (CHSVD 1)

# Optional data elements:

151. Number of substance abuse treatment slots 12 months prior to RPG program implementation (TXSLOT\_0)

152. Number of substance abuse treatment slots, at the end of each semi-annual progress reporting period (TXSLOT 1)

# Calculation

For increase in treatment programs:

Numerator: Number of treatment programs at end of each semi-annual reporting period

(TXPGMS\_1)

Denominator: Number of treatment programs 12 months prior to implementation of RPG

program (TXPGMS\_0)

For increase in number served:

Numerator: Number of adults and children served at end of each semi-annual reporting

period (ADSVD\_1, CHSVD\_1)

Denominator: Number of adults and children served 12 months prior to implementation of RPG

program (ADSVD 0, CHSVD 0)

The RPG SC Project Team will be able to calculate number of families served by using the Case ID, Adult ID and Child ID data elements (e.g., children and adults can be linked to a single family unit). Increases in number of treatment programs and number of adults, children and families served will be tracked over time (at each six-month reporting period) as well as at the end of the grant period.



# ATTACHMENT A: DATA SYSTEM WORKGROUP MEMBERS

# Regional Partnership Grantee (RPG) Representatives

# **Brian Arthur**

**Associate Director** 

Center for Applied Behavioral Policy

Arizona State University Grantee: State of Arizona

Project Title: Arizona Families F.I.R.S.T., Parent

to Parent Recovery Program Cluster: Treatment Focused

# Kathryn Bowen

Senior Program Evaluator Centerstone CMHC, Inc.

Grantee: Tennessee Department of Mental Health and Developmental Disabilities

Project Title: Partners for Family Strengthening

and Preservation Cluster: Array of Services

#### Michelle Cook

Justice Systems Analyst

Iowa Division of Criminal and Juvenile Justice

Planning

Grantee: Judicial Branch State of Iowa

Project Title: Parents and Children Together: A

Family Drug Court Initiative (PACT)

Cluster: Drug Court

#### **Debi Elliott**

Senior Research Associate

Portland State University, Regional Research

Institute

Grantee: Multnomah County Department of

Human Services, Mental Health and

Addiction Services Division

Project Title: Family Involvement Team

Cluster: Drug Court

# **Karen Franck**

Project Evaluator

Child and Family Tennessee

Grantee: Child and Family Tennessee

Project Title: New Beginnings for Women and

Children

Cluster: Child Focused

# **Heather Guentzel**

Program Manager

Urban Community Research Center Cal State University, Dominguez Hills Grantee: SHIELDS for Families, Inc.

Project Title: Tamar Village Family Centered

Residential Treatment Program: A

Comprehensive Program for Families involved in

the Child Welfare System due to Parental Substance Abuse Cluster: Treatment Focused

#### **Matthew Hile**

Director, Behavioral Health Division and

Director, Behavioral Informatics Missouri Institute of Mental Health

Grantee: Kids Hope United-Hudelson Region Project Title: Circle of Hope: Keeping Children

Safe & Families Together

Cluster: System Wide Collaboration

#### **Ruth Huebner**

Child Welfare Researcher

Kentucky Department for Community Based

Services

Grantee: Kentucky Department for Community

**Based Services** 

Project Title: Kentucky Sobriety Treatment and

Recovery Teams (K-START)
Cluster: Array of Services

# Pamela Jumper-Thurman

Co-Owner and Evaluator

Council Oak Training and Evaluation, Inc. Grantee: Choctaw Nation of Oklahoma Project Title: Choctaw Project SOAR (Serving

Our At Risk) Cluster: Tribal

# Jules Marquart

Director of Evaluation, Research Department

Centerstone CMHC, Inc.

Grantee: Tennessee Department of Mental Health and Developmental Disabilities

Project Title: Partners for Family Strengthening

and Preservation

Cluster: Array of Services

#### Tom McDonald

Associate Dean and Professor

University of Kansas

Grantee: Kansas Department of Social and

Rehabilitation Services

Project Title: Kansas Serves Substance Affected

Families

Cluster: Array of Services



# Frank Mondeaux

Research and Evaluation Consultant

Grantee: Klamath Tribes

Project Title: Methamphetamine and Substance

Abuse Eradication Project

Cluster: Tribal

#### **Barbara Plested**

Evaluator

Council Oak Training and Evaluation, Inc. Grantee: Choctaw Nation of Oklahoma

Project Title: Choctaw Project SOAR (Serving

Our At Risk) Cluster: Tribal

# Julie Tapp

Research Associate

Children and Family Futures

Grantees: Mendocino County Health and Human Service Agency; Sacramento Department of Health and Human Services Project Titles: Mendocino County Dependency Drug Court; Early Intervention Family Drug

