

# FSP Data Dictionary for Data Collection & Reporting System (DCR)

Key Event Tracking (KET),  
Partnership Assessment (PAF) &  
Quarterly Assessment (3M) Forms

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CALIFORNIA DEPARTMENT OF  
Mental Health

## BACKGROUND & DEVELOPMENT OF THE FSP OUTCOMES ASSESSMENT FORMS

Based on the AB2034 evaluation model, the Performance Measurement Advisory Committee developed initial requirements for measuring individual-level performance outcomes for Full Service Partners (FSPs). For all FSPs identified and served, providers must submit the data captured by these assessment forms. Three types of assessments (i.e., Partnership Assessment Form, Key Event Tracking and Quarterly Assessment) were developed for the age groups specified in the “*Mental Health Services Act Community Services and Supports, Three-Year Program and Expenditure Plan Requirements, Fiscal Years 2005-06, 2006-07, 2007-08*” document, including children/youth (0-15 years), transition age youth (16-25 years), adults (26-59 years), and older adults (60+ years).

The Partnership Assessment Form (PAF), completed when the partnership is established, captures history and baseline data. The Key Event Tracking (KET) is completed when a change occurs in key areas. The Quarterly Assessment (3M) is completed every three months. The table (below) shows the domains that are collected for each assessment type.

Assessment Types		
Partnership Assessment Form (PAF)	Key Event Tracking (KET)	Quarterly Assessment (3M)
Administrative Information	Administrative Information	Administrative Information
Residential (includes hospitalization & incarceration)	Residential (includes hospitalization and incarceration)	
Education	Education	Education
Employment	Employment	
Sources of Financial Support		Sources of Financial Support
Legal Issues / Designations	Legal Issues / Designations	Legal Issues / Designations
Emergency Intervention	Emergency Intervention	
Health Status		Health Status
Substance Abuse		Substance Abuse
ADL / IADL - Older Adults Only		ADL / IADL – Older Adults Only

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## Partnership Assessment Form (PAF) Variables

**Variable Name:** AB2034

**Question:**

ADMINISTRATIVE INFORMATION: Program Information - Was the partner involved in the AB2034 program?

**Details:**

**Age Group:** TAY, Adult, Older Adult

**Type:** Text

**Format:** X

**Width:** 1

**Form Type:** PAF

**CSV File Type:** PAF\_RES, PAF\_NON-RES, KET

**Valid Codes:** 1 = Yes (marked)

**Comments:**

Indicates whether the partner was involved in the AB2034 program

## Partnership Assessment Form (PAF) Variables

**Variable Name:** AbuseServices

**Question:**

SUBSTANCE ABUSE: Is the partner CURRENTLY receiving substance abuse services?

**Details:**

**Age Group:** Child, TAY, Adult, Older Adult

**Type:** Text

**Format:** X

**Width:** 1

**Form Type:** PAF, 3M

**CSV File Type:** PAF\_NON-RES, 3M

**Valid Codes:** 0 = No  
1 = Yes

**Comments:**

## Partnership Assessment Form (PAF) Variables

**Variable Name:** ActiveProblem

**Question:**

SUBSTANCE ABUSE: In the opinion of the partnership service coordinator, does the partner CURRENTLY have a co-occurring mental illness and substance abuse problem?

**Details:**

**Age Group:** Child, TAY, Adult, Older Adult

**Type:** Text

**Format:** X

**Width:** 1

**Form Type:** PAF, 3M

**CSV File Type:** PAF\_NON-RES, 3M

**Valid Codes:** 0 = No  
1 = Yes

**Comments:**

## Partnership Assessment Form (PAF) Variables

**Variable Name:** Adopted

**Question:**

LEGAL ISSUES / DESIGNATIONS: Custody Information - Indicate the number of children the partner has who are CURRENTLY adopted out.

**Details:**

**Age Group:** Child, TAY, Adult, Older Adult

**Type:** Number

**Format:** XX

**Width:** 2

**Form Type:** PAF, 3M

**CSV File Type:** PAF\_NON-RES, 3M

**Valid Codes:** 0-99

**Comments:**

## Partnership Assessment Form (PAF) Variables

**Variable Name:** Age\_Group

**Question:**

Internal DCR Administrative field which indicates the age group the partner belonged to at the time the form was completed

**Details:**

**Age Group:** Child, TAY, Adult, Older Adult

**Type:** Number

**Format:** XX

**Width:** 2

**Form Type:** PAF, KET, 3M

**CSV File Type:** PAF\_RES, PAF\_NON-RES, KET, 3M

**Valid Codes:**

- 1 = Child PAF
- 2 = Child KET
- 3 = Child 3M
- 4 = TAY PAF
- 5 = TAY KET
- 6 = TAY 3M
- 7 = Adult PAF
- 8 = Adult KET
- 9 = Adult 3M
- 10 = Older Adult PAF
- 11 = Older Adult KET
- 12 = Older Adult 3M

**Comments:**

## Partnership Assessment Form (PAF) Variables

**Variable Name:** AnotherReason

**Question:**

EDUCATION: Is the partner CURRENTLY receiving special education due to another reason?

**Details:**

**Age Group:** Child, TAY

**Type:** Text

**Format:** X

**Width:** 1

**Form Type:** PAF, 3M

**CSV File Type:** PAF\_NON-RES, 3M

**Valid Codes:** 0 = No  
1 = Yes

**Comments:**

## Partnership Assessment Form (PAF) Variables

**Variable Name:** ApartmentAlone\_PastTwelveDays

**Question:**

RESIDENTIAL INFORMATION: General Living Arrangement - In an apartment or house alone / with spouse / partner / minor children / other dependents / roommate - must hold lease or share in rent / mortgage

**Details:**

**Age Group:** Child, TAY, Adult, Older Adult

**Type:** Number

**Format:** XXX

**Width:** 3

**Form Type:** PAF

**CSV File Type:** PAF\_RES

**Valid Codes:** 0-365

**Comments:**

Indicates the number of DAYS the partner has been living in this setting during the past 12 months

## Partnership Assessment Form (PAF) Variables

**Variable Name:** ApartmentAlone\_PastTwelveOccurrences

**Question:**

RESIDENTIAL INFORMATION: General Living Arrangement - In an apartment or house alone / with spouse / partner / minor children / other dependents / roommate - must hold lease or share in rent / mortgage

**Details:**

**Age Group:** Child, TAY, Adult, Older Adult

**Type:** Number

**Format:** XXX

**Width:** 3

**Form Type:** PAF

**CSV File Type:** PAF\_RES

**Valid Codes:** 0-999

**Comments:**

Indicates the number of OCCURRENCES the partner has been living in this setting during the past 12 months



## Partnership Assessment Form (PAF) Variables

**Variable Name:** ApartmentAlone\_PriorTwelve

**Question:**

RESIDENTIAL INFORMATION: General Living Arrangement - In an apartment or house alone / with spouse / partner / minor children / other dependents / roommate - must hold lease or share in rent / mortgage

**Details:**

**Age Group:** Child, TAY, Adult, Older Adult

**Type:** Text

**Format:** X

**Width:** 1

**Form Type:** PAF

**CSV File Type:** PAF\_RES

**Valid Codes:** 1 = Yes (marked)

**Comments:**

Indicates whether the partner has lived in this setting anytime PRIOR TO THE LAST 12 MONTHS

## Partnership Assessment Form (PAF) Variables

**Variable Name:** ArrestPast12

**Question:**

LEGAL ISSUES / DESIGNATIONS: Arrest Information - Indicate the number of times the partner was arrested DURING THE PAST 12 MONTHS

**Details:**

**Age Group:** Child, TAY, Adult, Older Adult

**Type:** Number

**Format:** XX

**Width:** 2

**Form Type:** PAF

**CSV File Type:** PAF\_NON-RES

**Valid Codes:** 0-99

**Comments:**

## Partnership Assessment Form (PAF) Variables

**Variable Name:** ArrestPrior12

**Question:**

LEGAL ISSUES / DESIGNATIONS: Arrest Information: Was the partner arrested anytime PRIOR TO THE PAST 12 MONTHS?

**Details:**

**Age Group:** Child, TAY, Adult, Older Adult

**Type:** Text

**Format:** X

**Width:** 1

**Form Type:** PAF

**CSV File Type:** PAF\_NON-RES

**Valid Codes:** 0 = No  
1 = Yes

**Comments:**

## Partnership Assessment Form (PAF) Variables

**Variable Name:** AssessmentDate

**Question:**

PARTNERSHIP INFORMATION: Date Completed - If the record is a PAF, the value for this field is the same as the Partnership Date

**Details:**

**Age Group:** Child, TAY, Adult, Older Adult

**Type:** Text

**Format:** mm/dd/yyyy

**Width:** 10

**Form Type:** PAF, KET, 3M

**CSV File Type:** PAF\_RES, PAF\_NON-RES, KET, 3M

**Valid Codes:** leading zeros

**Comments:**

## Partnership Assessment Form (PAF) Variables

**Variable Name:** AssessmentID

**Question:**

Internal DCR Administrative field for individually identifying each assessment

**Details:**

**Age Group:** Child, TAY, Adult, Older Adult

**Type:** Text

**Format:** XXXXX

**Width:** 5

**Form Type:** PAF, KET, 3M

**CSV File Type:** PAF\_RES, PAF\_NON-RES, KET, 3M

**Valid Codes:**

**Comments:**

## Partnership Assessment Form (PAF) Variables

**Variable Name:** AssessmentSource

**Question:**

Internal DCR Administrative field which indicates how the record was submitted/edited

**Details:**

**Age Group:** Child, TAY, Adult, Older Adult

**Type:** Number

**Format:** X

**Width:** 1

**Form Type:** PAF, KET, 3M

**CSV File Type:** PAF\_RES, PAF\_NON-RES, KET, 3M

**Valid Codes:** 1 = DCR Online System  
2 = XML Batch Upload  
3 = Legacy/DCR Interim System

**Comments:**

## Partnership Assessment Form (PAF) Variables

**Variable Name:** AssessmentType

**Question:**

Internal DCR Administrative field which indicates the form type from which the data were collected

**Details:**

**Age Group:** Child, TAY, Adult, Older Adult

**Type:** Text

**Format:** XXX

**Width:** 3

**Form Type:** PAF, KET, 3M

**CSV File Type:** PAF\_RES, PAF\_NON-RES, KET, 3M

**Valid Codes:** PAF = Partnership Assessment Form  
KET = Key Event Tracking form  
3M = Quarterly Assessment form

**Comments:**

## Partnership Assessment Form (PAF) Variables

**Variable Name:** AssistedLiving\_PastTwelveDays

**Question:**

RESIDENTIAL INFORMATION: Supervised Placement - Assisted Living

**Details:**

**Age Group:** Adult, Older Adult

**Type:** Number

**Format:** XXX

**Width:** 3

**Form Type:** PAF

**CSV File Type:** PAF\_RES

**Valid Codes:** 0-365

**Comments:**

Indicates the number of DAYS the partner has been living in this setting during the past 12 months



## Partnership Assessment Form (PAF) Variables

**Variable Name:** AssistedLiving\_PastTwelveOccurences

**Question:**

RESIDENTIAL INFORMATION: Supervised Placement - Assisted Living

**Details:**

**Age Group:** Adult, Older Adult

**Type:** Number

**Format:** XXX

**Width:** 3

**Form Type:** PAF

**CSV File Type:** PAF\_RES

**Valid Codes:** 0-999

**Comments:**

Indicates the number of OCCURRENCES the partner has been living in this setting during the past 12 months

## Partnership Assessment Form (PAF) Variables

**Variable Name:** AssistedLiving\_PriorTwelve

**Question:**

RESIDENTIAL INFORMATION: Supervised Placement - Assisted Living

**Details:**

**Age Group:** Adult, Older Adult

**Type:** Text

**Format:** X

**Width:** 1

**Form Type:** PAF

**CSV File Type:** PAF\_RES

**Valid Codes:** 1 = Yes (marked)

**Comments:**

Indicates whether the partner has lived in this setting anytime PRIOR TO THE LAST 12 MONTHS

## Partnership Assessment Form (PAF) Variables

**Variable Name:** AttendanceCurr

**Question:**

EDUCATION: Estimate the partner's attendance level (excluding scheduled breaks and excused absences) CURRENTLY:

**Details:**

**Age Group:** Child, TAY

**Type:** Text

**Format:** X

**Width:** 1

**Form Type:** PAF, 3M

**CSV File Type:** PAF\_NON-RES, 3M

**Valid Codes:** 1 = Always attends school (never truant)  
2 = Attends school most of the time  
3 = Sometimes attends school  
4 = Infrequently attends school  
5 = Never attends school

**Comments:**

## Partnership Assessment Form (PAF) Variables

**Variable Name:** AttendancePast12

**Question:**

EDUCATION: Estimate the partner's attendance level (excluding scheduled breaks and excused absences) DURING THE PAST 12 MONTHS:

**Details:**

**Age Group:** Child, TAY

**Type:** Text

**Format:** X

**Width:** 1

**Form Type:** PAF

**CSV File Type:** PAF\_NON-RES

**Valid Codes:** 1 = Always attends school (never truant)  
2 = Attends school most of the time  
3 = Sometimes attends school  
4 = Infrequently attends school  
5 = Never attends school

**Comments:**

## Partnership Assessment Form (PAF) Variables

**Variable Name:** Bathing

**Question:**

INDEX OF INDEPENDENT ACTIVITIES OF DAILY LIVING (ADL): Bathing - either sponge bath, tub bath or shower

**Details:**

**Age Group:** Older Adult

**Type:** Text

**Format:** X

**Width:** 1

**Form Type:** PAF, 3M

**CSV File Type:** PAF\_NON-RES, 3M

**Valid Codes:** 1 = Receives no assistance  
2 = Receives assistance in bathing only one part of the body  
3 = Receives assistance in bathing more than one part of the body (or not bathed)

**Comments:**

For this area of functioning, select the description that applies.

