OMB Control Number 0970-XXXX Expiration Date: XX/XX/XXXX



# ATTACHMENT C CASE COMPONENT DATA

Updated June 9, 2016

THE PAPERWORK REDUCTION ACT OF 1995 (Pub. L. 104-13)

Public reporting burden for this collection of information is estimated to average 150 hours per response, including the time for reviewing instructions, gathering and maintaining the data needed, and reviewing the collection of information.

An agency may not conduct or sponsor, and a person is not required to respond to, a collection of information unless it displays a currently valid OMB control number.

*Case: The Case Component data is submitted by uploading a data file to the NAMRS website annually. Specific instructions will be provided to states on the data file formatting. The reporting period is the federal fiscal year* (October–September).

**Table 1–Investigation Entity**Each reporting period submission may have multiple investigations.

Element No.	Element Name	Element Description	Required	Cardinality	Type/Format	Code Values
Inv1	Investigation ID	The unique identifier used by the state for each investigation. The identifier is assigned to a specific investigation and is only used once. The Investigation ID is encrypted by the state for purposes of data submission.	Yes	Single	Encoded ID	Not applicable
Inv2	Report date	The month, day, and year the agency was notified of the suspected adult maltreatment.	No	Single	Date yyyy-mm-dd	Not applicable
Inv3	Report source	The role or profession of the person who made the report of the suspected adult maltreatment. Multiple report source code values can be submitted for the client.	No	Multiple	Enumeration (code)	1 = substitute decision maker2 = in-home caregiver3 = nursing home staff4 = residential care community staff5 = education professional6 = financial professional7 = law enforcement, judicial, or legal professional8 = medical or health professional9 = mental and behavioral health professional10 = social services professional11 = other professional 12 = relative13 = neighbor, friend, other nonrelative, other nonprofessional14 = self 15 = no role identified
Inv4	State/county FIPS code of investigative agency	The Federal Information Processing Series for state (2 digits) and county code (3 digits) of the APS agency. (Primary agency responsible for the determination of the investigation)	No	Single	FIPS (#####)	Code is the unique identification number assigned to each state and county under the Federal Information Processing Standards (FIPS) guidelines. See http://www.census.gov/geo /www/fips/fips.html

Element No.	Element Name	Element Description	Required	Cardinality	Type/Format	Code Values
Inv5	Investigation start date	The date the investigation is assigned to an investigation worker. If the agency uses another date to indicate the start of an investigation, that date is used.	No	Single	Date yyyy-mm-dd	Not applicable
Inv6	Investigation disposition date	The date that the agency completed dispositions on the allegations of maltreatment associated with the investigation.	No	Single	Date yyyy-mm-dd	Not applicable
Inv7	Case closure date	The date that the agency completed all activities related to the investigation of the case.	Yes	Single	Date yyyy-mm-dd	Not applicable

## Table 2–Client Entity

Each investigation may have multiple clients. Each client can be associated with more than one investigation but a separate client entity is required for each investigation.

Element	Element Name	Element Description	Required	Cardinality	Type/Format	Code Values
No.						
Clt1	Client ID	The unique identifier used by the state for each client. The identifier is assigned to a specific client and is used identify the same client across investigations and reporting periods. The client ID is encrypted by state for purposes of data submission. Data on multiple clients can be submitted for the investigation.	Yes	Single	Encoded ID	Not applicable

Element	Element Name	Element Description	Required	Cardinality	Type/Format	Code Values
No.						
Clt2	Maltreatment setting	The location where the alleged maltreatment occurred.	No	Single	Enumeration (code)	10 = own residence or private residence of relative or caregiver20 = residential care community (non-specific)21 = licensed residential care community22 = unlicensed residential care community30 = nursing home (non- 
Clt3	State/county FIPS code of client	The Federal Information Processing Series for state (2 digits) and county code (3 digits) of the client's residence at the start of the investigation.	No	Single	FIPS (#####)	Code is the unique identification number assigned to each state and county under the Federal Information Processing Standards (FIPS) guidelines. See http://www.census.gov/ge o/www/fips/fips.html