Court (EI-FDC) Cluster: Drug Court

#### **Robert Walker**

Assistant Professor

Center on Drug and Alcohol Research,

University of Kentucky

Grantee: Kentucky River Community Care, Inc. Project Title: Families in Safe Homes Network

(FISHN)

Cluster: System Wide Collaboration

# Federal Project Officer (FPO) Representatives

# **Catherine Luby**

Child Welfare Program Specialist Administration for Children and Families, Children's Bureau FPO for Drug Court Cluster

# **Elaine Stedt**

Child Welfare Program Specialist Administration for Children and Families. Children's Bureau FPO for Array of Services Cluster and for RPG Support Contract

# **RPG SC Project Team Staff**

# **Sharon Boles**

Director of Evaluation Children and Family Futures PML for Array of Services Cluster

# **Ed Briggs**

Senior Technical Director Macro International

#### Ken DeCerchio

Program Director Children and Family Futures

#### Kim Dennis

Program Associate Children and Family Futures

#### **Glen Doss**

Web Application Designer Macro International

# **Theresa Lemus**

Program Associate Children and Family Futures PML for Treatment Focused Cluster

#### Mike Rankin

Application and Database Programmer Macro International

# **Elizabeth Schilling**

Research Associate Children and Family Futures

# Nancy K. Young

Executive Director Children and Family Futures



# ATTACHMENT B: CHANGES OF NOTE TO THE DATA ELEMENTS

As previously stated, much of the information presented in the RPG Data Dictionary should be familiar to grantees, as it builds on and is more detailed expansion of Appendix A: Detailed Summary Table of Final Set of Regional Partnership Grant Program Performance Indicators from the Regional Partnership Grantee Performance Measurement System – Recommended Final Set of Indicators and Draft Data Collection and Reporting System Design, Summary Report for Grantees, which grantees received earlier this year.

However, based on discussions with and feedback from the Data System Workgroup, extensive follow-up discussions among the RPG SC Project Team and Children's Bureau, and additional feedback received from grantees during and after the July 1-2 Annual Grantee Meeting, it was necessary to revise and clarify the specifications for some of the data elements. The chart below highlights key changes made to the data elements. It lists the data elements as they originally appeared at the end of Appendix A in the Final Indicators Report and how they are presented here in the RPG Data Dictionary, with major changes noted.

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(including data elements to be	DEMOGRAPHIC AND BASIC CLIENT INFORM. e used for data system administrative purposes – e	
	Added unique identifier for each grantee (data element 1: RPGID)	In the June 2008 version, the schematic for the Grantee ID (RPGID) included a 2-digit Site ID suffix that grantees could use, if needed or desired, to identify a particular site (if they had multiple sites). This has been modified as follows:  • Grantee ID now consists solely of the Grants Management number assigned to you by the Children's Bureau and does not include the additional 2-digit Site ID suffix (it is still data element 1. RPGID).  • Plan ID (data element 1A. PLANID) has been added to enable the system to tie an uploaded data file to the specific treatment, comparison and/or control data plan created by the grantee.  • Site ID (data element 1B. SITEID) was decoupled from the original RPGID variable and is now its



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		own stand-alone data element. It is a unique identifier that can be used by grantees that are providing RPG services in multiple sites or to multiple populations and they want or need to distinguish further between each site or population within a single data plan. It does not necessarily apply to all grantees and can be used at a grantee's discretion.
	Added unique identifier for each case (i.e., family served) (2. CASEID)	NC
	Added unique identifier for each child within a case (3. CHILDID)	NC
	Added data element to indicate index child (4. CINDEX)	Clarified the definition/description of index child.
	Added unique identifier for each adult within a case (5. ADULTID)	NC
	Added data element to indicate if given adult is primary caregiver (6. APRIMARY)	Provided guidance on how to define a primary caregiver.
	Added data element to indicate given adult's relationship to index child (7. ARLTNSHP)	Modified the definition of the "Other Relative" code to "Other Relationship" (still coded as OR) to include not just other relatives, but also non-relatives such as godparents and other non-biological caregivers.
Child		
Age	Changed to Date of Birth (8. CHBDATE)	NC
Gender	No major changes; specified coding (9. CHSEX)	NC