## Partnership Assessment Form (PAF) Variables

**Variable Name:** Caregivers\_Curr

**Question:**

SOURCES OF FINANCIAL SUPPORT: Caregiver's Wages

**Details:**

**Age Group:** Child, TAY

**Type:** Text

**Format:** X

**Width:** 1

**Form Type:** PAF, 3M

**CSV File Type:** PAF\_NON-RES, 3M

**Valid Codes:** 1 = Yes (marked)

**Comments:**

Indicates if the partner CURRENTLY receives this type of financial support

## Partnership Assessment Form (PAF) Variables

**Variable Name:** Caregivers\_Past12

**Question:**

SOURCES OF FINANCIAL SUPPORT: Caregiver's Wages

**Details:**

**Age Group:** Child, TAY

**Type:** Text

**Format:** X

**Width:** 1

**Form Type:** PAF

**CSV File Type:** PAF\_NON-RES

**Valid Codes:** 1 = Yes (marked)

**Comments:**

Indicates if the partner received this type of financial support DURING THE PAST 12 MONTHS

## Partnership Assessment Form (PAF) Variables

**Variable Name:** ChildSupport\_Curr

**Question:**

SOURCES OF FINANCIAL SUPPORT: Child Support

**Details:**

**Age Group:** Child, TAY

**Type:** Text

**Format:** X

**Width:** 1

**Form Type:** PAF, 3M

**CSV File Type:** PAF\_NON-RES, 3M

**Valid Codes:** 1 = Yes (marked)

**Comments:**

Indicates if the partner CURRENTLY receives this type of financial support



## Partnership Assessment Form (PAF) Variables

**Variable Name:** ChildSupport\_Past12

**Question:**

SOURCES OF FINANCIAL SUPPORT: Child Support

**Details:**

**Age Group:** Child, TAY

**Type:** Text

**Format:** X

**Width:** 1

**Form Type:** PAF

**CSV File Type:** PAF\_NON-RES

**Valid Codes:** 1 = Yes (marked)

**Comments:**

Indicates if the partner received this type of financial support DURING THE PAST 12 MONTHS

## Partnership Assessment Form (PAF) Variables

**Variable Name:** CommunityCare\_PastTwelveDays

**Question:**

RESIDENTIAL INFORMATION: Supervised Placement - Licensed Community Care Facility (Board and Care)

**Details:**

**Age Group:** TAY, Adult, Older Adult

**Type:** Number

**Format:** XXX

**Width:** 3

**Form Type:** PAF

**CSV File Type:** PAF\_RES

**Valid Codes:** 0-365

**Comments:**

Indicates the number of DAYS the partner has been living in this setting during the past 12 months

## Partnership Assessment Form (PAF) Variables

**Variable Name:** CommunityCare\_PastTwelveOccurrences

**Question:**

RESIDENTIAL INFORMATION: Supervised Placement - Licensed Community Care Facility (Board and Care)

**Details:**

**Age Group:** TAY, Adult, Older Adult

**Type:** Number

**Format:** XXX

**Width:** 3

**Form Type:** PAF

**CSV File Type:** PAF\_RES

**Valid Codes:** 0-999

**Comments:**

Indicates the number of OCCURRENCES the partner has been living in this setting during the past 12 months

## Partnership Assessment Form (PAF) Variables

**Variable Name:** CommunityCare\_PriorTwelve

**Question:**

RESIDENTIAL INFORMATION: Supervised Placement - Licensed Community Care Facility (Board and Care)

**Details:**

**Age Group:** TAY, Adult, Older Adult

**Type:** Text

**Format:** X

**Width:** 1

**Form Type:** PAF

**CSV File Type:** PAF\_RES

**Valid Codes:** 1 = Yes (marked)

**Comments:**

Indicates whether the partner has lived in this setting anytime PRIOR TO THE LAST 12 MONTHS

## Partnership Assessment Form (PAF) Variables

**Variable Name:** CommunityCollegeCurr

**Question:**

EDUCATION: Community College / 4 Year College

**Details:**

**Age Group:** TAY, Adult, Older Adult

**Type:** Text

**Format:** X

**Width:** 1

**Form Type:** PAF, KET

**CSV File Type:** PAF\_NON-RES, KET

**Valid Codes:** 1 = Yes (marked)

**Comments:**

Indicates whether the partner is CURRENTLY in this educational setting.

## Partnership Assessment Form (PAF) Variables

**Variable Name:** CommunityCollegePast12

**Question:**

EDUCATION: Community College / 4 Year College

**Details:**

**Age Group:** TAY, Adult, Older Adult

**Type:** Number

**Format:** XX

**Width:** 2

**Form Type:** PAF

**CSV File Type:** PAF\_NON-RES

**Valid Codes:** 0-52

**Comments:**

Number of weeks the partner was in this educational setting DURING THE PAST 12 MONTHS

## Partnership Assessment Form (PAF) Variables

**Variable Name:** CommunityTreatment\_PastTwelveDays

**Question:**

RESIDENTIAL INFORMATION: Residential Program - Community Treatment Facility

**Details:**

**Age Group:** Child, TAY

**Type:** Number

**Format:** XXX

**Width:** 3

**Form Type:** PAF

**CSV File Type:** PAF\_RES

**Valid Codes:** 0-365

**Comments:**

Indicates the number of DAYS the partner has been living in this setting during the past 12 months

## Partnership Assessment Form (PAF) Variables

**Variable Name:** CommunityTreatment\_PastTwelveOccurences

**Question:**

RESIDENTIAL INFORMATION: Residential Program - Community Treatment Facility

**Details:**

**Age Group:** Child, TAY

**Type:** Number

**Format:** XXX

**Width:** 3

**Form Type:** PAF

**CSV File Type:** PAF\_RES

**Valid Codes:** 0-999

**Comments:**

Indicates the number of OCCURRENCES the partner has been living in this setting during the past 12 months



## Partnership Assessment Form (PAF) Variables

**Variable Name:** CommunityTreatment\_PriorTwelve

**Question:**

RESIDENTIAL INFORMATION: Residential Program - Community Treatment Facility

**Details:**

**Age Group:** Child, TAY

**Type:** Text

**Format:** X

**Width:** 1

**Form Type:** PAF

**CSV File Type:** PAF\_RES

**Valid Codes:** 1 = Yes (marked)

**Comments:**

Indicates whether the partner has lived in this setting anytime PRIOR TO THE LAST 12 MONTHS

## Partnership Assessment Form (PAF) Variables

**Variable Name:** CongregatePlacement\_PastTwelveDays

**Question:**

RESIDENTIAL INFORMATION: Supervised Placement - Unlicensed but supervised congregate placement (includes group living homes, sober living homes)

**Details:**

**Age Group:** TAY, Adult, Older Adult

**Type:** Number

**Format:** XXX

**Width:** 3

**Form Type:** PAF

**CSV File Type:** PAF\_RES

**Valid Codes:** 0-365

**Comments:**

Indicates the number of DAYS the partner has been living in this setting during the past 12 months

## Partnership Assessment Form (PAF) Variables

**Variable Name:** CongregatePlacement\_PastTwelveOccurences

**Question:**

RESIDENTIAL INFORMATION: Supervised Placement - Unlicensed but supervised congregate placement (includes group living homes, sober living homes)

**Details:**

**Age Group:** TAY, Adult, Older Adult

**Type:** Number

**Format:** XXX

**Width:** 3

**Form Type:** PAF

**CSV File Type:** PAF\_RES

**Valid Codes:** 0-999

**Comments:**

Indicates the number of OCCURRENCES the partner has been living in this setting during the past 12 months

## Partnership Assessment Form (PAF) Variables

**Variable Name:** CongregatePlacement\_PriorTwelve

**Question:**

RESIDENTIAL INFORMATION: Supervised Placement - Unlicensed but supervised congregate placement (includes group living homes, sober living homes)

**Details:**

**Age Group:** TAY, Adult, Older Adult

**Type:** Text

**Format:** X

**Width:** 1

**Form Type:** PAF

**CSV File Type:** PAF\_RES

**Valid Codes:** 1 = Yes (marked)

**Comments:**

Indicates whether the partner has lived in this setting anytime PRIOR TO THE LAST 12 MONTHS

## Partnership Assessment Form (PAF) Variables

**Variable Name:** ConservaStatus

**Question:**

LEGAL ISSUES / DESIGNATIONS: Conservatorship / Payee Information: Is the partner CURRENTLY on conservatorship?

**Details:**

**Age Group:** Child, TAY, Adult, Older Adult

**Type:** Text

**Format:** X

**Width:** 1

**Form Type:** PAF

**CSV File Type:** PAF\_NON-RES, KET

**Valid Codes:** 0 = No  
1 = Yes

**Comments:**

## Partnership Assessment Form (PAF) Variables

**Variable Name:** ConservPast12

**Question:**

LEGAL ISSUES / DESIGNATIONS: Conservatorship / Payee Information: Was the partner on conservatorship DURING THE PAST 12 MONTHS?

**Details:**

**Age Group:** Child, TAY, Adult, Older Adult

**Type:** Text

**Format:** X

**Width:** 1

**Form Type:** PAF

**CSV File Type:** PAF\_NON-RES

**Valid Codes:** 0 = No  
1 = Yes

**Comments:**

## Partnership Assessment Form (PAF) Variables

**Variable Name:** ConservPrior12

**Question:**

LEGAL ISSUES / DESIGNATIONS: Conservatorship / Payee Information: Was the partner on conservatorship anytime PRIOR TO THE PAST 12 MONTHS?

**Details:**

**Age Group:** Child, TAY, Adult, Older Adult

**Type:** Text

**Format:** X

**Width:** 1

**Form Type:** PAF

**CSV File Type:** PAF\_NON-RES

**Valid Codes:** 0 = No  
1 = Yes

**Comments:**

## Partnership Assessment Form (PAF) Variables

**Variable Name:** Continence

**Question:**

INDEX OF INDEPENDENT ACTIVITIES OF DAILY LIVING (ADL): Continence

**Details:**

**Age Group:** Older Adult

**Type:** Text

**Format:** X

**Width:** 1

**Form Type:** PAF, 3M

**CSV File Type:** PAF\_NON-RES, 3M

**Valid Codes:** 1 = Controls urination and bowel movement completely by self  
2 = Has occasional 'accidents'  
3 = Supervision helps keep urine or bowel control; catheter is used, or person is incontinent

**Comments:**

For this area of functioning, select the description that applies.



## Partnership Assessment Form (PAF) Variables

**Variable Name:** CoordinatorID

**Question:**

ADMINISTRATIVE INFORMATION: Partnership Status - Partnership Service Coordinator ID

**Details:**

**Age Group:** Child, TAY, Adult, Older Adult

**Type:** Text

**Format:** PSCLastName, PSCFirstName

**Width:** 25

**Form Type:** PAF, KET

**CSV File Type:** PAF\_RES, PAF\_NON-RES, KET

**Valid Codes:** 0-9, A-Z

**Comments:**

## Partnership Assessment Form (PAF) Variables

**Variable Name:** CountyFSPID

**Question:**

PARTNERSHIP INFORMATION: County Partner ID (Optional)

**Details:**

**Age Group:** Child, TAY, Adult, Older Adult

**Type:** Text

**Format:** XXXXXXXXXXXXXXXXX

**Width:** 15

**Form Type:** PAF, KET, 3M

**CSV File Type:** PAF\_RES, PAF\_NON-RES, KET, 3M

**Valid Codes:** 0-9, A-Z Right justify, use left leading zeros

**Comments:**

Optional internal county identifier.

## Partnership Assessment Form (PAF) Variables

**Variable Name:** CountyID

**Question:**

PARTNERSHIP INFORMATION: County (city submitting record)

**Details:**

**Age Group:** Child, TAY, Adult, Older Adult

**Type:** Text

**Format:** XX

**Width:** 2

**Form Type:** PAF, KET, 3M

**CSV File Type:** PAF\_RES, PAF\_NON-RES, KET, 3M

**Valid Codes:** 01 - 66, See Appendix A for codes

**Comments:**

NOTE: Should include leading zeros

## Partnership Assessment Form (PAF) Variables

**Variable Name:** CreatedDate

**Question:**

Internal DCR Administrative field that indicates the date when the record was submitted to the DCR.

**Details:**

**Age Group:** Child, TAY, Adult, Older Adult

**Type:** Text

**Format:** mm/dd/yyyy

**Width:** 10

**Form Type:** PAF, KET, 3M

**CSV File Type:** PAF\_RES, PAF\_NON-RES, KET, 3M

**Valid Codes:**

**Comments:**

## Partnership Assessment Form (PAF) Variables

**Variable Name:** CSIDateOfBirth

**Question:**

When available, this variable is populated using the DMH Client and Services Information System (CSI) when a valid CCN is provided to the DCR

**Details:**

**Age Group:** Child, TAY, Adult, Older Adult

**Type:** Text

**Format:** mm/dd/yyyy

**Width:** 10

**Form Type:** PAF, KET, 3M

**CSV File Type:** PAF\_RES, PAF\_NON-RES, KET, 3M

**Valid Codes:**

**Comments:**

Populated using the DMH Client and Services Information (CSI) System "date of birth" variable (if available) after a match is found between the CCN entered into the DCR and the CCN submitted to the CSI System.

## Partnership Assessment Form (PAF) Variables

**Variable Name:** CSHispanic

**Question:**

Is the client of Hispanic or Latino ethnicity? When available, this variable is obtained from the DMH Client and Services Information System (CSI) when a valid CCN is provided to the DCR.

**Details:**

**Age Group:** Child, TAY, Adult, Older Adult

**Type:** None

**Format:** X

**Width:** None

**Form Type:** PAF, KET, 3M

**CSV File Type:** PAF\_RES, PAF\_NON-RES, KET, 3M

**Valid Codes:** Y = Yes  
N = No  
U = Unknown/Not Reported

**Comments:**

Populated using the DMH Client and Services Information (CSI) System "Ethnicity" variable (if available) after a match is found between the CCN entered into the DCR and the CCN submitted to the CSI System. (Note: This field is currently not being populated from CSI.)

## Partnership Assessment Form (PAF) Variables

**Variable Name:** CSINumber

**Question:**

PARTNERSHIP INFORMATION: CSI County Client Number (CCN)

**Details:**

**Age Group:** Child, TAY, Adult, Older Adult

**Type:** Text

**Format:** XXXXXXXXX

**Width:** 9

**Form Type:** PAF, KET, 3M

**CSV File Type:** PAF\_RES, PAF\_NON-RES, KET, 3M

**Valid Codes:** 0-9, A-Z Right justify, use left leading zeros

**Comments:**

This is the same client identifier that is created by the county and submitted to the DMH Client and Services Information (CSI) System. Note: Should include leading zeros.