Element	Element Name	Element Description	Required	Cardinality	Type/Format	Code Values
No.						
Clt4	Case closure reason	The primary reason why the case was closed.	No	Single	Enumeration (code)	10 = investigationcompleted20 = investigationcompleted and protectiveservices case completed30 = investigation unableto be completed (non-specific)31 = investigationunable to be completeddue to death of clientduring investigation32 = investigationunable to be completeddue to refusal of client40 = protective servicescase opened but notcompleted (non-specific)41 = protective servicescase closed due to deathof client42 = protective servicescase closed due to clientdecision to not continue50 = other
Clt5	Age	The age of the client in years (at investigation start date).	No	Single	Enumeration (code)	18,1974 = actual age 75 = 75 through 84 85 = 85 and older
Clt6	Gender identity	The actual or perceived gender-related characteristics of the client.	No	Single	Enumeration (code)	1 = male 2 = female 3 = transgender
Clt7	Sexual orientation	The client's enduring pattern of or disposition to experience sexual or romantic desires for, and relationships with, people of one's same sex, the other sex, or both sexes.	No	Single	Enumeration (code)	1 = straight 2 = gay/lesbian 3 = bisexual 4 = questioning 5 = other

Element No.	Element Name	Element Description	Required	Cardinality	Type/Format	Code Values
Clt8	Race	The population(s) or group(s) that the client identifies as being a member. A client may have more than one race (multi-racial). For example, if a client is Asian and White, the client should be reported with both race values. If specific races cannot be identified for a multiracial client, the client is reported as "Other".	No	Multiple	Enumeration (code)	10 = American Indian orAlaska Native20 = Asian (non-specific)21 = Asian Indian22 = Chinese23 = Filipino24 = Japanese25 = Korean26 = Vietnamese27 = Other Asian30 = Black or AfricanAmerican40 = Native Hawaiian orOther Pacific Islander(non-specific)41 = Native Hawaiian42 = Guamanian orChamorro43 = Samoan44 = other PacificIslander50 = White60 = Other
Clt9	Ethnicity	The affiliation of the client as Hispanic or Latino/a or non- Hispanic or Latino/a. Multiple ethnicity code values can be submitted for the client.	No	Multiple	Enumeration (code)	<ul> <li>10 = yes, Hispanic or</li> <li>Latino/a, or Spanish origin</li> <li>(non-specific)</li> <li>11 = Mexican, Mexican</li> <li>American, Chicano/a</li> <li>12 = Puerto Rican</li> <li>13 = Cuban</li> <li>14 = other Hispanic,</li> <li>Latino/a, or Spanish origin</li> <li>20 = no, not Hispanic or</li> <li>Latino/a, or Spanish origin</li> </ul>
Clt10	Primary language	The primary language or method that the client uses for written and verbal communication.	No	Single	Enumeration (code)	<ul> <li>1 = Arabic</li> <li>2 = Chinese</li> <li>3 = English</li> <li>4 = French</li> <li>5 = German</li> <li>6 = Korean</li> <li>7 = Russian</li> <li>8 = Spanish or Spanish</li> <li>Creole</li> <li>9 = Tagalog</li> <li>10 = Vietnamese</li> <li>11 = sign language</li> <li>12 = assistive technology</li> <li>13 = other</li> </ul>

