APPENDIX H

ADMINISTRATIVE DATA ELEMENTS FOR OUTCOME AND IMPACT ANALYSIS: RECOVERY, SAFETY, AND PERMANENCY

Recovery Data

Recommended RPG format: CSV

Upload Information:

- Each grantee will upload one CSV file with each record representing one treatment episode for each adult in a case.
- Grantees will need to obtain the records directly from the relevant state (or county) substance abuse treatment agencies, and then submit those data elements to the cross-site evaluation. These data are available as part of those reported for the TEDS (Treatment Episode Data Set).
- Each grantee will upload one file twice a year (once in April and once in October).

Data Elements:

#	Field Name	Long Name	Definition	Values	Data Type	Field Size	Required?
1	GRANTID	Grantee ID	The identification number provided by the Children's Bureau to the RPG grantee	Numbers and letters are OK; no special characters; not case sensitive	Alphanumeric	8	Y
2	CASID	Case ID	The RPG identification number assigned to each case	Numbers and letters are OK; no special characters; not case sensitive	Alphanumeric	6	Y
3	RCVADID	Adult's ID	The adult's RPG identification number	Numbers and letters are OK; no special characters; not case sensitive	Alphanumeric	6	Y
4	TREATID	Treatment Episode ID	Unique identifier for a particular treatment episode for an adult	Numbers and letters are OK; no special characters; not case sensitive	Alphanumeric	6	N
5	ADMDATE	Date of first treatment services for this treatment episode	The day when the client receives his or her first direct treatment service for this treatment episode	MM/DD/YYYY	Date	10	Y

6	DISDATE	Discharge Date	Date of Discharge	The end date of all treatment settings for this treatment episode	MM/DD/YYYY	Date	N
7	REASON	Reason for Discharge	The reason for discharge associated with this treatment episode	1=treatment completed 2=left against professional advice 3=terminated by facility 4=incarcerated 5=death 6=other 7=unknown	Numeric	1	Conditional
8	PRMTYPE	Primary Substance Type	Primary substance abuse problem (type) at admission	01=None 02=Alcohol 03=Cocaine/Crack 04=Marijuana/Hashish 05=Heroin 06=Non-Prescription Methadone 07=Other Opiates and	Numeric	2	Y

| 9 | SECTYPE | Secondary Substance Type | Secondary substance abuse problem (type) at admission | 01=None
02=Alcohol
03=Cocaine/Crack
04=Marijuana/Hashish
05=Heroin
06=Non-Prescription Methadone
07=Other Opiates and Synthetics
08=PCP
09=Other Hallucinogens
10=Methamphetamines
11=Other Amphetamines
12=Other Stimulants
13=Benzodiazepines
14=Other non-Benzodiazepine Tranquilizers
15=Barbiturates
16=Other non-Barbiturate Sedatives or Hypnotics
17=Inhalants
18=Over-the-counter
20=Other
97=Unknown
98=Not Collected | Numeric | 2 | Y |

| 10 | TERTYPE | Tertiary Substance Type | Tertiary substance abuse problem (type) at admission | 01=None
02=Alcohol
03=Cocaine/Crack
04=Marijuana/Hashish
05=Heroin
06=Non-Prescription Methadone
07=Other Opiates and Synthetics
08=PCP
09=Other Hallucinogens
10=Methamphetamines
11=Other Amphetamines
12=Other Stimulants
13=Benzodiazepines
14=Other non-Benzodiazepine Tranquilizers
15=Barbiturates
16=Other non-Barbiturate Sedatives or Hypnotics
17=Inhalants
18=Over-the-counter
20=Other
97=Unknown
98=Not Collected | Numeric | 2 | Y |

| 11 | PRMFREQ | Frequency of Use (Primary) | Frequency of use of primary substance type at admission | 01=No Use in Past Month
02=1-3 Times in Past Month
03=1-2 Times in Past Week
04=3-6 Times in Past Week
05=Daily
96=Not Applicable
97=Unknown
98=Not Collected | Numeric | 2 | Y |

12	SECFREQ	Frequency of Use (Secondary)	Frequency of use of secondary substance type at admission	01=No Use in Past Month 02=1-3 Times in Past Month 03=1-2 Times in Past Week 04=3-6 Times in Past Week 05=Daily 96=Not Applicable 97=Unknown 98=Not Collected	Numeric	2	Y

| 13 | TERFREQ | Frequency of Use (Tertiary) | Frequency of use of tertiary substance type at admission | 01=No Use in Past Month
02=1-3 Times in Past Month
03=1-2 Times in Past Week
04=3-6 Times in Past Week
05=Daily
96=Not Applicable
97=Unknown
98=Not Collected | Numeric | 2 | Y |

Safety and Permanency Data

Recommended RPG format: XML

Upload Information:

- Each grantee will upload one XML file with data on Case, Child, Maltreatment, Removal, and Placement information for each child in the case.
- Grantees will need to obtain the records directly from the relevant state (or county) child welfare agencies, and then submit those data elements to the cross-site evaluation. These data are available as part of those reported to states for NCANDS (National Child Abuse and Neglect Data System).
- Each grantee will upload one file twice a year (once in April and once in October).