## Partnership Assessment Form (PAF) Variables

**Variable Name:** CSIRace1

**Question:**

When available, this variable is populated using the DMH Client and Services Information System (CSI) when a valid CCN is provided to the DCR

**Details:**

**Age Group:** Child, TAY, Adult, Older Adult

**Type:** None

**Format:** X

**Width:** None

**Form Type:** PAF, KET, 3M

**CSV File Type:** PAF\_RES, PAF\_NON-RES, KET, 3M

**Valid Codes:** 1 = White  
2 = Hispanic  
3 = Black  
5 = American Native  
7 = Filipino  
A = Amerasian  
C = Chinese  
H = Cambodian  
J = Japanese  
K = Korean  
M = Samoan  
N = Asian Indian  
P = Hawaiian Native  
R = Guamanian  
T = Laotian  
V = Vietnamese  
X = Multiple (only valid in subfield B)  
4 = Other Asian or Pacific Islander  
8 = Other  
9 = Unknown / Not Reported

**Comments:**

Populated using the DMH Client and Services Information (CSI) System "Race1" variable (if available) after a match is found between the CCN entered into the DCR and the CCN submitted to the CSI System.



## Partnership Assessment Form (PAF) Variables

**Variable Name:** CSIRace2

**Question:**

When available, this variable is populated using the DMH Client and Services Information System (CSI) when a valid CCN is provided to the DCR

**Details:**

**Age Group:** Child, TAY, Adult, Older Adult

**Type:** None

**Format:** X

**Width:** None

**Form Type:** PAF, KET, 3M

**CSV File Type:** PAF\_RES, PAF\_NON-RES, KET, 3M

**Valid Codes:**

- 1 = White
- 2 = Hispanic
- 3 = Black
- 5 = American Native
- 7 = Filipino
- A = Amerasian
- C = Chinese
- H = Cambodian
- J = Japanese
- K = Korean
- M = Samoan
- N = Asian Indian
- P = Hawaiian Native
- R = Guamanian
- T = Laotian
- V = Vietnamese
- X = Multiple (only valid in subfield B)
- 4 = Other Asian or Pacific Islander
- 8 = Other
- 9 = Unknown / Not Reported

**Comments:**

Populated using the DMH Client and Services Information (CSI) System "Race2" variable (if available) after a match is found between the CCN entered into the DCR and the CCN submitted to the CSI System.

## Partnership Assessment Form (PAF) Variables

**Variable Name:** CSIRace3

**Question:**

When available, this variable is populated using the DMH Client and Services Information System (CSI) when a valid CCN is provided to the DCR

**Details:**

**Age Group:** Child, TAY, Adult, Older Adult

**Type:** None

**Format:** X

**Width:** None

**Form Type:** PAF, KET, 3M

**CSV File Type:** PAF\_RES, PAF\_NON-RES, KET, 3M

**Valid Codes:** 1 = White  
2 = Hispanic  
3 = Black  
5 = American Native  
7 = Filipino  
A = Amerasian  
C = Chinese  
H = Cambodian  
J = Japanese  
K = Korean  
M = Samoan  
N = Asian Indian  
P = Hawaiian Native  
R = Guamanian  
T = Laotian  
V = Vietnamese  
X = Multiple (only valid in subfield B)  
4 = Other Asian or Pacific Islander  
8 = Other  
9 = Unknown / Not Reported

**Comments:**

Populated using the DMH Client and Services Information (CSI) System "Race3" variable (if available) after a match is found between the CCN entered into the DCR and the CCN submitted to the CSI System.

## Partnership Assessment Form (PAF) Variables

**Variable Name:** CSIRace4

**Question:**

When available, this variable is populated using the DMH Client and Services Information System (CSI) when a valid CCN is provided to the DCR

**Details:**

**Age Group:** Child, TAY, Adult, Older Adult

**Type:** None

**Format:** X

**Width:** None

**Form Type:** PAF, KET, 3M

**CSV File Type:** PAF\_RES, PAF\_NON-RES, KET, 3M

**Valid Codes:**

- 1 = White
- 2 = Hispanic
- 3 = Black
- 5 = American Native
- 7 = Filipino
- A = Amerasian
- C = Chinese
- H = Cambodian
- J = Japanese
- K = Korean
- M = Samoan
- N = Asian Indian
- P = Hawaiian Native
- R = Guamanian
- T = Laotian
- V = Vietnamese
- X = Multiple (only valid in subfield B)
- 4 = Other Asian or Pacific Islander
- 8 = Other
- 9 = Unknown / Not Reported

**Comments:**

Populated using the DMH Client and Services Information (CSI) System "Race4" variable (if available) after a match is found between the CCN entered into the DCR and the CCN submitted to the CSI System.

## Partnership Assessment Form (PAF) Variables

**Variable Name:** CSIRace5

**Question:**

When available, this variable is populated using the DMH Client and Services Information System (CSI) when a valid CCN is provided to the DCR

**Details:**

**Age Group:** Child, TAY, Adult, Older Adult

**Type:** None

**Format:** X

**Width:** None

**Form Type:** PAF, KET, 3M

**CSV File Type:** PAF\_RES, PAF\_NON-RES, KET, 3M

**Valid Codes:** 1 = White  
2 = Hispanic  
3 = Black  
5 = American Native  
7 = Filipino  
A = Amerasian  
C = Chinese  
H = Cambodian  
J = Japanese  
K = Korean  
M = Samoan  
N = Asian Indian  
P = Hawaiian Native  
R = Guamanian  
T = Laotian  
V = Vietnamese  
X = Multiple (only valid in subfield B)  
4 = Other Asian or Pacific Islander  
8 = Other  
9 = Unknown / Not Reported

**Comments:**

Populated using the DMH Client and Services Information (CSI) System "Race5" variable (if available) after a match is found between the CCN entered into the DCR and the CCN submitted to the CSI System.

## Partnership Assessment Form (PAF) Variables

**Variable Name:** Current

**Question:**

RESIDENTIAL INFORMATION: General Living Arrangement (TONIGHT)

**Details:**

**Age Group:** Child, TAY, Adult, Older Adult

**Type:** Text

**Format:** XX

**Width:** 2

**Form Type:** PAF, KET

**CSV File Type:** PAF\_RES, KET

**Valid Codes:**

- 1 = With Parents
- 2 = With Other Family
- 3 = Apartment Alone
- 4 = Foster Home Relative
- 5 = Foster Home Non-relative
- 6 = Emergency Shelter
- 7 = Homeless
- 8 = Medical Hospital
- 9 = Psychiatric Hospital
- 10 = State Psychiatric
- 11 = Group Home 0-11
- 12 = Group Home 12-14
- 13 = Community Treatment
- 14 = Residential Treatment
- 15 = Juvenile Hall / Camp
- 16 = DJJ
- 17 = Other Setting
- 18 = Unknown Setting
- 19 = Single Room Occupancy
- 20 = Individual Placement
- 21 = Congregate Placement
- 22 = Community Care
- 23 = Nursing Physical
- 24 = Nursing Psychiatric
- 25 = Long-Term Care
- 26 = Prison
- 27 = Jail
- 28 = Assisted Living

## Partnership Assessment Form (PAF) Variables

**Variable Name:** Current

**Question:**

RESIDENTIAL INFORMATION: General Living Arrangement (TONIGHT)

**Comments:**

## Partnership Assessment Form (PAF) Variables

**Variable Name:** Current\_CompetitiveAvgHrWage

**Question:**

EMPLOYMENT: Competitive Employment - Paid Employment in the community in a position that is also open to individuals without a disability

**Details:**

**Age Group:** Child, TAY, Adult, Older Adult

**Type:** Number

**Format:** XXXXXX

**Width:** 6

**Form Type:** PAF, KET

**CSV File Type:** PAF\_NON-RES, KET

**Valid Codes:** 0-999999, Leave blank if no answer

**Comments:**

Average hourly wage the partner CURRENTLY earns in this employment setting

## Partnership Assessment Form (PAF) Variables

**Variable Name:** Current\_CompetitiveAvgHrWeek

**Question:**

EMPLOYMENT: Competitive Employment - Paid Employment in the community in a position that is also open to individuals without a disability

**Details:**

**Age Group:** Child, TAY, Adult, Older Adult

**Type:** Number

**Format:** XX

**Width:** 2

**Form Type:** PAF, KET

**CSV File Type:** PAF\_NON-RES, KET

**Valid Codes:** 0-99

**Comments:**

Average hours per week the partner CURRENTLY spends in this employment setting



## Partnership Assessment Form (PAF) Variables

**Variable Name:** Current\_In-HouseAvgHrWage

**Question:**

EMPLOYMENT: Paid In-House Work (Sheltered Workshop / Work Experience / Agency-owned Business) - Paid jobs open only to program participants with a disability. A sheltered workshop usually offers sub-minimum wage work in a simulated environment. A Work Experience (adjustment) program within an agency provides exposure to the standard expectations and advantages of employment. An agency-owned business serves customers outside the agency and provides realistic work experiences and can be located at the program site or in the community.

**Details:**

**Age Group:** Child, TAY, Adult, Older Adult  
**Type:** Number  
**Format:** XXXXXX  
**Width:** 6  
**Form Type:** PAF, KET  
**CSV File Type:** PAF\_NON-RES, KET  
**Valid Codes:** 0-999999, Leave blank if no answer

**Comments:**

Average hourly wage the partner CURRENTLY earns in this employment setting

## Partnership Assessment Form (PAF) Variables

**Variable Name:** Current\_In-HouseAvgHrWeek

**Question:**

EMPLOYMENT: Paid In-House Work (Sheltered Workshop / Work Experience / Agency-owned Business) - Paid jobs open only to program participants with a disability. A sheltered workshop usually offers sub-minimum wage work in a simulated environment. A Work Experience (adjustment) program within an agency provides exposure to the standard expectations and advantages of employment. An agency-owned business serves customers outside the agency and provides realistic work experiences and can be located at the program site or in the community.

**Details:**

**Age Group:** Child, TAY, Adult, Older Adult

**Type:** Number

**Format:** XX

**Width:** 2

**Form Type:** PAF, KET

**CSV File Type:** PAF\_NON-RES, KET

**Valid Codes:** 0-99

**Comments:**

Average hours per week the partner CURRENTLY spends in this employment setting

## Partnership Assessment Form (PAF) Variables

**Variable Name:** Current\_Non-paidAvgHrWeek

**Question:**

EMPLOYMENT: Non-paid (Volunteer) Work Experience - Non-paid (volunteer) jobs in an agency or volunteer work in the community that provides exposure to the standard expectations of employment.

**Details:**

**Age Group:** Child, TAY, Adult, Older Adult

**Type:** Number

**Format:** XX

**Width:** 2

**Form Type:** PAF, KET

**CSV File Type:** PAF\_NON-RES, KET

**Valid Codes:** 0-99

**Comments:**

Average hours per week the partner CURRENTLY spends in this employment setting

## Partnership Assessment Form (PAF) Variables

**Variable Name:** Current\_OtherEmploymentAvgHrWage

**Question:**

EMPLOYMENT: Other Gainful / Employment Activity - Any informal employment activity that increases the partner's income (e.g., recycling, gardening, babysitting) OR participation in formal structured classes and / or workshops providing instruction on issues pertinent to getting a job. (Does NOT include such activities as panhandling or illegal activities such as prostitution.)

**Details:**

**Age Group:** Child, TAY, Adult, Older Adult  
**Type:** Number  
**Format:** XXXXXX  
**Width:** 6  
**Form Type:** PAF, KET  
**CSV File Type:** PAF\_NON-RES, KET  
**Valid Codes:** 0-999999, Leave blank if no answer

**Comments:**

Average hourly wage the partner CURRENTLY earns in this employment setting

## Partnership Assessment Form (PAF) Variables

**Variable Name:** Current\_OtherEmploymentAvgHrWeek

**Question:**

EMPLOYMENT: Other Gainful / Employment Activity - Any informal employment activity that increases the partner's income (e.g., recycling, gardening, babysitting) OR participation in formal structured classes and / or workshops providing instruction on issues pertinent to getting a job. (Does NOT include such activities as panhandling or illegal activities such as prostitution.)

**Details:**

**Age Group:** Child, TAY, Adult, Older Adult

**Type:** Number

**Format:** XX

**Width:** 2

**Form Type:** PAF, KET

**CSV File Type:** PAF\_NON-RES, KET

**Valid Codes:** 0-99

**Comments:**

Average hours per week the partner CURRENTLY spends in this employment setting

## Partnership Assessment Form (PAF) Variables

**Variable Name:** Current\_SupportedAvgHrWage

**Question:**

EMPLOYMENT: Supported Employment - Competitive Employment (see above) with ongoing on-site or off-site job-related support services provided

**Details:**

**Age Group:** Child, TAY, Adult, Older Adult

**Type:** Number

**Format:** XXXXXX

**Width:** 6

**Form Type:** PAF, KET

**CSV File Type:** PAF\_NON-RES, KET

**Valid Codes:** 0-999999, Leave blank if no answer

**Comments:**

Average hourly wage the partner CURRENTLY earns in this employment setting

## Partnership Assessment Form (PAF) Variables

**Variable Name:** Current\_SupportedAvgHrWeek

**Question:**

EMPLOYMENT: Supported Employment - Competitive Employment (see above) with ongoing on-site or off-site job-related support services provided

**Details:**

**Age Group:** Child, TAY, Adult, Older Adult

**Type:** Number

**Format:** XX

**Width:** 2

**Form Type:** PAF, KET

**CSV File Type:** PAF\_NON-RES, KET

**Valid Codes:** 0-99

**Comments:**

Average hours per week the partner CURRENTLY spends in this employment setting

## Partnership Assessment Form (PAF) Variables

**Variable Name:** Current\_TransitionalAvgHrWage

**Question:**

EMPLOYMENT: Transitional Employment / Enclave - Paid jobs in the community that are 1)open only to individuals with the disability AND 2) are either time-limited for the purpose of moving to a more permanent job OR are part of a group of disabled individuals who are working as a team in the midst of teens of non-disabled individuals who are performing the same work

**Details:**

**Age Group:** Child, TAY, Adult, Older Adult  
**Type:** Number  
**Format:** XXXXXX  
**Width:** 6  
**Form Type:** PAF, KET  
**CSV File Type:** PAF\_NON-RES, KET  
**Valid Codes:** 0-999999, Leave blank if no answer

**Comments:**

Average hourly wage the partner CURRENTLY earns in this employment setting



## Partnership Assessment Form (PAF) Variables

**Variable Name:** Current\_TransitionalAvgHrWeek

**Question:**

EMPLOYMENT: Transitional Employment / Enclave - Paid jobs in the community that are 1)open only to individuals with the disability AND 2) are either time-limited for the purpose of moving to a more permanent job OR are part of a group of disabled individuals who are working as a team in the midst of teens of non-disabled individuals who are performing the same work

**Details:**

**Age Group:** Child, TAY, Adult, Older Adult

**Type:** Number

**Format:** XX

**Width:** 2

**Form Type:** PAF, KET

**CSV File Type:** PAF\_NON-RES, KET

**Valid Codes:** 0-99

**Comments:**

Average hours per week the partner CURRENTLY spends in this employment setting

## Partnership Assessment Form (PAF) Variables

**Variable Name:** Current\_Unemployed

**Question:**

EMPLOYMENT: The partner is not employed at this time.