Element No.	Element Name	Element Description	Required	Cardinality	Type/Format	Code Values
Clt11	Marital status	The client's status based on state residency laws.	No	Single	Enumeration (code)	1 = never married 2 = married 3 = domestic partner, including civil union 4 = divorced 5 = separated 6 = widowed 7 = other
Clt12	Schooling level	The highest educational degree attained by the client.	No	Single	Enumeration (code)	<ul> <li>1 = less than high school</li> <li>2 = high school diploma or equivalent</li> <li>3 = associate's degree or bachelor's degree</li> <li>4 = advanced degree</li> </ul>
Clt13	Employment status	The involvement of the client in the labor force.	No	Single	Enumeration (code)	1 = employed 2 = unemployed 3 = not in labor force 4 = other
Clt14	Income level	The level of annual income of the client including all sources of income.	No	Single	Enumeration (code)	1 = less than \$25,000 2 = \$25,000-\$49,999 3 = \$50,000-\$74,999 4 = \$75,000-\$99,999 5 = \$100,000 or more
Clt15	Benefits	The federal and state benefits received by the client during the investigation. Multiple benefit code values can be submitted for the client.	No	Multiple	Enumeration (code)	<ul> <li>1 = Medicaid</li> <li>2 = Medicare</li> <li>3 = publicly-subsidized</li> <li>housing</li> <li>4 = Social Security</li> <li>Disability Insurance</li> <li>(SSDI)</li> <li>5 = Social Security</li> <li>retirement benefits</li> <li>6 = Supplemental Security</li> <li>Income (SSI)</li> <li>7 = Temporary Assistance</li> <li>for Needy Families</li> <li>(TANF)</li> <li>8 = veterans' disabled</li> <li>benefits</li> <li>9 = other</li> </ul>
Clt16	Veteran status	The client's status related to the US Armed Forces.	No	Single	Enumeration (code)	1 = veteran 2 = non-veteran
Clt17	Disabilities	The client's physical, emotional, and mental health issues that result in limitation in activities and restrictions to fully participate at school, work, or in the community. Multiple disability code values can be submitted for the client.	No	Multiple	Enumeration (code)	<ul> <li>1 = ambulatory difficulty</li> <li>2 = cognitive difficulty</li> <li>3 = communication</li> <li>difficulty</li> <li>4 = hearing difficulty</li> <li>5 = independent living</li> <li>difficulty</li> <li>6 = self-care difficulty</li> <li>7 = vision difficulty</li> <li>8 = other</li> <li>9 = none</li> </ul>

Element	Element Name	Element Description	Required	Cardinality	Type/Format	Code Values
No. Clt18	ADL score	The client's score on the Katz Index of Independence in Activities of Daily Living (ADL).	No	Single	Numeric (6 integers)	Permissible values are 0-6
Clt19	IADL score	The client's score on the Lawton Instrumental Activities of Daily Living (IADL).	No	Single	Numeric (6 integers)	Permissible values are 0-8
Clt20	Behavioral health screenings or diagnoses	The results of assessments on the client, conducted by the APS agency. Multiple behavioral health code values can be submitted for the client.	No	Multiple	Enumeration (code)	1 = alcohol use disorder2 = anxiety3 = bipolar disorder4 = dementia5 = depression6 = schizophrenia andother psychotic disorders7 = substance usedisorder8 = traumatic brain injury9 = other10 = none
Clt21	Living setting at start	The primary residential environment of the client at the start of investigation.	No	Single	Enumeration (code)	10 = own residence or residence of relative or caregiver20 = residential care community (non-specific)21 = licensed residential care community22 = non-licensed residential care community30 = nursing home (non- specific)31 = licensed nursing home 32 = non-licensed nursing home 40 = other
Clt22	Living setting at close	The primary residential environment of the client at the time of case closure.	No	Single	Enumeration (code)	10 = own residence or residence of relative or caregiver 20 = residential care community (non-specific) 21 = licensed residential care community 22 = non-licensed residential care community 30 = nursing home (non- specific) 31 = licensed nursing home 32 = non-licensed nursing home 40 = other

Element No.	Element Name	Element Description	Required	Cardinality	Type/Format	Code Values
Clt23	Substitute decision makers at start	The authorizations that are in effect related to health, personal, or financial decision making for the client at the start of the investigation. Multiple substitute decision maker code values can be submitted for the client.	No	Multiple	Enumeration (code)	10 = health care proxy in effect20 = financial proxy in effect30 = guardianship or conservatorship (non- specific)31 = guardianship or conservatorship of person 32 = guardianship or conservatorship of property 40 = representative payee 50 = none
Clt24	Substitute decision makers at close	The authorizations that are in effect related to health, personal, or financial decision making for the client at time of case closure. Multiple substitute decision maker code values can be submitted for the client.	No	Multiple	Enumeration (code)	10 = health care proxy in effect20 = financial proxy in effect30 = guardianship or conservatorship (non- specific)31 = guardianship or conservatorship of person 32 = guardianship or conservatorship of property 40 = representative payee 50 = none