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Race/Ethnicity	<ol> <li>Two major changes:</li> <li>Split out race and ethnicity as separate data elements (per AFCARS, TEDS and GPRA).</li> <li>Created separate data elements for each race so grantees could indicate all races that apply (used categories as defined by AFCARS and NCANDS)</li> <li>(Data elements 10-16)</li> </ol>	NC
Prior victim of substantiated/indicated maltreatment (occurred before outreach and engagement in the RPG program)	No major changes; specified coding (17. C_PRIOR)	NC
Adult	,	
Age	Changed to Date of Birth (18.ADOB)	NC
Gender	No major changes; specified coding (19. ASEX)	NC
Race/Ethnicity	Two major changes:  1. Split out race and ethnicity as separate data elements (per AFCARS, TEDS and GPRA).  2. Created separate data elements for each race so grantees could indicate all races that apply (used categories as defined by AFCARS and NCANDS)  (Data elements 20-26)	NC
Prior perpetrator of substantiated/indicated maltreatment (occurred before outreach and engagement in the RPG program)	No major changes; specified coding (27. A_PRIOR)	NC
Education	No major changes; specified coding (28. EDUC)	NC



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Employment Status	Specified coding (aligned with TEDS coding) (29. EMPLOY)	NC
	Added Detailed Not in Labor Force (30. DETNLF) as more detailed data element for those whose employment status is coded as "not in labor force."	NC
Pregnancy Status	No major changes; specified coding (31. PREG)	NC
Living Arrangement of caregiver (e.g., homeless, dependent living, independent living)	No major changes; specified coding (aligned with TEDS) (32. LIVARAG)	NC
Source of Income/Support	No major changes; specified coding (aligned with TEDS) (33. INCOME)	NC
Marital Status	No major changes; specified coding (aligned with TEDS) (34. MARITAL)	NC
Parent or caregiver methamphetamine use is a contributing factor to the risk of child Maltreatment	No major changes; specified coding (35. METHFACT)	NC
	ATA ELEMENTS TO BE USED TO MEASURE THE	INDICATORS
Date file opened with RPG program	No major changes (36. FILE_O)	NC
2. Date file closed with RPG program	No major changes (37. FILE_C)	NC
Date file opened with child welfare system	No major changes (67. CWFILE_O)	NC
4. Child maltreatment report (Y/N)	Deleted	NC
5. Date of maltreatment report	No major changes (40. RPTDT)	NC
	New data element added: Date of Report Disposition (41. RPTDISDT)	NC



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Substantiated/indicated/alternative response-victim (Y/N)	Modified data element (38. MALTXVIC) so reflects whether child was victim of substantiated/indicated maltreatment (Y/N); alternative response victim disposition not included per CFSR measures of recurrence	NC
	New data element added: Unique identifier to be assigned to each substantiated/indicated case of child maltreatment for a given child (39. MALTXID); enables identification of a particular maltreatment record in instances where a child may have multiple maltreatment incidents.	NC
7. Type of maltreatment1	No major changes; specified coding (42. CHMAL1)	NC
8. Type of maltreatment2	No major changes; specified coding (43. CHMAL2)	NC
9. Type of maltreatment3	No major changes; specified coding (44. CHMAL3)	NC
10. Type of maltreatment4	No major changes; specified coding (45. CHMAL4)	NC
11. Child removed from home (Y/N)	No major changes (46. REMOVED)	NC
12. Date of latest removal from home	No major changes (47. REMOVDT)	NC
Date of current placement in foster care setting	No major changes (48. PLACEDT)	NC
14. Date child reunified with parent/caregiver	No major changes (49. REUNDT)	NC
15. Date of discharge from foster care	No major changes (50. FCDISDT)	NC
16. Foster care discharge reason	No major changes (51. FCDISP)	NC
17. Mother's Date of Termination of Parental Rights	Deleted	NC
Legal or Putative Father's Date of Termination of Parental Rights	Deleted	NC