**Details:**

**Age Group:** Child, TAY, Adult, Older Adult

**Type:** Text

**Format:** X

**Width:** 1

**Form Type:** PAF, KET

**CSV File Type:** PAF\_NON-RES, KET

**Valid Codes:** 1 = Yes (marked)

**Comments:**

Indicates whether the partner is CURRENTLY unemployed

## Partnership Assessment Form (PAF) Variables

**Variable Name:** DateOfBirth

**Question:**

PARTNERSHIP INFORMATION: Partner's Date of Birth

**Details:**

**Age Group:** Child, TAY, Adult, Older Adult

**Type:** Text

**Format:** mm/dd/yyyy

**Width:** 10

**Form Type:** PAF, KET, 3M

**CSV File Type:** PAF\_RES, PAF\_NON-RES, KET, 3M

**Valid Codes:** leading zeros

**Comments:**

## Partnership Assessment Form (PAF) Variables

**Variable Name:** DatePartnershipStatusChange

**Question:**

Internal DCR administrative field. Indicates the date that Partnership Status changed.

**Details:**

**Age Group:** Child, TAY, Adult, Older Adult

**Type:** Text

**Format:** mm/dd/yyyy

**Width:** 10

**Form Type:** PAF, KET, 3M

**CSV File Type:** PAF\_RES, PAF\_NON-RES, KET, 3M

**Valid Codes:** leading zeros

**Comments:**

## Partnership Assessment Form (PAF) Variables

**Variable Name:** Dependent

**Question:**

LEGAL ISSUES / DESIGNATIONS: Custody Information - Indicates the number of children the partner has who are CURRENTLY placed on W&I Code 300 status (dependent of the court).

**Details:**

**Age Group:** Child, TAY, Adult, Older Adult

**Type:** Number

**Format:** XX

**Width:** 2

**Form Type:** PAF, 3M

**CSV File Type:** PAF\_NON-RES, 3M

**Valid Codes:** 0-99

**Comments:**

## Partnership Assessment Form (PAF) Variables

**Variable Name:** DepenPast12

**Question:**

LEGAL ISSUES / DESIGNATIONS: Dependent (W&I Code 300 Status) Information - Was the partner a dependent of the court DURING THE PAST 12 MONTHS?

**Details:**

**Age Group:** Child, TAY  
**Type:** Text  
**Format:** X  
**Width:** 1  
**Form Type:** PAF  
**CSV File Type:** PAF\_NON-RES  
**Valid Codes:** 0 = No  
1 = Yes

**Comments:**

## Partnership Assessment Form (PAF) Variables

**Variable Name:** DepenPrior12

**Question:**

LEGAL ISSUES / DESIGNATIONS: Dependent (W&I Code 300 Status) Information - Was the partner a dependent of the court anytime PRIOR TO THE PAST 12 MONTHS?

**Details:**

**Age Group:** Child, TAY  
**Type:** Text  
**Format:** X  
**Width:** 1  
**Form Type:** PAF  
**CSV File Type:** PAF\_NON-RES  
**Valid Codes:** 0 = No  
1 = Yes

**Comments:**

## Partnership Assessment Form (PAF) Variables

**Variable Name:** DepenYear

**Question:**

LEGAL ISSUES / DESIGNATIONS: Dependent (W&I Code 300 Status) Information -  
Indicate the year the partner was first placed on W&I Code 300 status (if the partner was ever a dependent of the court)

**Details:**

**Age Group:** Child, TAY  
**Type:** Number  
**Format:** XXXX  
**Width:** 4  
**Form Type:** PAF  
**CSV File Type:** PAF\_NON-RES  
**Valid Codes:**

**Comments:**



## Partnership Assessment Form (PAF) Variables

**Variable Name:** DJJ\_PastTwelveDays

**Question:**

RESIDENTIAL INFORMATION: Justice Placement - Division of Juvenile Justice

**Details:**

**Age Group:** Child, TAY

**Type:** Number

**Format:** XXX

**Width:** 3

**Form Type:** PAF

**CSV File Type:** PAF\_RES

**Valid Codes:** 0-365

**Comments:**

Indicates the number of DAYS the partner has been living in this setting during the past 12 months

## Partnership Assessment Form (PAF) Variables

**Variable Name:** DJJ\_PastTwelveOccurrences

**Question:**

RESIDENTIAL INFORMATION: Justice Placement - Division of Juvenile Justice

**Details:**

**Age Group:** Child, TAY

**Type:** Number

**Format:** XXX

**Width:** 3

**Form Type:** PAF

**CSV File Type:** PAF\_RES

**Valid Codes:** 0-999

**Comments:**

Indicates the number of OCCURRENCES the partner has been living in this setting during the past 12 months

## Partnership Assessment Form (PAF) Variables

**Variable Name:** DJJ\_PriorTwelve

**Question:**

RESIDENTIAL INFORMATION: Justice Placement - Division of Juvenile Justice

**Details:**

**Age Group:** Child, TAY

**Type:** Text

**Format:** X

**Width:** 1

**Form Type:** PAF

**CSV File Type:** PAF\_RES

**Valid Codes:** 1 = Yes (marked)

**Comments:**

Indicates whether the partner has lived in this setting anytime PRIOR TO THE LAST 12 MONTHS

## Partnership Assessment Form (PAF) Variables

**Variable Name:** Dressing

**Question:**

INDEX OF INDEPENDENT ACTIVITIES OF DAILY LIVING (ADL): Dressing - gets clothes from closets and drawers, including underclothes, outer garments and uses fasteners (including braces, if worn)

**Details:**

**Age Group:** Older Adult

**Type:** Text

**Format:** X

**Width:** 1

**Form Type:** PAF, 3M

**CSV File Type:** PAF\_NON-RES, 3M

**Valid Codes:** 1 = Gets clothes and gets completely dressed without assistance  
2 = Gets clothes and gets dressed without assistance, except for assistance in tying shoes  
3 = Receives assistance in getting clothes or in getting dressed, or stays partly or completely undressed

**Comments:**

For this area of functioning, select the description that applies.

## Partnership Assessment Form (PAF) Variables

**Variable Name:** EdRecoveryGoals

**Question:**

EDUCATION: Does one of the partner's recovery goals include any kind of education at this time?

**Details:**

**Age Group:** TAY, Adult, Older Adult

**Type:** Text

**Format:** X

**Width:** 1

**Form Type:** PAF, KET

**CSV File Type:** PAF\_NON-RES, KET

**Valid Codes:** 0 = No  
1 = Yes

**Comments:**

## Partnership Assessment Form (PAF) Variables

**Variable Name:** EmergencyShelter\_PastTwelveDays

**Question:**

RESIDENTIAL INFORMATION: Shelter / Homeless - Emergency shelter / temporary housing (includes people living with friends but paying no rent)

**Details:**

**Age Group:** Child, TAY, Adult, Older Adult

**Type:** Number

**Format:** XXX

**Width:** 3

**Form Type:** PAF

**CSV File Type:** PAF\_RES

**Valid Codes:** 0-365

**Comments:**

Indicates the number of DAYS the partner has been living in this setting during the past 12 months

## Partnership Assessment Form (PAF) Variables

**Variable Name:** EmergencyShelter\_PastTwelveOccurrences

**Question:**

RESIDENTIAL INFORMATION: Shelter / Homeless - Emergency shelter / temporary housing (includes people living with friends but paying no rent)

**Details:**

**Age Group:** Child, TAY, Adult, Older Adult

**Type:** Number

**Format:** XXX

**Width:** 3

**Form Type:** PAF

**CSV File Type:** PAF\_RES

**Valid Codes:** 0-999

**Comments:**

Indicates the number of OCCURRENCES the partner has been living in this setting during the past 12 months

## Partnership Assessment Form (PAF) Variables

**Variable Name:** EmergencyShelter\_PriorTwelve

**Question:**

RESIDENTIAL INFORMATION: Shelter / Homeless - Emergency shelter / temporary housing (includes people living with friends but paying no rent)

**Details:**

**Age Group:** Child, TAY, Adult, Older Adult

**Type:** Text

**Format:** X

**Width:** 1

**Form Type:** PAF

**CSV File Type:** PAF\_RES

**Valid Codes:** 1 = Yes (marked)

**Comments:**

Indicates whether the partner has lived in this setting anytime PRIOR TO THE LAST 12 MONTHS



## Partnership Assessment Form (PAF) Variables

**Variable Name:** EmotionalDisturbance

**Question:**

EDUCATION: Is the partner CURRENTLY receiving special education due to serious emotional disturbance?

**Details:**

**Age Group:** Child, TAY

**Type:** Text

**Format:** X

**Width:** 1

**Form Type:** PAF, 3M

**CSV File Type:** PAF\_NON-RES, 3M

**Valid Codes:** 0 = No  
1 = Yes

**Comments:**

## Partnership Assessment Form (PAF) Variables

**Variable Name:** EmpRecoveryGoals

**Question:**

EMPLOYMENT: Does one of the partner's recovery goals include any kind of employment at this time?

**Details:**

**Age Group:** Child, TAY, Adult, Older Adult

**Type:** Text

**Format:** X

**Width:** 1

**Form Type:** PAF, KET

**CSV File Type:** PAF\_NON-RES, KET

**Valid Codes:** 0 = No  
1 = Yes

**Comments:**

## Partnership Assessment Form (PAF) Variables

**Variable Name:** Ethnicity\_A

**Question:**

When available, this variable is populated using the DMH Client and Services Information System (CSI) when a valid CCN is provided to the DCR

**Details:**

**Age Group:** Child, TAY, Adult, Older Adult

**Type:** Text

**Format:** X

**Width:** 1

**Form Type:** PAF, KET, 3M

**CSV File Type:** PAF\_RES, PAF\_NON-RES, KET, 3M

**Valid Codes:** 1 = White  
2 = Hispanic  
3 = Black  
5 = American Native  
7 = Filipino  
A = Amerasian  
C = Chinese  
H = Cambodian  
J = Japanese  
K = Korean  
M = Samoan  
N = Asian Indian  
P = Hawaiian Native  
R = Guamanian  
T = Laotian  
V = Vietnamese  
X = Multiple (only valid in subfield B)  
4 = Other Asian or Pacific Islander  
8 = Other  
9 = Unknown / Not Reported

**Comments:**

Populated using the DMH Client and Services Information (CSI) System "Ethnicity\_A" variable (if available) after a match is found between the CCN entered into the DCR and the CCN submitted to the CSI System.

## Partnership Assessment Form (PAF) Variables

**Variable Name:** Ethnicity\_B

**Question:**

When available, this variable is populated using the DMH Client and Services Information System (CSI) when a valid CCN is provided to the DCR

**Details:**

**Age Group:** Child, TAY, Adult, Older Adult

**Type:** Text

**Format:** X

**Width:** 1

**Form Type:** PAF, KET, 3M

**CSV File Type:** PAF\_RES, PAF\_NON-RES, KET, 3M

**Valid Codes:** 1 = White  
2 = Hispanic  
3 = Black  
5 = American Native  
7 = Filipino  
A = Amerasian  
C = Chinese  
H = Cambodian  
J = Japanese  
K = Korean  
M = Samoan  
N = Asian Indian  
P = Hawaiian Native  
R = Guamanian  
T = Laotian  
V = Vietnamese  
X = Multiple (only valid in subfield B)  
4 = Other Asian or Pacific Islander  
8 = Other  
9 = Unknown / Not Reported

**Comments:**

Populated using the DMH Client and Services Information (CSI) System "Ethnicity\_B" variable (if available) after a match is found between the CCN entered into the DCR and the CCN submitted to the CSI System.

## Partnership Assessment Form (PAF) Variables

**Variable Name:** ExpulsionPast12

**Question:**

EDUCATION: DURING THE PAST 12 MONTHS, how many times has s/he been expelled?

**Details:**

**Age Group:** Child, TAY

**Type:** Number

**Format:** XX

**Width:** 2

**Form Type:** PAF

**CSV File Type:** PAF\_NON-RES

**Valid Codes:** 0-99

**Comments:**

## Partnership Assessment Form (PAF) Variables

**Variable Name:** Feeding

**Question:**

INDEX OF INDEPENDENT ACTIVITIES OF DAILY LIVING (ADL): Feeding

**Details:**

**Age Group:** Older Adult

**Type:** Text

**Format:** X

**Width:** 1

**Form Type:** PAF, 3M

**CSV File Type:** PAF\_NON-RES, 3M

**Valid Codes:** 1 = Feeds self without assistance  
2 = Feeds self except for getting assistance in cutting meat or buttering bread  
3 = Receives assistance in feeding or is fed partly or completely by using tubes or I.V. fluids

**Comments:**

For this area of functioning, select the description that applies.

## Partnership Assessment Form (PAF) Variables

**Variable Name:** FoodStamps\_Curr

**Question:**

SOURCES OF FINANCIAL SUPPORT: Food Stamps

**Details:**

**Age Group:** Child, TAY, Adult, Older Adult

**Type:** Text

**Format:** X

**Width:** 1

**Form Type:** PAF, 3M

**CSV File Type:** PAF\_NON-RES, 3M

**Valid Codes:** 1 = Yes (marked)

**Comments:**

Indicates if the partner CURRENTLY receives this type of financial support

## Partnership Assessment Form (PAF) Variables

**Variable Name:** FoodStamps\_Past12

**Question:**

SOURCES OF FINANCIAL SUPPORT: Food Stamps

**Details:**

**Age Group:** Child, TAY, Adult, Older Adult

**Type:** Text

**Format:** X

**Width:** 1

**Form Type:** PAF

**CSV File Type:** PAF\_NON-RES

**Valid Codes:** 1 = Yes (marked)

**Comments:**

Indicates if the partner received this type of financial support DURING THE PAST 12 MONTHS



## Partnership Assessment Form (PAF) Variables

**Variable Name:** Foster

**Question:**

LEGAL ISSUES / DESIGNATIONS: Custody Information - Indicates the number of children the partner has who are CURRENTLY placed in foster care.