Element	Element Name	Element Description	Required	Cardinality	Type/Format	Code Values
No.						
Clt25	Services at start	The services known to the agency that the client was already receiving at the start of the investigation. Multiple service code values can be submitted for the client.	No	Multiple	Enumeration (code)	1 = care/case management services2 = caregiver support services3 = community day services4 = education, employment, and training services5 = emergency assistance and material aid services6 = financial planning services7 = housing and relocation services8 = in-home assistance services9 = legal services10 = medical and dental services11 = medical rehabilitation services12 = mental health services13 = nutrition 14 = public assistance benefits15 = substance use services16 = transportation 17 = victim services 18 = other services19 = none

Element	Element Name	Element Description	Required	Cardinality	Type/Format	Code Values
No.						
Clt26	Services APS	The services that the agency provided on behalf of the client during the investigation or while the agency kept an open case. Multiple service code values can be submitted for the client.	No	Multiple	Enumeration (code)	1 = care/case management services2 = caregiver support services3 = community day services4 = education, employment, and training services5 = emergency assistance and material aid services6 = financial planning services7 = housing and relocation services8 = in-home assistance services9 = legal services10 = medical and dental services11 = medical rehabilitation services12 = mental health services13 = nutrition 14 = public assistance benefits15 = substance use services16 = transportation 17 = victim services18 = other services 19 = none

Element	Element Name	Element Description	Required	Cardinality	Type/Format	Code Values
No.						
Clt27	Services referred	The services for which the agency referred the client. Multiple services code values can be submitted for the client.	No	Multiple	Enumeration (code)	<ul> <li>1 = care/case</li> <li>management services</li> <li>2 = caregiver support</li> <li>services</li> <li>3 = community day</li> <li>services</li> <li>4 = education,</li> <li>employment, and training</li> <li>services</li> <li>5 = emergency assistance</li> <li>and material aid services</li> <li>6 = financial planning</li> <li>services</li> <li>7 = housing and relocation</li> <li>services</li> <li>9 = legal services</li> <li>10 = medical and dental</li> <li>services</li> <li>11 = medical rehabilitation</li> <li>services</li> <li>12 = mental health</li> <li>services</li> <li>13 = nutrition</li> <li>14 = public assistance</li> <li>benefits</li> <li>15 = substance use</li> <li>services</li> <li>16 = transportation</li> <li>17 = victim services</li> <li>18 = other services</li> <li>19 = none</li> </ul>

Element No.	Element Name	Element Description	Required	Cardinality	Type/Format	Code Values
Clt28	Services at close	The services known to the agency that the client was receiving at the time of case closure. Multiple services code values can be submitted for the client.	No	Multiple	Enumeration (code)	1 = care/case management services2 = caregiver support services3 = community day services4 = education, employment, and training services5 = emergency assistance and material aid services6 = financial planning services7 = housing and relocation services8 = in-home assistance services9 = legal services10 = medical and dental services11 = medical rehabilitation services12 = mental health services13 = nutrition 14 = public assistance benefits15 = substance use services16 = transportation 17 = victim services 18 = other services 19 = none
Clt29	Interagency coordination	The agencies to which the client was referred. Multiple interagency coordination code values can be submitted for the client.	No	Multiple	Enumeration (code)	<ul> <li>1 = law enforcement or prosecutorial offices</li> <li>2 = Protection and Advocacy or Client</li> <li>Advocacy Program (CAP)</li> <li>3 = state licensing agency</li> <li>4 = State Medicaid Fraud Control Unit (MFCU)</li> <li>5 = Long Term Care Ombudsman Program</li> <li>6 = other</li> <li>7 = none</li> </ul>
Clt30	Previous report	The indication that the agency has information that the client was the subject of a previous report.	No	Single	Enumeration (code)	1 = yes 2 = no

## Table 3–Maltreatment Allegation Entity

Each client may have multiple maltreatment allegation entities within a specific investigation but only one of a particular maltreatment type. Each maltreatment allegation entity is associated with only one client. Each maltreatment allegation entity must be composed of a maltreatment type and maltreatment disposition.