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Pregnancy status at admission to RPG program	This is one of the core demographics; no major changes (31. PREG)	NC
20. Newborn date of birth (if case level) <b>or</b> Total number births (if aggregate)	No major changes (52. NEWDOB or TOTBIRTHS)	NC
21. Substance exposure detected at birth (Y/N/DK) (case level) <i>or</i> Total number substance exposure detected at birth (aggregate)	No major changes (53. SEB or TOTSEB)	NC
22. Subsequent substance-exposed newborn (Y/N/DK) (case level) or Total number of SEBs that are subsequent SENs (aggregate)	No major changes (54. SEB2 or TOTSEB2)	NC
Each supportive service offered to the <b>child</b> will have the following data elements:  23. Whether assessed for given service (Y/N/NA)  24. Date assessed for given service 25. Whether services initiated (Y/N/NA – not identified as a need)  26. Date services initiated	To help streamline, deleted the date assessed and date services initiated data elements for each supportive service and limited it to a) whether assessed and b) whether services initiated.  Number of data elements increased because had to delineate each supportive service and related information as their own data elements.  (Data elements 55-66)	<ul> <li>For the "assessed" data elements:</li> <li>Clarified that "Yes" means they could have been assessed either prior to or at time of entry to the RPG program.</li> <li>Clarified definition of code 88 so that it is N/A – program does not provide and/or is not reporting on this support service.</li> <li>For "services initiated" data elements:</li> <li>Clarified that "Yes" can mean either services were first initiated after entering the RPG program or continued/expanded if the individual was already receiving such services upon RPG program entry.</li> <li>Added a code of 88 = N/A – program does not provide and/or is not reporting on this support service.</li> </ul>



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Each supportive service offered to the parent/caregiver will have the following data elements:  27. Whether assessed for given service (Y/N/NA)  28. Date assessed for given service  29. Whether services initiated (Y/N/NA – not identified as a need)  30. Date services initiated	To help streamline, deleted the date assessed and date services initiated data elements for each supportive service and limited it to a) whether assessed and b) whether services initiated.  Number of data elements increased because had to delineate each supportive service and related information as their own data elements.  (Data elements 123-144)	<ul> <li>For the "assessed" data elements:</li> <li>Clarified that "Yes" means they could have been assessed either prior to or at time of entry to the RPG program.</li> <li>Clarified definition of code 88 so that it is N/A – program does not provide and/or is not reporting on this support service.</li> <li>For "services initiated" data elements:</li> <li>Clarified that "Yes" can mean either services were first initiated after entering the RPG program or continued/expanded if the individual was already receiving such services upon RPG program entry.</li> <li>Added a code of 88 = N/A – program does not provide and/or is not reporting on this support service.</li> <li>Also, per grantee feedback, an additional support service category was added, "alternative therapies/natural healing practices" to capture acupuncture, alternative medicine and traditional healing practices used in Tribal communities. As such, two data elements were added to the data dictionary (143-144). Just be aware that by adding two data elements, this then altered the original numbering of subsequent data elements.</li> </ul>
	New data element added: Unique identifier to be assigned to each substance abuse treatment admission for a given adult (68. SATXID); enables identification of a particular treatment admission in instances where a given adult may have multiple treatment admissions.	Clarified that for purposes of this grant program, information should reflect an overall single treatment episode rather than each placement or transition from one level of care to another that may happen within an overall single treatment episode.



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31. Date of parent/caregiver substance abuse assessment	Streamlined and collapsed this and date of intake into one data element, Date of parent/caregiver substance abuse assessment/intake (69.SAASSESS)	NC
32. Date of parent/caregiver substance abuse intake	Deleted this; see above re: streamlining and collapsing this and date of assessment into one data element, Date of parent/caregiver substance abuse assessment/intake	NC
33. Client entered public or private treatment (1=public, 2=private)	No major changes (72. PUBPRVTX)	Added a code of 88 = Not applicable, to be used if a given adult enrolled in the RPG program does not have a substance use disorder and is not receiving substance abuse treatment, but is receiving other RPG services or interventions and other indicator data is being collected on that individual. Added clarification that in these cases, all the subsequent data elements related to a substance abuse treatment admission be left blank.
34. Date parent/caregiver entered substance abuse treatment	No major changes (73. TXADMIT)	NC
35. Date parent/caregiver discharged from substance abuse treatment	No major changes (76. TXDISDT)	Clarified that for purposes of this grant program, this should reflect the ultimate treatment discharge date; grantees do not need to record each placement or transition from one level of care to another that may happen within an overall single treatment episode.
	New data element added: Date of Last Treatment Contact (75. TXLSTCON)	NC
36. Treatment Discharge Status	No major changes; clarified coding (77. TXSTATUS)	Added a code of 99 = Not applicable, still in treatment, which can be used if a client is still in treatment at the end of a given reporting period. Once the discharge status becomes known, this variable can be updated with the appropriate discharge status code.