**Details:**

**Age Group:** Child, TAY, Adult, Older Adult

**Type:** Number

**Format:** XX

**Width:** 2

**Form Type:** PAF, 3M

**CSV File Type:** PAF\_NON-RES, 3M

**Valid Codes:** 0-99

**Comments:**

## Partnership Assessment Form (PAF) Variables

**Variable Name:** FosterHomeNon-relative\_PastTwelveDays

**Question:**

RESIDENTIAL INFORMATION: General Living Arrangement - Foster home (with non-relative)

**Details:**

**Age Group:** Child, TAY

**Type:** Number

**Format:** XXX

**Width:** 3

**Form Type:** PAF

**CSV File Type:** PAF\_RES

**Valid Codes:** 0-365

**Comments:**

Indicates the number of DAYS the partner has been living in this setting during the past 12 months

## Partnership Assessment Form (PAF) Variables

**Variable Name:** FosterHomeNon-relative\_PastTwelveOccurences

**Question:**

RESIDENTIAL INFORMATION: General Living Arrangement - Foster home (with non-relative)

**Details:**

**Age Group:** Child, TAY

**Type:** Number

**Format:** XXX

**Width:** 3

**Form Type:** PAF

**CSV File Type:** PAF\_RES

**Valid Codes:** 0-999

**Comments:**

Indicates the number of OCCURRENCES the partner has been living in this setting during the past 12 months

## Partnership Assessment Form (PAF) Variables

**Variable Name:** FosterHomeNon-relative\_PriorTwelve

**Question:**

RESIDENTIAL INFORMATION: General Living Arrangement - Foster home (with non-relative)

**Details:**

**Age Group:** Child, TAY  
**Type:** Text  
**Format:** X  
**Width:** 1  
**Form Type:** PAF  
**CSV File Type:** PAF\_RES  
**Valid Codes:** 1 = Yes (marked)

**Comments:**

Indicates whether the partner has lived in this setting anytime PRIOR TO THE LAST 12 MONTHS

## Partnership Assessment Form (PAF) Variables

**Variable Name:** FosterHomeRelative\_PastTwelveDays

**Question:**

RESIDENTIAL INFORMATION: General Living Arrangement - Foster home (with relative)

**Details:**

**Age Group:** Child, TAY

**Type:** Number

**Format:** XXX

**Width:** 3

**Form Type:** PAF

**CSV File Type:** PAF\_RES

**Valid Codes:** 0-365

**Comments:**

Indicates the number of DAYS the partner has been living in this setting during the past 12 months

## Partnership Assessment Form (PAF) Variables

**Variable Name:** FosterHomeRelative\_PastTwelveOccurences

**Question:**

RESIDENTIAL INFORMATION: General Living Arrangement - Foster home (with relative)

**Details:**

**Age Group:** Child, TAY

**Type:** Number

**Format:** XXX

**Width:** 3

**Form Type:** PAF

**CSV File Type:** PAF\_RES

**Valid Codes:** 0-999

**Comments:**

Indicates the number of OCCURRENCES the partner has been living in this setting during the past 12 months

## Partnership Assessment Form (PAF) Variables

**Variable Name:** FosterHomeRelative\_PriorTwelve

**Question:**

RESIDENTIAL INFORMATION: General Living Arrangement - Foster home (with relative)

**Details:**

**Age Group:** Child, TAY

**Type:** Text

**Format:** X

**Width:** 1

**Form Type:** PAF

**CSV File Type:** PAF\_RES

**Valid Codes:** 1 = Yes (marked)

**Comments:**

Indicates whether the partner has lived in this setting anytime PRIOR TO THE LAST 12 MONTHS

## Partnership Assessment Form (PAF) Variables

**Variable Name:** Gender

**Question:**

When available, this variable is populated using the DMH Client and Services Information System (CSI) when a valid CCN is provided to the DCR

**Details:**

**Age Group:** Child, TAY, Adult, Older Adult

**Type:** Text

**Format:** X

**Width:** 1

**Form Type:** PAF, KET, 3M

**CSV File Type:** PAF\_RES, PAF\_NON-RES, KET, 3M

**Valid Codes:** M = Male  
F = Female  
O = Other  
U = Unknown

**Comments:**

Populated using the DMH Client and Services Information (CSI) System "gender" variable (if available) after a match is found between the CCN entered into the DCR and the CCN submitted to the CSI System.



## Partnership Assessment Form (PAF) Variables

**Variable Name:** General\_Curr

**Question:**

SOURCES OF FINANCIAL SUPPORT: General Relief / General Assistance

**Details:**

**Age Group:** Child, TAY, Adult, Older Adult

**Type:** Text

**Format:** X

**Width:** 1

**Form Type:** PAF, 3M

**CSV File Type:** PAF\_NON-RES, 3M

**Valid Codes:** 1 = Yes (marked)

**Comments:**

Indicates if the partner CURRENTLY receives this type of financial support

## Partnership Assessment Form (PAF) Variables

**Variable Name:** General\_Past12

**Question:**

SOURCES OF FINANCIAL SUPPORT: General Relief / General Assistance

**Details:**

**Age Group:** Child, TAY, Adult, Older Adult

**Type:** Text

**Format:** X

**Width:** 1

**Form Type:** PAF

**CSV File Type:** PAF\_NON-RES

**Valid Codes:** 1 = Yes (marked)

**Comments:**

Indicates if the partner received this type of financial support DURING THE PAST 12 MONTHS

## Partnership Assessment Form (PAF) Variables

**Variable Name:** GHI

**Question:**

ADMINISTRATIVE INFORMATION: Program Information - In which additional program is the partner currently involved? Governor's Homeless Initiative (GHI)

**Details:**

**Age Group:** TAY, Adult, Older Adult

**Type:** Text

**Format:** X

**Width:** 1

**Form Type:** PAF

**CSV File Type:** PAF\_RES, PAF\_NON-RES, KET

**Valid Codes:** 1 = Yes (marked)

**Comments:**

Indicates whether the partner is currently involved in the Governor's Homeless Initiative (GHI) Program

## Partnership Assessment Form (PAF) Variables

**Variable Name:** GlobalID

**Question:**

Internal DCR Client Identifier (for linking assessments)

**Details:**

**Age Group:** Child, TAY, Adult, Older Adult

**Type:** Text

**Format:** XX

**Width:** 36

**Form Type:** PAF, KET, 3M

**CSV File Type:** PAF\_RES, PAF\_NON-RES, KET, 3M

**Valid Codes:**

**Comments:**

DCR Client Identifier for linking assessments across different forms (can be useful when the CSI Number is missing).

## Partnership Assessment Form (PAF) Variables

**Variable Name:** GradesCurr

**Question:**

EDUCATION: CURRENTLY, his/her grades are:

**Details:**

**Age Group:** Child, TAY

**Type:** Text

**Format:** X

**Width:** 1

**Form Type:** PAF, 3M

**CSV File Type:** PAF\_NON-RES, 3M

**Valid Codes:** 1 = Very Good  
2 = Good  
3 = Average  
4 = Below Average  
5 = Poor

**Comments:**

## Partnership Assessment Form (PAF) Variables

**Variable Name:** GradesPast12

**Question:**

EDUCATION: DURING THE PAST 12 MONTHS, his/her grades were:

**Details:**

**Age Group:** Child, TAY

**Type:** Text

**Format:** X

**Width:** 1

**Form Type:** PAF

**CSV File Type:** PAF\_NON-RES

**Valid Codes:** 1 = Very Good  
2 = Good  
3 = Average  
4 = Below Average  
5 = Poor

**Comments:**

## Partnership Assessment Form (PAF) Variables

**Variable Name:** GraduateCurr

**Question:**

EDUCATION: Graduate School

**Details:**

**Age Group:** TAY, Adult, Older Adult

**Type:** Text

**Format:** X

**Width:** 1

**Form Type:** PAF, KET

**CSV File Type:** PAF\_NON-RES, KET

**Valid Codes:** 1 = Yes (marked)

**Comments:**

Indicates whether the partner is CURRENTLY in this educational setting.

## Partnership Assessment Form (PAF) Variables

**Variable Name:** GraduatePast12

**Question:**

EDUCATION: Graduate School

**Details:**

**Age Group:** TAY, Adult, Older Adult

**Type:** Text

**Format:** XX

**Width:** 1

**Form Type:** PAF

**CSV File Type:** PAF\_NON-RES

**Valid Codes:** 0-52

**Comments:**

Number of weeks the partner was in this educational setting DURING THE PAST 12 MONTHS



## Partnership Assessment Form (PAF) Variables

**Variable Name:** Groceries

**Question:**

INSTRUMENTAL ACTIVITIES OF DAILY LIVING (IADL): Can the partner go shopping for groceries?

**Details:**

**Age Group:** Older Adult

**Type:** Text

**Format:** X

**Width:** 1

**Form Type:** PAF, 3M

**CSV File Type:** PAF\_NON-RES, 3M

**Valid Codes:** 1 = Without Help  
2 = With Some Help  
3 = Completely Unable to Do

**Comments:**

For this area of functioning, select the description that applies.

## Partnership Assessment Form (PAF) Variables

**Variable Name:** GroupHome0-11\_PastTwelveDays

**Question:**

RESIDENTIAL INFORMATION: Residential Program - Group Home (Level 0-11)

**Details:**

**Age Group:** Child, TAY

**Type:** Number

**Format:** XXX

**Width:** 3

**Form Type:** PAF

**CSV File Type:** PAF\_RES

**Valid Codes:** 0-365

**Comments:**

Indicates the number of DAYS the partner has been living in this setting during the past 12 months

## Partnership Assessment Form (PAF) Variables

**Variable Name:** GroupHome0-11\_PastTwelveOccurences

**Question:**

RESIDENTIAL INFORMATION: Residential Program - Group Home (Level 0-11)

**Details:**

**Age Group:** Child, TAY

**Type:** Number

**Format:** XXX

**Width:** 3

**Form Type:** PAF

**CSV File Type:** PAF\_RES

**Valid Codes:** 0-999

**Comments:**

Indicates the number of OCCURRENCES the partner has been living in this setting during the past 12 months

## Partnership Assessment Form (PAF) Variables

**Variable Name:** GroupHome0-11\_PriorTwelve

**Question:**

RESIDENTIAL INFORMATION: Residential Program - Group Home (Level 0-11)

**Details:**

**Age Group:** Child, TAY

**Type:** Text

**Format:** X

**Width:** 1

**Form Type:** PAF

**CSV File Type:** PAF\_RES

**Valid Codes:** 1 = Yes (marked)

**Comments:**

Indicates whether the partner has lived in this setting anytime PRIOR TO THE LAST 12 MONTHS

## Partnership Assessment Form (PAF) Variables

**Variable Name:** GroupHome12-14\_PastTwelveDays

**Question:**

RESIDENTIAL INFORMATION: Residential Program - Group Home (Level 12-14)

**Details:**

**Age Group:** Child, TAY

**Type:** Number

**Format:** XXX

**Width:** 3

**Form Type:** PAF

**CSV File Type:** PAF\_RES

**Valid Codes:** 0-365

**Comments:**

Indicates the number of DAYS the partner has been living in this setting during the past 12 months

## Partnership Assessment Form (PAF) Variables

**Variable Name:** GroupHome12-14\_PastTwelveOccurences

**Question:**

RESIDENTIAL INFORMATION: Residential Program - Group Home (Level 12-14)

**Details:**

**Age Group:** Child, TAY

**Type:** Number

**Format:** XXX

**Width:** 3

**Form Type:** PAF

**CSV File Type:** PAF\_RES

**Valid Codes:** 0-999

**Comments:**

Indicates the number of OCCURRENCES the partner has been living in this setting during the past 12 months

## Partnership Assessment Form (PAF) Variables

**Variable Name:** GroupHome12-14\_PriorTwelve

**Question:**

RESIDENTIAL INFORMATION: Residential Program - Group Home (Level 12-14)

**Details:**

**Age Group:** Child, TAY

**Type:** Text

**Format:** X

**Width:** 1

**Form Type:** PAF

**CSV File Type:** PAF\_RES

**Valid Codes:** 1 = Yes (marked)

**Comments:**

Indicates whether the partner has lived in this setting anytime PRIOR TO THE LAST 12 MONTHS

## Partnership Assessment Form (PAF) Variables

**Variable Name:** Handyman

**Question:**

INSTRUMENTAL ACTIVITIES OF DAILY LIVING (IADL): Can the partner do his/her own handyman work?

**Details:**

**Age Group:** Older Adult

**Type:** Text

**Format:** X

**Width:** 1

**Form Type:** PAF, 3M

**CSV File Type:** PAF\_NON-RES, 3M

**Valid Codes:** 1 = Without Help  
2 = With Some Help  
3 = Completely Unable to Do

**Comments:**

For this area of functioning, select the description that applies.



## Partnership Assessment Form (PAF) Variables

**Variable Name:** HighestGrade

**Question:**

EDUCATION: Highest level of education completed:

**Details:**

**Age Group:** Child, TAY, Adult, Older Adult

**Type:** Text

**Format:** XX

**Width:** 2

**Form Type:** PAF, KET

**CSV File Type:** PAF\_NON-RES, KET

**Valid Codes:** 01 = Day Care  
02 = Preschool  
03 = Kindergarten  
04 = 1st grade  
05 = 2nd grade  
06 = 3rd grade  
07 = 4th grade  
08 = 5th grade  
09 = 6th grade  
10 = 7th grade  
11 = 8th grade  
12 = 9th grade  
13 = 10th grade  
14 = 11th grade  
15 = 12th grade  
16 = GED coursework  
17 = Diploma  
18 = Some college / Some technical or Vocational Training  
19 = Associate's Degree (e.g., A.A., A.S.) / Technical or Vocational Degree  
  
20 = No High School Diploma / No GED  
22 = Bachelor's Degree (e.g., B.A., B.S.)  
24 = Master's Degree (e.g., M.A., M.S.)  
26 = Doctoral Degree (e.g., M.D., Ph.D.)  
27 = Level Unknown

**Comments:**

## Partnership Assessment Form (PAF) Variables

**Variable Name:** HighSchoolCurr

**Question:**

EDUCATION: High School / Adult Education

**Details:**

**Age Group:** TAY, Adult, Older Adult

**Type:** Text

**Format:** X

**Width:** 1

**Form Type:** PAF, KET

**CSV File Type:** PAF\_NON-RES, KET

**Valid Codes:** 1 = Yes (marked)

**Comments:**

Indicates whether the partner is CURRENTLY in this educational setting.