Data Elements:

#	Field Name	NCANDS Field Name	Long Name	Definition	Values / Format	Data Type	Field Size	Required
1	GRANTID	-	Grantee ID	The identification number provided by the Children's Bureau to the grantee	No special characters; not case sensitive	Alphanumeric	8	Y
2	CASID	-	Case ID	The identification number assigned to each case by the grantee	No special characters; not case sensitive	Alphanumeric	6	Y
3	CHID	-	Focal Child ID	The focal child's identification number assigned by the grantee	No special characters; not case sensitive	Alphanumeric	8	Y
The following fields are for the Safety information. The elements only exist in the XML if the child has one or more abuse or neglect report								
4	RPTID	RPTID	Report ID	The encrypted identification number assigned to each report by the Child Welfare agency	No special characters; not case sensitive	Alphanumeric	12	Y
5	INCIDDT	INCIDDT	Incident Date	The month, day, and year on which the reported incident occurred	MM-DD-YYYY	Date	10	N
6	RPTDT	RPTDT	Report Date	The month, day, and year that	MM-DD-YYYY	Date	10	Y

				the responsible agency was notified of the suspected child maltreatment				
7	RPTDISDT	RPTDISPDT	Report Disposition Date	The point in time at the end of the investigation or assessment when a CPS worker declares a disposition to the child maltreatment report	MM-DD-YYYY	Date	10	Y
8	MALPHYS	-	Physical Abuse	See Glossary for a full definition	01=substantiated 02=indicated or reason to suspect 03=unsubstantiated 22=alternative response 88=other 99=unknown Blank=No allegation	Numeric	2	N
9	MALNGLT	-	Neglect	See Glossary for a full definition	01=substantiated 02=indicated or reason to suspect 03=unsubstantiated 22=alternative response 88=other 99=unknown Blank=No allegation	Numeric	2	N
10	MALMEDNGLT	-	Medical Neglect	See Glossary for a full definition	01=substantiated 02=indicated or reason to suspect 03=unsubstantiated 22=alternative response 88=other 99=unknown Blank=No allegation	Numeric	2	N
11	MALSEX	-	Sexual Abuse	See Glossary for a full definition	01=substantiated 02=indicated or reason to suspect 03=unsubstantiated 22=alternative response 88=other 99=unknown Blank=No allegation	Numeric	2	N
12	MALPSYCH	-	Psychological or Emotional Abuse	See Glossary for a full definition	01=substantiated 02=indicated or reason to suspect 03=unsubstantiated 22=alternative	Numeric	2	N

					response 88=other 99=unknown Blank=No allegation			
1 3	MALOTH	-	Other Maltreatment	See Glossary for a full definition	01=substantiated 02=indicated or reason to suspect 03=unsubstantiated 22=alternative response 88=other 99=unknown Blank=No allegation	Numeric	2	N
1 4	MALDEATH	MALDEATH	Maltreatment Death	See Glossary for a full definition	1=yes 2=no 9=unknown or missing	Numeric	1	N
The following fields are for the Removal information. These elements only exist in the XML if the child has one or more removal episodes.
1 5	RMVLID		Removal ID	Unique identifier to identify a particular removal for a focal child.	No special characters; not case sensitive	Alphanumeric	8	Y
1 6	DT_RMVL		Removal Date	The month, day and year the child was removed from his/her home for the purpose of being placed in foster care	MM-DD-YYYY	Date	10	Y
1 7	DT_END		Discharge Date	The month, day, and year this removal ended	MM-DD-YYYY	Date	10	N
1 8	DSCH_RSN		Discharge Reason	The reason for the discharge from this foster care episode	1 = Reunification with Parent(s) or Primary Caretaker(s) 2 = Living with Other Relative(s) 3 = Adoption 4 = Emancipation 5 = Guardianship 6 = Transfer to Another Agency 7 = Runaway 8 = Death of Child	Numeric	1	N
The following fields are for the Placement information. These elements only exist in the XML if the child has one or more placements within a removal episode.
1 9	PLCMID		Placement ID	Unique identifier to identify a particular placement within a removal for a focal child	No special characters; not case sensitive	Alphanumeric	8	Y
2 0	PLCM_BGN		Placement Start	The month, day, and year this	MM-DD-YYYY	Date	10	Y

			Date	out of home placement began				
2 1	PLCM_STG		Placement Setting	The type of setting of this out of home placement	1 = Pre-Adoptive Home 2 = Foster Family Home (Relative) 3 = Foster Family Home (Non-Relative) 4 = Group Home 5 = Institution 6 = Supervised Independent Living 7 = Runaway 8 = Trial Home Visit	Numeric	1	N
2 2	PLCM_END		Placement End Date	The month, day, and year this out of home placement ended	MM-DD-YYYY	Date	10	N