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37. Substance abuse treatment service setting	No major changes; provided coding (74. TXSET)	Clarified definition/description of treatment setting.
38. Primary substance of choice	Modified language so it is primary substance problem at admission (78. SUB1; consistent with TEDS)  Revised coding to match list of substances captured in past 30 day use (see below)	NC
	Per Workgroup feedback, added <b>optional</b> data element for Secondary substance problem at admission (79. SUB2)	NC
	Per Workgroup feedback, added <b>optional</b> data element for Tertiary substance problem at admission (80. SUB3)	NC



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<ul> <li>39. At treatment intake/entry, how many of past 30 days clients used following substances:</li> <li>a. Alcohol</li> <li>b. Methamphetamine</li> <li>c. Amphetamine/Other Stimulants</li> <li>d. Cocaine/crack</li> <li>e. Marijuana</li> <li>f. Heroin/Other Opiates</li> <li>g. Other</li> </ul>	Expanded list of substances, per Workgroup feedback, so it includes the following:  1. Alcohol 2. Cocaine/crack 3. Marijuana/hashish 4. Heroin/other opiates (Grantees have option of reporting this as total roll-up or breaking into more detailed subcategories a – e.) a. Heroin (optional more detailed subcategory) b. Oxycontin/oxycodone (optional more detailed subcategory) c. Hydrocodone (Lortab) (optional more detailed subcategory) d. Other opiates/synthetics(optional more detailed subcategory) e. Non-prescription methadone (optional more detailed subcategory) 5. Hallucinogens/psychedelics 6. Methamphetamine 7. Other amphetamines/stimulants 8. Benzodiazepines 9. Barbiturates 10. Other tranquilizers or sedatives 11. Inhalants 12. Other The number of data elements increased significantly because each substance had to have its own data element for use at admission and use at discharge. (Data elements 81-114)	NC



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40. At treatment discharge, how many of past 30 days clients used following substances:  a. Alcohol b. Methamphetamine c. Amphetamine/Other Stimulants d. Cocaine/crack e. Marijuana f. Heroin/Other Opiates g. Other	See comment above for use at treatment admission.	NC
41. Employment status at time of treatment intake/entry	No major changes (115. EMPLTX1)	NC
	Added Detailed Not in Labor Force at treatment intake/entry (116. NLFTX1) as more detailed data element for those whose employment status at admission is coded as "not in labor force."	NC
42. Employment status at time of treatment discharge	No major changes (117. EMPLTX2)	NC
	Added Detailed Not in Labor Force at treatment discharge (118. NLFTX2) as more detailed data element for those whose employment status at discharge is coded as "not in labor force."	NC
43. Enrollment status in an educational (school) or vocational training program at time of intake/entry to RPG program (as defined by GPRA)	Modified wording slightly so it's at time of treatment intake/entry, to make it consistent with employment status above; only applies to those in treatment (119. EDVOC1)	NC
44. Enrollment status in an educational (school) or vocational training program at time of discharge from the RPG program (as defined by GPRA)	Modified wording slightly so it's at time of treatment discharge, to make it consistent with employment status above; only applies to those in treatment (120. EDVOC2)	NC



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45. Number of times parent/caregiver has been arrested in past 30 days at intake/baseline	Modified wording to it's at time of treatment intake/entry, to make it consistent with employment (121. ARREST1)	NC
46. Number of times parent/caregiver has been arrested in past 30 days at date of treatment discharge or date file closed with RPG program	Modified wording to it's at time of treatment discharge, to make it consistent with employment; only applies to those in treatment 122. ARREST2)	NC
47. Collaborative Capacity Instrument (CCI) baseline score (by March 31, 2008)	Deleted these data elements from RPG Data	NC
48. CCI score at Year 3 (between June 15 and Sept 15, 2010)	System because grantees complete CCI electronically and will have already submitted their scores to CFF for tabulation and analysis	
49. CCI score at Year 5 (between June 15 and Sept 15, 2012)		
50. Number of treatment programs for target population managed by RPG partner agencies 12 months prior to implementation of the RPG program	No major changes	NC (145. TXPGMS_0)
51. Number of treatment programs for target population managed by RPG partner agencies at each semi-annual progress reporting period	No major changes	NC (146. TXPGMS_1)
52. Number <b>families</b> in target population served by RPG partner agencies who received substance abuse treatment 12 months prior to implementation of the RPG program	Deleted. The RPG SC Project Team will be able to link adults and children served to individual family units and calculate.	NC
53. Number <b>adults</b> in target population served by RPG partner agencies who received substance abuse treatment 12 months prior to implementation of the RPG program	No major changes	NC (147. ADSVD_0)