## Partnership Assessment Form (PAF) Variables

**Variable Name:** HighSchoolPast12

**Question:**

EDUCATION: High School / Adult Education

**Details:**

**Age Group:** TAY, Adult, Older Adult

**Type:** Number

**Format:** XX

**Width:** 2

**Form Type:** PAF

**CSV File Type:** PAF\_NON-RES

**Valid Codes:** 0-52

**Comments:**

Number of weeks the partner was in this educational setting DURING THE PAST 12 MONTHS

## Partnership Assessment Form (PAF) Variables

**Variable Name:** Homeless\_PastTwelveDays

**Question:**

RESIDENTIAL INFORMATION: Shelter / Homeless - Homeless (includes people living in their cars)

**Details:**

**Age Group:** Child, TAY, Adult, Older Adult

**Type:** Number

**Format:** XXX

**Width:** 3

**Form Type:** PAF

**CSV File Type:** PAF\_RES

**Valid Codes:** 0-365

**Comments:**

Indicates the number of DAYS the partner has been living in this setting during the past 12 months

## Partnership Assessment Form (PAF) Variables

**Variable Name:** Homeless\_PastTwelveOccurences

**Question:**

RESIDENTIAL INFORMATION: Shelter / Homeless - Homeless (includes people living in their cars)

**Details:**

**Age Group:** Child, TAY, Adult, Older Adult

**Type:** Number

**Format:** XXX

**Width:** 3

**Form Type:** PAF

**CSV File Type:** PAF\_RES

**Valid Codes:** 0-999

**Comments:**

Indicates the number of OCCURRENCES the partner has been living in this setting during the past 12 months

## Partnership Assessment Form (PAF) Variables

**Variable Name:** Homeless\_PriorTwelve

**Question:**

RESIDENTIAL INFORMATION: Shelter / Homeless - Homeless (includes people living in their cars)

**Details:**

**Age Group:** Child, TAY, Adult, Older Adult

**Type:** Text

**Format:** X

**Width:** 1

**Form Type:** PAF

**CSV File Type:** PAF\_RES

**Valid Codes:** 1 = Yes (marked)

**Comments:**

Indicates whether the partner has lived in this setting anytime PRIOR TO THE LAST 12 MONTHS

## Partnership Assessment Form (PAF) Variables

**Variable Name:** HouseConfinement

**Question:**

INDEX OF INDEPENDENT ACTIVITIES OF DAILY LIVING (ADL): House-Confinement

**Details:**

**Age Group:** Older Adult

**Type:** Text

**Format:** X

**Width:** 1

**Form Type:** PAF, 3M

**CSV File Type:** PAF\_NON-RES, 3M

**Valid Codes:** 1 = Has been outside of residence on 3 or more days during the past 2 weeks  
2 = Has been outside of residence on only 1 or 2 days during the past 2 weeks  
3 = Has not been outside of residence in past 2 weeks

**Comments:**

For this area of functioning, select the description that applies.

## Partnership Assessment Form (PAF) Variables

**Variable Name:** Housework

**Question:**

INSTRUMENTAL ACTIVITIES OF DAILY LIVING (IADL): Can the partner do his/her own housework?

**Details:**

**Age Group:** Older Adult

**Type:** Text

**Format:** X

**Width:** 1

**Form Type:** PAF, 3M

**CSV File Type:** PAF\_NON-RES, 3M

**Valid Codes:** 1 = Without Help  
2 = With Some Help  
3 = Completely Unable to Do

**Comments:**

For this area of functioning, select the description that applies.



## Partnership Assessment Form (PAF) Variables

**Variable Name:** Housing\_Curr

**Question:**

SOURCES OF FINANCIAL SUPPORT: Housing Subsidy

**Details:**

**Age Group:** Child, TAY, Adult, Older Adult

**Type:** Text

**Format:** X

**Width:** 1

**Form Type:** PAF, 3M

**CSV File Type:** PAF\_NON-RES, 3M

**Valid Codes:** 1 = Yes (marked)

**Comments:**

Indicates if the partner CURRENTLY receives this type of financial support

## Partnership Assessment Form (PAF) Variables

**Variable Name:** Housing\_Past12

**Question:**

SOURCES OF FINANCIAL SUPPORT: Housing Subsidy

**Details:**

**Age Group:** Child, TAY, Adult, Older Adult

**Type:** Text

**Format:** X

**Width:** 1

**Form Type:** PAF

**CSV File Type:** PAF\_NON-RES

**Valid Codes:** 1 = Yes (marked)

**Comments:**

Indicates if the partner received this type of financial support DURING THE PAST 12 MONTHS

## Partnership Assessment Form (PAF) Variables

**Variable Name:** IndividualPlacement\_PastTwelveDays

**Question:**

RESIDENTIAL INFORMATION: Supervised Placement - Unlicensed but supervised individual placement (includes paid caretakers, personal care attendants)

**Details:**

**Age Group:** TAY, Adult, Older Adult

**Type:** Number

**Format:** XXX

**Width:** 3

**Form Type:** PAF

**CSV File Type:** PAF\_RES

**Valid Codes:** 0-365

**Comments:**

Indicates the number of DAYS the partner has been living in this setting during the past 12 months

## Partnership Assessment Form (PAF) Variables

**Variable Name:** IndividualPlacement\_PastTwelveOccurrences

**Question:**

RESIDENTIAL INFORMATION: Supervised Placement - Unlicensed but supervised individual placement (includes paid caretakers, personal care attendants)

**Details:**

**Age Group:** TAY, Adult, Older Adult

**Type:** Number

**Format:** XXX

**Width:** 3

**Form Type:** PAF

**CSV File Type:** PAF\_RES

**Valid Codes:** 0-999

**Comments:**

Indicates the number of OCCURRENCES the partner has been living in this setting during the past 12 months

## Partnership Assessment Form (PAF) Variables

**Variable Name:** IndividualPlacement\_PriorTwelve

**Question:**

RESIDENTIAL INFORMATION: Supervised Placement - Unlicensed but supervised individual placement (includes paid caretakers, personal care attendants)

**Details:**

**Age Group:** TAY, Adult, Older Adult

**Type:** Text

**Format:** X

**Width:** 1

**Form Type:** PAF

**CSV File Type:** PAF\_RES

**Valid Codes:** 1 = Yes (marked)

**Comments:**

Indicates whether the partner has lived in this setting anytime PRIOR TO THE LAST 12 MONTHS

## Partnership Assessment Form (PAF) Variables

**Variable Name:** Jail\_PastTwelveDays

**Question:**

RESIDENTIAL INFORMATION: Justice Placement - Jail

**Details:**

**Age Group:** TAY, Adult, Older Adult

**Type:** Number

**Format:** XXX

**Width:** 3

**Form Type:** PAF

**CSV File Type:** PAF\_RES

**Valid Codes:** 0-365

**Comments:**

Indicates the number of DAYS the partner has been living in this setting during the past 12 months

## Partnership Assessment Form (PAF) Variables

**Variable Name:** Jail\_PastTwelveOccurences

**Question:**

RESIDENTIAL INFORMATION: Justice Placement - Jail

**Details:**

**Age Group:** TAY, Adult, Older Adult

**Type:** Number

**Format:** XXX

**Width:** 3

**Form Type:** PAF

**CSV File Type:** PAF\_RES

**Valid Codes:** 0-999

**Comments:**

Indicates the number of OCCURRENCES the partner has been living in this setting during the past 12 months

## Partnership Assessment Form (PAF) Variables

**Variable Name:** Jail\_PriorTwelve

**Question:**

RESIDENTIAL INFORMATION: Justice Placement - Jail

**Details:**

**Age Group:** TAY, Adult, Older Adult

**Type:** Text

**Format:** X

**Width:** 1

**Form Type:** PAF

**CSV File Type:** PAF\_RES

**Valid Codes:** 1 = Yes (marked)

**Comments:**

Indicates whether the partner has lived in this setting anytime PRIOR TO THE LAST 12 MONTHS



## Partnership Assessment Form (PAF) Variables

**Variable Name:** JuvenileHall/Camp\_PastTwelveDays

**Question:**

RESIDENTIAL INFORMATION: Justice Placement - Juvenile Hall / Camp / Ranch

**Details:**

**Age Group:** Child, TAY

**Type:** Number

**Format:** XXX

**Width:** 3

**Form Type:** PAF

**CSV File Type:** PAF\_RES

**Valid Codes:** 0-365

**Comments:**

Indicates the number of DAYS the partner has been living in this setting during the past 12 months

## Partnership Assessment Form (PAF) Variables

**Variable Name:** JuvenileHall/Camp\_PastTwelveOccurences

**Question:**

RESIDENTIAL INFORMATION: Justice Placement - Juvenile Hall / Camp / Ranch

**Details:**

**Age Group:** Child, TAY

**Type:** Number

**Format:** XXX

**Width:** 3

**Form Type:** PAF

**CSV File Type:** PAF\_RES

**Valid Codes:** 0-999

**Comments:**

Indicates the number of OCCURRENCES the partner has been living in this setting during the past 12 months

## Partnership Assessment Form (PAF) Variables

**Variable Name:** JuvenileHall/Camp\_PriorTwelve

**Question:**

RESIDENTIAL INFORMATION: Justice Placement - Juvenile Hall / Camp / Ranch

**Details:**

**Age Group:** Child, TAY

**Type:** Text

**Format:** X

**Width:** 1

**Form Type:** PAF

**CSV File Type:** PAF\_RES

**Valid Codes:** 1 = Yes (marked)

**Comments:**

Indicates whether the partner has lived in this setting anytime PRIOR TO THE LAST 12 MONTHS

## Partnership Assessment Form (PAF) Variables

**Variable Name:** KETCntyUse1

**Question:**

COUNTY USE QUESTIONS: KET County Use Field # 1

**Details:**

**Age Group:** Child, TAY, Adult, Older Adult

**Type:** Text

**Format:** XXXXXXXXXXXXXXXXX

**Width:** 15

**Form Type:** PAF, KET

**CSV File Type:** PAF\_NON-RES, KET

**Valid Codes:**

**Comments:**

## Partnership Assessment Form (PAF) Variables

**Variable Name:** KETCntyUse2

**Question:**

COUNTY USE QUESTIONS: KET County Use Field # 2

**Details:**

**Age Group:** Child, TAY, Adult, Older Adult

**Type:** Text

**Format:** XXXXXXXXXXXXXXXXX

**Width:** 15

**Form Type:** PAF, KET

**CSV File Type:** PAF\_NON-RES, KET

**Valid Codes:**

**Comments:**

## Partnership Assessment Form (PAF) Variables

**Variable Name:** KETCntyUse3

**Question:**

COUNTY USE QUESTIONS: KET County Use Field # 3

**Details:**

**Age Group:** Child, TAY, Adult, Older Adult

**Type:** Text

**Format:** XXXXXXXXXXXXXXXXX

**Width:** 15

**Form Type:** PAF, KET

**CSV File Type:** PAF\_NON-RES, KET

**Valid Codes:**

**Comments:**

## Partnership Assessment Form (PAF) Variables

**Variable Name:** Laundry

**Question:**

INSTRUMENTAL ACTIVITIES OF DAILY LIVING (IADL): Can the partner do his/her own laundry?

**Details:**

**Age Group:** Older Adult

**Type:** Text

**Format:** X

**Width:** 1

**Form Type:** PAF, 3M

**CSV File Type:** PAF\_NON-RES, 3M

**Valid Codes:** 1 = Without Help  
2 = With Some Help  
3 = Completely Unable to Do

**Comments:**

For this area of functioning, select the description that applies.

## Partnership Assessment Form (PAF) Variables

**Variable Name:** Loan\_Curr

**Question:**

SOURCES OF FINANCIAL SUPPORT: Loans / Credit

**Details:**

**Age Group:** Child, TAY, Adult, Older Adult

**Type:** Text

**Format:** X

**Width:** 1

**Form Type:** PAF, 3M

**CSV File Type:** PAF\_NON-RES, 3M

**Valid Codes:** 1 = Yes (marked)

**Comments:**

Indicates if the partner CURRENTLY receives this type of financial support



## Partnership Assessment Form (PAF) Variables

**Variable Name:** Loan\_Past12

**Question:**

SOURCES OF FINANCIAL SUPPORT: Loans / Credit

**Details:**

**Age Group:** Child, TAY, Adult, Older Adult

**Type:** Text

**Format:** X

**Width:** 1

**Form Type:** PAF

**CSV File Type:** PAF\_NON-RES

**Valid Codes:** 1 = Yes (marked)

**Comments:**

Indicates if the partner received this type of financial support DURING THE PAST 12 MONTHS

## Partnership Assessment Form (PAF) Variables

**Variable Name:** Long-TermCare\_PastTwelveDays

**Question:**

RESIDENTIAL PROGRAM: Long-term institutional care [Institution for Mental Disease (IMD), Mental Health Rehabilitation Center (MHRC)]

**Details:**

**Age Group:** TAY, Adult, Older Adult

**Type:** Number

**Format:** XXX

**Width:** 3

**Form Type:** PAF

**CSV File Type:** PAF\_RES

**Valid Codes:** 0-365

**Comments:**

Indicates the number of DAYS the partner has been living in this setting during the past 12 months

## Partnership Assessment Form (PAF) Variables

**Variable Name:** Long-TermCare\_PastTwelveOccurrences

**Question:**

RESIDENTIAL PROGRAM: Long-term institutional care [Institution for Mental Disease (IMD), Mental Health Rehabilitation Center (MHRC)]

**Details:**

**Age Group:** TAY, Adult, Older Adult

**Type:** Number

**Format:** XXX

**Width:** 3

**Form Type:** PAF

**CSV File Type:** PAF\_RES

**Valid Codes:** 0-999

**Comments:**

Indicates the number of OCCURRENCES the partner has been living in this setting during the past 12 months

## Partnership Assessment Form (PAF) Variables

**Variable Name:** Long-TermCare\_PriorTwelve

**Question:**

RESIDENTIAL PROGRAM: Long-term institutional care [Institution for Mental Disease (IMD), Mental Health Rehabilitation Center (MHRC)]

**Details:**

**Age Group:** TAY, Adult, Older Adult

**Type:** Text

**Format:** X

**Width:** 1

**Form Type:** PAF

**CSV File Type:** PAF\_RES

**Valid Codes:** 1 = Yes (marked)

**Comments:**

Indicates whether the partner has lived in this setting anytime PRIOR TO THE LAST 12 MONTHS

## Partnership Assessment Form (PAF) Variables

**Variable Name:** Meals

**Question:**

INSTRUMENTAL ACTIVITIES OF DAILY LIVING (IADL): Can the partner prepare his/her own meals?