Element No.	Element Name	Element Description	Required	Cardinality	Type/Format	Code Values
Mal1	Maltreatment type	The alleged maltreatments that are investigated.	Yes	Single (per entity)	Enumeration (code)	10 = abandonment20 = emotional abuse30 = exploitation (non-specific)31= financial exploitation32= other exploitation40 = neglect50 = physical abuse60 = sexual abuse70 = suspicious death80 = self-neglect90 = other
Mal2	Maltreatment disposition	The disposition of each alleged maltreatment.	Yes	Single (per entity)	Enumeration (code)	1 = substantiated 2 = inconclusive 3 = unsubstantiated 4 = other

## Table 4–Perpetrator Entity

Each investigation may have zero, one, or more than one perpetrator. A perpetrator must be associated with at least one substantiated maltreatment investigation that is associated with a specific client within the investigation. A perpetrator may be associated with more than one investigation but a separate perpetrator entity is required for each of the associated investigations.

Element No.	Element Name	Element Description	Required	Cardinality	Type/Format	Code Values
Per1	Perpetrator ID	The unique identifier used by the state for the person who is found to be responsible for substantiated maltreatment(s). The identifier is assigned to a specific perpetrator and is used to identify the same perpetrator across investigations and reporting periods. The Perpetrator ID is encrypted by the state for purposes of data submission.	Yes	Single	Encoded ID	Not applicable
Per2	Age	The age of the perpetrator in years (at investigation start date).	No	Single	Enumeration (code)	17 = 17 and younger 18,1974 = actual age 75 = 75 through 84 85 = 85 and older
Per3	Gender identity	The actual or perceived gender-related characteristics of the perpetrator.	No	Single	Enumeration (code)	1 = male 2 = female 3 = transgender

Element	Element Name	Element Description	Required	Cardinality	Type/Format	Code Values
No. Per4	Race	The population(s) or group(s) that the perpetrator identifies as being a member. A perpetrator may have more than one race (multi-racial). For example, if a perpetrator is Asian and White, the perpetrator should be reported with both race values. If specific races cannot be identified for a multiracial perpetrator, the perpetrator is reported as "Other".	No	Multiple	Enumeration (code)	10 = American Indian or Alaska Native20 = Asian (non-specific)21 = Asian Indian22 = Chinese23 = Filipino24 = Japanese25 = Korean26 = Vietnamese27 = Other Asian30 = Black or AfricanAmerican40 = Native Hawaiian or Other Pacific Islander (non-specific)41 = Native Hawaiian 42 = Guamanian or Chamorro 43 = Samoan 44 = other Pacific Islander 50 = White
Per5	Ethnicity	The affiliation of the perpetrator as Hispanic or Latino/a or non-Hispanic or Latino/a. Multiple ethnicity code values can be submitted for the perpetrator.	No	Multiple	Enumeration (code)	60 = Other 10 = yes, Hispanic or Latino/a, or Spanish origin (non-specific) 11 = Mexican, Mexican American, Chicano/a 12 = Puerto Rican 13 = Cuban 14 = other Hispanic, Latino/a, or Spanish origin 20 = no, not Hispanic or Latino/a, or Spanish origin
Per6	Disabilities	The perpetrator's physical, emotional, and mental health issues that result in limitation in activities and restrictions to fully participate at school, work, or in the community. Multiple disability code values can be submitted for the perpetrator.	No	Multiple	Enumeration (code)	1 = ambulatory difficulty2 = cognitive difficulty3 = communicationdifficulty4 = hearing difficulty5 = independent livingdifficulty6 = self-care difficulty7 = vision difficulty8 = other9 = none