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54. Number <b>children</b> of adults in the target population served by RPG partner agencies who received substance abuse treatment 12 months prior to implementation of the RPG program	Modified wording slightly to clarify that it is children, of adults in the target population served by RPG partner agencies who received substance abuse treatment, who received services 12 months prior to implementation of the RPG program.  Clarified that it is not limited to substance abuse treatment services for children.	NC (149. CHSVD_0)
55. Number <b>families</b> in target population served by RPG partner agencies who received substance abuse treatment at end of each semi-annual progress reporting period	Deleted. The RPG SC Project Team will be able to link adults and children served to individual family units and calculate.	NC
56. Number <b>adults</b> in target population served by RPG partner agencies who received substance abuse treatment at end of each semi-annual progress reporting period [this was an error in original document]	No major changes	NC (148. ADSVD_1)
57. Number <b>children</b> of adults in the target population served by RPG partner agencies who received substance abuse treatment at end of each semiannual progress reporting period	Modified wording slightly to clarify that it is children, of adults in the target population served by RPG partner agencies who received substance abuse treatment, who received services at end of each progress reporting period.  Clarified that it is not limited to substance abuse treatment services for children.	NC (150. CHSVD_1)
58. Pre-implementation reporting date	Deleted	NC
59. Semi-annual progress reporting date	Deleted	NC



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DATA ELEMENTS TO BE DETERMINED – INDICATORS TO BE DEFINED BY GRANTEES					
60. Scores/results from standardized tool to measure child well-being	Data collected by grantees will be defined according to the appropriate standardized tool or instrument they have selected for their target population(s) and program model; therefore, specific data elements may vary across grantees. However, grantees using the same instrument will submit those data in the same format. As each grantee finalizes their selection of instruments and the estimated number of children and/or adults who will be administered each instrument, the RPG SC Project Team will work with grantees to establish the most suitable method for grantees to submit these data to the Children's Bureau (e.g., whether grantees enter the data into the RPG Data System, include it in their Semi-Annual Progress Report, or submit in some other manner acceptable to the Children's Bureau and grantees). The number of grantees using a particular tool will be considered in making this recommendation.	NC			
61. Scores/results from standardized tool to measure parent of caregiver mental health status					
62. Scores/results from standardized tool to measure "parental capacity"					
63. Scores/results from standardized tool to measure family relationships and "family functioning"					
64. Scores/results from standardized tool to measure risk/protective factors					
65. Data elements regarding measurement of coordinated case management to be determined	Deleted – this indicator will be reported in Semi- Annual Progress Report and/or local evaluation	NC			
66. Data elements regarding measurement of substance abuse education and training for foster care parents and other substitute caregivers to be determined	Deleted – this indicator will be reported in Semi- Annual Progress Report (section on number and type of trainings) and/or local evaluation	NC			



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	ADDITIONAL DATA ELEMENTS FOR OPTIONAL ASPECTS OF SELECT INDICATORS				
1.	Level of care parent or caregiver assessed for	No major changes (still optional for those using the ASAM PPC); specified coding (70. LOCRECOM)	Still optional, but clarified that it is for those using the ASAM PPC or a standardized assessment process that determines level of care in a manner consistent with the ASAM PPC.		
2.	Level of care parent or caregiver received	No major changes (still optional for those using the ASAM PPC); specified coding (71. LOCRECVD)	Still optional, but clarified that it is for those using the ASAM PPC or a standardized assessment process that determines level of care in a manner consistent with the ASAM PPC.		
3.	Number of treatment slots for target population provided by RPG partner agencies 12 months prior to implementation of the RPG program	No major changes	NC (151. TXSLOT_0)		
4.	Number of treatment slots for target population provided by RPG partner agencies at each semi-annual progress reporting period	No major changes	NC (152. TXSLOT_1)		
		As noted above after Primary Substance Problem at Admission (78. SUB1) added two additional optional data elements, Secondary (79. SUB2) and Tertiary Substance Problem at Admission (80. SUB3).	NC		