**Details:**

**Age Group:** Older Adult

**Type:** Text

**Format:** X

**Width:** 1

**Form Type:** PAF, 3M

**CSV File Type:** PAF\_NON-RES, 3M

**Valid Codes:** 1 = Without Help  
2 = With Some Help  
3 = Completely Unable to Do

**Comments:**

For this area of functioning, select the description that applies.

## Partnership Assessment Form (PAF) Variables

**Variable Name:** MedicalHospital\_PastTwelveDays

**Question:**

RESIDENTIAL INFORMATION: Hospital - Acute Medical Hospital

**Details:**

**Age Group:** Child, TAY, Adult, Older Adult

**Type:** Number

**Format:** XXX

**Width:** 3

**Form Type:** PAF

**CSV File Type:** PAF\_RES

**Valid Codes:** 0-365

**Comments:**

Indicates the number of DAYS the partner has been living in this setting during the past 12 months

## Partnership Assessment Form (PAF) Variables

**Variable Name:** MedicalHospital\_PastTwelveOccurrences

**Question:**

RESIDENTIAL INFORMATION: Hospital - Acute Medical Hospital

**Details:**

**Age Group:** Child, TAY, Adult, Older Adult

**Type:** Number

**Format:** XXX

**Width:** 3

**Form Type:** PAF

**CSV File Type:** PAF\_RES

**Valid Codes:** 0-999

**Comments:**

Indicates the number of OCCURRENCES the partner has been living in this setting during the past 12 months

## Partnership Assessment Form (PAF) Variables

**Variable Name:** MedicalHospital\_PriorTwelve

**Question:**

RESIDENTIAL INFORMATION: Hospital - Acute Medical Hospital

**Details:**

**Age Group:** Child, TAY, Adult, Older Adult

**Type:** Text

**Format:** X

**Width:** 1

**Form Type:** PAF

**CSV File Type:** PAF\_RES

**Valid Codes:** 1 = Yes (marked)

**Comments:**

Indicates whether the partner has lived in this setting anytime PRIOR TO THE LAST 12 MONTHS



## Partnership Assessment Form (PAF) Variables

**Variable Name:** Medication

**Question:**

INSTRUMENTAL ACTIVITIES OF DAILY LIVING (IADL): If the partner takes medication (or if the partner had to take medication) could she/he take it on his/her own?

**Details:**

**Age Group:** Older Adult

**Type:** Text

**Format:** X

**Width:** 1

**Form Type:** PAF, 3M

**CSV File Type:** PAF\_NON-RES, 3M

**Valid Codes:** 1 = Without Help  
2 = With Some Help  
3 = Completely Unable to Do

**Comments:**

For this area of functioning, select the description that applies.

## Partnership Assessment Form (PAF) Variables

**Variable Name:** MenRelated

**Question:**

EMERGENCY INTERVENTION: Mental Health / Substance Abuse Related

**Details:**

**Age Group:** Child, TAY, Adult, Older Adult

**Type:** Number

**Format:** XX

**Width:** 2

**Form Type:** PAF

**CSV File Type:** PAF\_NON-RES

**Valid Codes:** 0-99

**Comments:**

Indicates the number of Mental Health / Substance Abuse Related emergency interventions the partner had DURING THE PAST 12 MONTHS.

## Partnership Assessment Form (PAF) Variables

**Variable Name:** MentalIllness

**Question:**

SUBSTANCE ABUSE: In the opinion of the partnership service coordinator, has the partner ever had a co-occurring mental illness and substance abuse problem?

**Details:**

**Age Group:** Child, TAY, Adult, Older Adult

**Type:** Text

**Format:** X

**Width:** 1

**Form Type:** PAF

**CSV File Type:** PAF\_NON-RES

**Valid Codes:** 0 = No  
1 = Yes

**Comments:**

## Partnership Assessment Form (PAF) Variables

**Variable Name:** MHSA

**Question:**

ADMINISTRATIVE INFORMATION: Program Information - In which additional program is the partner currently involved? MHSA Housing Program

**Details:**

**Age Group:** TAY, Adult, Older Adult

**Type:** Text

**Format:** X

**Width:** 1

**Form Type:** PAF

**CSV File Type:** PAF\_RES, PAF\_NON-RES, KET

**Valid Codes:** 1 = Yes (marked)

**Comments:**

Indicates whether the partner is currently involved in the MHSA Housing Program.

Check the box if the partner:

Is housed in an MHSA Housing Program project. An MHSA Housing Program project provides permanent supportive housing to persons with serious mental illness who are homeless or at risk of homelessness. To determine if the housing project is supported by MHSA funds, please refer to the list provided by your county, or go to the California Department of Mental Health, MHSA (Prop 63)/Housing/MHSA Housing Program Application Overview for a list of Housing Program projects in your county. If the project is not listed, it is not an MHSA Housing Project.

## Partnership Assessment Form (PAF) Variables

**Variable Name:** Money

**Question:**

INSTRUMENTAL ACTIVITIES OF DAILY LIVING (IADL): Can the partner manage his/her own money?

**Details:**

**Age Group:** Older Adult

**Type:** Text

**Format:** X

**Width:** 1

**Form Type:** PAF, 3M

**CSV File Type:** PAF\_NON-RES, 3M

**Valid Codes:** 1 = Without Help  
2 = With Some Help  
3 = Completely Unable to Do

**Comments:**

For this area of functioning, select the description that applies.

## Partnership Assessment Form (PAF) Variables

**Variable Name:** Name

**Question:**

PARTNERSHIP INFORMATION: Partner's last name, Partner's first name

**Details:**

**Age Group:** Child, TAY, Adult, Older Adult

**Type:** Text

**Format:** LastName, FirstName

**Width:** 25,25

**Form Type:** PAF, KET, 3M

**CSV File Type:** PAF\_RES, PAF\_NON-RES, KET, 3M

**Valid Codes:**

**Comments:**

## Partnership Assessment Form (PAF) Variables

**Variable Name:** NoSupport\_Curr

**Question:**

SOURCES OF FINANCIAL SUPPORT: No financial support

**Details:**

**Age Group:** Child, TAY, Adult, Older Adult

**Type:** Text

**Format:** X

**Width:** 1

**Form Type:** PAF, 3M

**CSV File Type:** PAF\_NON-RES, 3M

**Valid Codes:** 1 = Yes (marked)

**Comments:**

Indicates the partner CURRENTLY receives no financial support

## Partnership Assessment Form (PAF) Variables

**Variable Name:** NoSupport\_Past12

**Question:**

SOURCES OF FINANCIAL SUPPORT: No financial support

**Details:**

**Age Group:** Child, TAY, Adult, Older Adult

**Type:** Text

**Format:** X

**Width:** 1

**Form Type:** PAF

**CSV File Type:** PAF\_NON-RES

**Valid Codes:** 1 = Yes (marked)

**Comments:**

Indicates if the partner received no financial support DURING THE PAST 12 MONTHS



## Partnership Assessment Form (PAF) Variables

**Variable Name:** NotinschoolCurr

**Question:**

EDUCATION: Not in school of any kind

**Details:**

**Age Group:** TAY, Adult, Older Adult

**Type:** Text

**Format:** X

**Width:** 1

**Form Type:** PAF, KET

**CSV File Type:** PAF\_NON-RES, KET

**Valid Codes:** 1 = Yes (marked)

**Comments:**

Indicates whether the partner is CURRENTLY in this educational setting.

## Partnership Assessment Form (PAF) Variables

**Variable Name:** NotinschoolPast12

**Question:**

EDUCATION: Not is school of any kind

**Details:**

**Age Group:** TAY, Adult, Older Adult

**Type:** Number

**Format:** XX

**Width:** 2

**Form Type:** PAF

**CSV File Type:** PAF\_NON-RES

**Valid Codes:** 0-52

**Comments:**

Number of weeks the partner was in this educational setting DURING THE PAST 12 MONTHS

## Partnership Assessment Form (PAF) Variables

**Variable Name:** NursingPhysical\_PastTwelveDays

**Question:**

RESIDENTIAL PROGRAM: Skilled nursing facility (physical)

**Details:**

**Age Group:** TAY, Adult, Older Adult

**Type:** Number

**Format:** XXX

**Width:** 3

**Form Type:** PAF

**CSV File Type:** PAF\_RES

**Valid Codes:** 0-365

**Comments:**

Indicates the number of DAYS the partner has been living in this setting during the past 12 months

## Partnership Assessment Form (PAF) Variables

**Variable Name:** NursingPhysical\_PastTwelveOccurrences

**Question:**

RESIDENTIAL PROGRAM: Skilled nursing facility (physical)

**Details:**

**Age Group:** TAY, Adult, Older Adult

**Type:** Number

**Format:** XXX

**Width:** 3

**Form Type:** PAF

**CSV File Type:** PAF\_RES

**Valid Codes:** 0-999

**Comments:**

Indicates the number of OCCURRENCES the partner has been living in this setting during the past 12 months

## Partnership Assessment Form (PAF) Variables

**Variable Name:** NursingPhysical\_PriorTwelve

**Question:**

RESIDENTIAL PROGRAM: Skilled nursing facility (physical)

**Details:**

**Age Group:** TAY, Adult, Older Adult

**Type:** Text

**Format:** X

**Width:** 1

**Form Type:** PAF

**CSV File Type:** PAF\_RES

**Valid Codes:** 1 = Yes (marked)

**Comments:**

Indicates whether the partner has lived in this setting anytime PRIOR TO THE LAST 12 MONTHS

## Partnership Assessment Form (PAF) Variables

**Variable Name:** NursingPsychiatric\_PastTwelveDays

**Question:**

RESIDENTIAL PROGRAM: Skilled nursing facility (psychiatric)

**Details:**

**Age Group:** TAY, Adult, Older Adult

**Type:** Number

**Format:** XXX

**Width:** 3

**Form Type:** PAF

**CSV File Type:** PAF\_RES

**Valid Codes:** 0-365

**Comments:**

Indicates the number of DAYS the partner has been living in this setting during the past 12 months

## Partnership Assessment Form (PAF) Variables

**Variable Name:** NursingPsychiatric\_PastTwelveOccurrences

**Question:**

RESIDENTIAL PROGRAM: Skilled nursing facility (psychiatric)

**Details:**

**Age Group:** TAY, Adult, Older Adult

**Type:** Number

**Format:** XXX

**Width:** 3

**Form Type:** PAF

**CSV File Type:** PAF\_RES

**Valid Codes:** 0-999

**Comments:**

Indicates the number of OCCURRENCES the partner has been living in this setting during the past 12 months

## Partnership Assessment Form (PAF) Variables

**Variable Name:** NursingPsychiatric\_PriorTwelve

**Question:**

RESIDENTIAL PROGRAM: Skilled nursing facility (psychiatric)

**Details:**

**Age Group:** TAY, Adult, Older Adult

**Type:** Text

**Format:** X

**Width:** 1

**Form Type:** PAF

**CSV File Type:** PAF\_RES

**Valid Codes:** 1 = Yes (marked)

**Comments:**

Indicates whether the partner has lived in this setting anytime PRIOR TO THE LAST 12 MONTHS



## Partnership Assessment Form (PAF) Variables

**Variable Name:** OtherEducationCurr

**Question:**

EDUCATION: Other Education

**Details:**

**Age Group:** TAY, Adult, Older Adult

**Type:** Text

**Format:** X

**Width:** 1

**Form Type:** PAF, KET

**CSV File Type:** PAF\_NON-RES, KET

**Valid Codes:** 1 = Yes (marked)

**Comments:**

Indicates whether the partner is CURRENTLY in this educational setting.

## Partnership Assessment Form (PAF) Variables

**Variable Name:** OtherEducationPast12

**Question:**

EDUCATION: Other Education

**Details:**

**Age Group:** TAY, Adult, Older Adult

**Type:** Number

**Format:** XX

**Width:** 2

**Form Type:** PAF

**CSV File Type:** PAF\_NON-RES

**Valid Codes:** 0-52

**Comments:**

Number of weeks the partner was in this educational setting DURING THE PAST 12 MONTHS

## Partnership Assessment Form (PAF) Variables

**Variable Name:** OtherFamily\_Curr

**Question:**

SOURCES OF FINANCIAL SUPPORT: Other family member / friends

**Details:**

**Age Group:** Child, TAY, Adult, Older Adult

**Type:** Text

**Format:** X

**Width:** 1

**Form Type:** PAF, 3M

**CSV File Type:** PAF\_NON-RES, 3M

**Valid Codes:** 1 = Yes (marked)

**Comments:**

Indicates if the partner CURRENTLY receives this type of financial support

## Partnership Assessment Form (PAF) Variables

**Variable Name:** OtherFamily\_Past12

**Question:**

SOURCES OF FINANCIAL SUPPORT: Other family member / friends

**Details:**

**Age Group:** Child, TAY, Adult, Older Adult

**Type:** Text

**Format:** X

**Width:** 1

**Form Type:** PAF

**CSV File Type:** PAF\_NON-RES

**Valid Codes:** 1 = Yes (marked)

**Comments:**

Indicates if the partner received this type of financial support DURING THE PAST 12 MONTHS

## Partnership Assessment Form (PAF) Variables

**Variable Name:** OtherSetting\_PastTwelveDays

**Question:**

RESIDENTIAL PROGRAM: Other - Other

**Details:**

**Age Group:** Child, TAY, Adult, Older Adult

**Type:** Number

**Format:** XXX

**Width:** 3

**Form Type:** PAF

**CSV File Type:** PAF\_RES

**Valid Codes:** 0-365

**Comments:**

Indicates the number of DAYS the partner has been living in this setting during the past 12 months

## Partnership Assessment Form (PAF) Variables

**Variable Name:** OtherSetting\_PastTwelveOccurences

**Question:**

RESIDENTIAL PROGRAM: Other - Other

**Details:**

**Age Group:** Child, TAY, Adult, Older Adult

**Type:** Number

**Format:** XXX

**Width:** 3

**Form Type:** PAF

**CSV File Type:** PAF\_RES

**Valid Codes:** 0-999

**Comments:**

Indicates the number of OCCURRENCES the partner has been living in this setting during the past 12 months

## Partnership Assessment Form (PAF) Variables

**Variable Name:** OtherSetting\_PriorTwelve

**Question:**

RESIDENTIAL PROGRAM: Other - Other

**Details:**

**Age Group:** Child, TAY, Adult, Older Adult

**Type:** Text

**Format:** X

**Width:** 1

**Form Type:** PAF

**CSV File Type:** PAF\_RES

**Valid Codes:** 1 = Yes (marked)

**Comments:**

Indicates whether the partner has lived in this setting anytime PRIOR TO THE LAST 12 MONTHS

## Partnership Assessment Form (PAF) Variables

**Variable Name:** OtherSupport\_Curr

**Question:**

SOURCES OF FINANCIAL SUPPORT: Other

**Details:**

**Age Group:** Child, TAY, Adult, Older Adult

**Type:** Text

**Format:** X

**Width:** 1

**Form Type:** PAF, 3M

**CSV File Type:** PAF\_NON-RES, 3M

**Valid Codes:** 1 = Yes (marked)

**Comments:**

Indicates if the partner CURRENTLY receives this type of financial support



## Partnership Assessment Form (PAF) Variables

**Variable Name:** OtherSupport\_Past12

**Question:**

SOURCES OF FINANCIAL SUPPORT: Other

**Details:**

**Age Group:** Child, TAY, Adult, Older Adult

**Type:** Text

**Format:** X

**Width:** 1

**Form Type:** PAF

**CSV File Type:** PAF\_NON-RES

**Valid Codes:** 1 = Yes (marked)

**Comments:**

Indicates if the partner received this type of financial support DURING THE PAST 12 MONTHS

## Partnership Assessment Form (PAF) Variables

**Variable Name:** PAFStatus

**Question:**

Internal DCR Administrative field which indicates the level of completion for the PAF form.