Element	Element Name	Element Description	Required	Cardinality	Type/Format	Code Values
No.						
Per7	Behavioral health screenings or diagnoses	The results of assessments on the perpetrator, conducted by the APS agency. Multiple behavioral health code values can be submitted for the perpetrator.	No	Multiple	Enumeration (code)	1 = alcohol use disorder2 = anxiety3 = bipolar disorder4 = dementia5 = depression6 = schizophrenia andother psychotic disorders7 = substance usedisorder8 = traumatic brain injury9 = other10 = none

## **Table 5–Client Perpetrator Relationship Entity**

Each client and perpetrator can have a designated relationship if data on one or more of the entity attributes is provided. A client and perpetrator have only one relationship entity within an investigation.

Element No.	Element Name	Element Description	Required	Cardinality	Type/Format	Code Values
CPR1	Cohabitation at start	The indication if the perpetrator and client are cohabitating at the start of the investigation.	No	Single	Enumeration (code)	1 = yes 2 = no
CPR2	Cohabitation at close	The indication if the perpetrator and client are cohabitating at the time of case closure.	No	Single	Enumeration (code)	1 = yes 2 = no
CPR3	Kinship relationship	The indication if the perpetrator is related to the client by affinity (blood, adoption, marriage, etc.).	No	Single	Enumeration (code)	10 = yes (non-specific)11 = spouse12 = domestic partner,including civil union13 = parent14 = child15 = sibling16 = grandparent17 = grandchild18 = other relative20 = none

Element No.	Element Name	Element Description	Required	Cardinality	Type/Format	Code Values
CPR4	Perpetrator association at start	The indication if the perpetrator has a caregiving relationship to the client at the start of the investigation.	No	Single	Enumeration (code)	10 = nursing home staff20 = residential carecommunity staff30 = relative caregiver(non-specific)31 = paid relativecaregiver32 = unpaid relativecaregiver40 = nonrelativecaregiver (non-specific)41 = paid nonrelativecaregiver42 = unpaid nonrelativecaregiver50 = other relationship60 = none
CPR5	Perpetrator association at close	The indication whether the perpetrator has a caregiving relationship to the client at time of case closure.	No	Single	Enumeration (code)	10 = nursing home staff20 = residential carecommunity staff30 = relative caregiver(non-specific)31 = paid relativecaregiver32 = unpaid relativecaregiver40 = nonrelativecaregiver (non-specific)41 = paid nonrelativecaregiver42 = unpaid nonrelativecaregiver50 = other relationship60 = none
CPR6	Perpetrator substitute decision maker at start	Authorizations that the perpetrator has in relation to the client, and that are in effect, related to health, personal or financial decision making at the start of the investigation. Multiple substitute decision maker code values can be submitted for the client perpetrator relationship.	No	Multiple	Enumeration (code)	10 = health care proxy in effect20 = financial proxy in effect30 = guardianship or conservatorship (non- specific)31 = guardianship or conservatorship of person32 = guardianship or conservatorship of property40 = representative payee 50 = none

Element	Element Name	Element Description	Required	Cardinality	Type/Format	Code Values
No.						
CPR7	Perpetrator substitute decision maker at close	Authorizations that the perpetrator has in relation to the client, and that are in effect, related to health, personal or financial decision making at the time of case closure. Multiple substitute decision maker code values can be submitted for the client perpetrator relationship.	No	Multiple	Enumeration (code)	10 = health care proxy in effect20 = financial proxy in effect30 = guardianship or conservatorship (non- specific)31 = guardianship or conservatorship of person32 = guardianship or conservatorship of property40 = representative payee 50 = none
CPR8	Perpetrator legal remedy recommendation	The legal remedies that were recommended or sought by the APS agency regarding the status of the perpetrator. Multiple legal remedy recommendation code values can be submitted for the client perpetrator relationship.	No	Multiple	Enumeration (code)	<ul> <li>1 = removal of guardianship rights</li> <li>2 = restraining order on perpetrator regarding the client</li> <li>3 = eviction of perpetrator</li> <li>4 = restitution by perpetrator</li> <li>5 = other legal remedy</li> <li>6 = none</li> </ul>