**Details:**

**Age Group:** Child, TAY, Adult, Older Adult

**Type:** Number

**Format:** X

**Width:** 1

**Form Type:** PAF

**CSV File Type:** PAF\_RES, PAF\_NON-RES

**Valid Codes:** 0 = Pending  
1 = Complete  
3 = Certified Complete

**Comments:**

## Partnership Assessment Form (PAF) Variables

**Variable Name:** ParolePast12

**Question:**

LEGAL ISSUES / DESIGNATIONS: Parole Information: Was the partner on any kind of parole DURING THE PAST 12 MONTHS?

**Details:**

**Age Group:** Child, TAY, Adult, Older Adult

**Type:** Text

**Format:** X

**Width:** 1

**Form Type:** PAF

**CSV File Type:** PAF\_NON-RES

**Valid Codes:** 0 = No  
1 = Yes

**Comments:**

## Partnership Assessment Form (PAF) Variables

**Variable Name:** ParolePrior12

**Question:**

LEGAL ISSUES / DESIGNATIONS: Parole Information: Was the partner on any kind of parole PRIOR TO THE PAST 12 MONTHS?

**Details:**

**Age Group:** Child, TAY, Adult, Older Adult

**Type:** Text

**Format:** X

**Width:** 1

**Form Type:** PAF

**CSV File Type:** PAF\_NON-RES

**Valid Codes:** 0 = No  
1 = Yes

**Comments:**

## Partnership Assessment Form (PAF) Variables

**Variable Name:** ParoleStatus

**Question:**

LEGAL ISSUES / DESIGNATIONS: Parole Information: Is the partner CURRENTLY on parole from the Division of Juvenile Justice?

**Details:**

**Age Group:** Child, TAY

**Type:** Text

**Format:** X

**Width:** 1

**Form Type:** PAF

**CSV File Type:** PAF\_NON-RES, KET

**Valid Codes:** 0 = No  
1 = Yes

**Comments:**

## Partnership Assessment Form (PAF) Variables

**Variable Name:** PartnershipDate

**Question:**

PARTNERSHIP INFORMATION: Partnership Date (date when the Partnership was established)

**Details:**

**Age Group:** Child, TAY, Adult, Older Adult

**Type:** Text

**Format:** mm/dd/yyyy

**Width:** 10

**Form Type:** PAF, KET, 3M

**CSV File Type:** PAF\_RES, PAF\_NON-RES, KET, 3M

**Valid Codes:** leading zeros

**Comments:**

## Partnership Assessment Form (PAF) Variables

**Variable Name:** PartnerShipStatus

**Question:**

Internal DCR administrative field. Indicates the current Partnership Status

**Details:**

**Age Group:** Child, TAY, Adult, Older Adult

**Type:** Number

**Format:** X

**Width:** 1

**Form Type:** PAF, KET, 3M

**CSV File Type:** PAF\_RES, PAF\_NON-RES, KET, 3M

**Valid Codes:** 0 = Inactive  
1 = Active  
3 = PFR (Partners who are reactivated after 1 year)

**Comments:**

0 = Inactive Partner - Services interrupted / discontinued, 1 = Active Partner, 3 = PAF Renewal (PFR) Identifies an older, historical, PAF for a partner who was discontinued or had an interruption in their partnership and was reestablished after a year or longer.

## Partnership Assessment Form (PAF) Variables

**Variable Name:** Past12\_Competitive

**Question:**

EMPLOYMENT: Competitive Employment: Paid Employment in the community in a position that is also open to individuals without a disability

**Details:**

**Age Group:** Child, TAY, Adult, Older Adult

**Type:** Number

**Format:** XX

**Width:** 2

**Form Type:** PAF

**CSV File Type:** PAF\_NON-RES

**Valid Codes:** 0-52

**Comments:**

Number of weeks the partner was in this employment setting DURING THE PAST 12 MONTHS



## Partnership Assessment Form (PAF) Variables

**Variable Name:** Past12\_CompetitiveAvgHrWage

**Question:**

EMPLOYMENT: Competitive Employment: Paid Employment in the community in a position that is also open to individuals without a disability

**Details:**

**Age Group:** Child, TAY, Adult, Older Adult

**Type:** Number

**Format:** XXXXXX

**Width:** 6

**Form Type:** PAF

**CSV File Type:** PAF\_NON-RES

**Valid Codes:** 0-999999, Leave blank if no answer

**Comments:**

Average hourly wage the partner earned in this employment setting DURING THE PAST 12 MONTHS

## Partnership Assessment Form (PAF) Variables

**Variable Name:** Past12\_CompetitiveAvgHrWeek

**Question:**

EMPLOYMENT: Competitive Employment: Paid Employment in the community in a position that is also open to individuals without a disability

**Details:**

**Age Group:** Child, TAY, Adult, Older Adult

**Type:** Number

**Format:** XX

**Width:** 2

**Form Type:** PAF

**CSV File Type:** PAF\_NON-RES

**Valid Codes:** 0-99

**Comments:**

Average hours per week the partner spent in this employment setting DURING THE PAST 12 MONTHS

## Partnership Assessment Form (PAF) Variables

**Variable Name:** Past12\_In-House

**Question:**

EMPLOYMENT: Paid In-House Work (Sheltered Workshop / Work Experience / Agency-owned Business): Paid jobs open only to program participants with a disability. A sheltered workshop usually offers sub-minimum wage work in a simulated environment. A Work Experience (adjustment) program within an agency provides exposure to the standard expectations and advantages of employment. An agency-owned business serves customers outside the agency and provides realistic work experiences and can be located at the program site or in the community.

**Details:**

**Age Group:** Child, TAY, Adult, Older Adult  
**Type:** Number  
**Format:** XX  
**Width:** 2  
**Form Type:** PAF  
**CSV File Type:** PAF\_NON-RES  
**Valid Codes:** 0-52

**Comments:**

Number of weeks the partner was in this employment setting DURING THE PAST 12 MONTHS

## Partnership Assessment Form (PAF) Variables

**Variable Name:** Past12\_In-HouseAvgHrWage

**Question:**

EMPLOYMENT: Paid In-House Work (Sheltered Workshop / Work Experience / Agency-owned Business): Paid jobs open only to program participants with a disability. A sheltered workshop usually offers sub-minimum wage work in a simulated environment. A Work Experience (adjustment) program within an agency provides exposure to the standard expectations and advantages of employment. An agency-owned business serves customers outside the agency and provides realistic work experiences and can be located at the program site or in the community.

**Details:**

**Age Group:** Child, TAY, Adult, Older Adult  
**Type:** Number  
**Format:** XXXXXX  
**Width:** 6  
**Form Type:** PAF  
**CSV File Type:** PAF\_NON-RES  
**Valid Codes:** 0-999999, Leave blank if no answer

**Comments:**

Average hourly wage the partner earned in this employment setting DURING THE PAST 12 MONTHS

## Partnership Assessment Form (PAF) Variables

**Variable Name:** Past12\_In-HouseAvgHrWeek

**Question:**

EMPLOYMENT: Paid In-House Work (Sheltered Workshop / Work Experience / Agency-owned Business): Paid jobs open only to program participants with a disability. A sheltered workshop usually offers sub-minimum wage work in a simulated environment. A Work Experience (adjustment) program within an agency provides exposure to the standard expectations and advantages of employment. An agency-owned business serves customers outside the agency and provides realistic work experiences and can be located at the program site or in the community.

**Details:**

**Age Group:** Child, TAY, Adult, Older Adult

**Type:** Number

**Format:** XX

**Width:** 2

**Form Type:** PAF

**CSV File Type:** PAF\_NON-RES

**Valid Codes:** 0-99

**Comments:**

Average hours per week the partner spent in this employment setting DURING THE PAST 12 MONTHS

## Partnership Assessment Form (PAF) Variables

**Variable Name:** Past12\_Non-paid

**Question:**

EMPLOYMENT: Non-paid (Volunteer) Work Experience: Non-paid (volunteer) jobs in an agency or volunteer work in the community that provides exposure to the standard expectations of employment.

**Details:**

**Age Group:** Child, TAY, Adult, Older Adult

**Type:** Number

**Format:** XX

**Width:** 2

**Form Type:** PAF

**CSV File Type:** PAF\_NON-RES

**Valid Codes:** 0-52

**Comments:**

Number of weeks the partner was in this employment setting DURING THE PAST 12 MONTHS

## Partnership Assessment Form (PAF) Variables

**Variable Name:** Past12\_Non-paidAvgHrWeek

**Question:**

EMPLOYMENT: Non-paid (Volunteer) Work Experience: Non-paid (volunteer) jobs in an agency or volunteer work in the community that provides exposure to the standard expectations of employment.

**Details:**

**Age Group:** Child, TAY, Adult, Older Adult

**Type:** Number

**Format:** XX

**Width:** 2

**Form Type:** PAF

**CSV File Type:** PAF\_NON-RES

**Valid Codes:** 0-99

**Comments:**

Average hours per week the partner spent in this employment setting DURING THE PAST 12 MONTHS

## Partnership Assessment Form (PAF) Variables

**Variable Name:** Past12\_OtherEmployment

**Question:**

EMPLOYMENT: Other Gainful / Employment Activity: Any informal employment activity that increases the partner's income (e.g., recycling, gardening, babysitting) OR participation in formal structured classes and / or workshops providing instruction on issues pertinent to getting a job. (Does NOT include such activities as panhandling or illegal activities such as prostitution.)

**Details:**

**Age Group:** Child, TAY, Adult, Older Adult

**Type:** Number

**Format:** XX

**Width:** 2

**Form Type:** PAF

**CSV File Type:** PAF\_NON-RES

**Valid Codes:** 0-52

**Comments:**

Number of weeks the partner was in this employment setting DURING THE PAST 12 MONTHS



## Partnership Assessment Form (PAF) Variables

**Variable Name:** Past12\_OtherEmploymentAvgHrWage

**Question:**

EMPLOYMENT: Other Gainful / Employment Activity: Any informal employment activity that increases the partner's income (e.g., recycling, gardening, babysitting) OR participation in formal structured classes and / or workshops providing instruction on issues pertinent to getting a job. (Does NOT include such activities as panhandling or illegal activities such as prostitution.)

**Details:**

**Age Group:** Child, TAY, Adult, Older Adult  
**Type:** Number  
**Format:** XXXXXX  
**Width:** 6  
**Form Type:** PAF  
**CSV File Type:** PAF\_NON-RES  
**Valid Codes:** 0-999999, Leave blank if no answer

**Comments:**

Average hourly wage the partner earned in this employment setting DURING THE PAST 12 MONTHS

## Partnership Assessment Form (PAF) Variables

**Variable Name:** Past12\_OtherEmploymentAvgHrWeek

**Question:**

EMPLOYMENT: Other Gainful / Employment Activity: Any informal employment activity that increases the partner's income (e.g., recycling, gardening, babysitting) OR participation in formal structured classes and / or workshops providing instruction on issues pertinent to getting a job. (Does NOT include such activities as panhandling or illegal activities such as prostitution.)

**Details:**

**Age Group:** Child, TAY, Adult, Older Adult

**Type:** Number

**Format:** XX

**Width:** 2

**Form Type:** PAF

**CSV File Type:** PAF\_NON-RES

**Valid Codes:** 0-99

**Comments:**

Average hours per week the partner spent in this employment setting DURING THE PAST 12 MONTHS

## Partnership Assessment Form (PAF) Variables

**Variable Name:** Past12\_Supported

**Question:**

EMPLOYMENT: Supported Employment: Competitive Employment (see above) with ongoing on-site or off-site job-related support services provided

**Details:**

**Age Group:** Child, TAY, Adult, Older Adult

**Type:** Number

**Format:** XX

**Width:** 2

**Form Type:** PAF

**CSV File Type:** PAF\_NON-RES

**Valid Codes:** 0-52

**Comments:**

Number of weeks the partner was in this employment setting DURING THE PAST 12 MONTHS

## Partnership Assessment Form (PAF) Variables

**Variable Name:** Past12\_SupportedAvgHrWage

**Question:**

EMPLOYMENT: Supported Employment: Competitive Employment (see above) with ongoing on-site or off-site job-related support services provided

**Details:**

**Age Group:** Child, TAY, Adult, Older Adult

**Type:** Number

**Format:** XXXXXX

**Width:** 6

**Form Type:** PAF

**CSV File Type:** PAF\_NON-RES

**Valid Codes:** 0-999999, Leave blank if no answer

**Comments:**

Average hourly wage the partner earned in this employment setting DURING THE PAST 12 MONTHS

## Partnership Assessment Form (PAF) Variables

**Variable Name:** Past12\_SupportedAvgHrWeek

**Question:**

EMPLOYMENT: Supported Employment: Competitive Employment (see above) with ongoing on-site or off-site job-related support services provided

**Details:**

**Age Group:** Child, TAY, Adult, Older Adult

**Type:** Number

**Format:** XX

**Width:** 2

**Form Type:** PAF

**CSV File Type:** PAF\_NON-RES

**Valid Codes:** 0-99

**Comments:**

Average hours per week the partner spent in this employment setting DURING THE PAST 12 MONTHS

## Partnership Assessment Form (PAF) Variables

**Variable Name:** Past12\_Transitional

**Question:**

EMPLOYMENT: Transitional Employment / Enclave: Paid jobs in the community that are 1)open only to individuals with the disability AND 2) are either time-limited for the purpose of moving to a more permanent job OR are part of a group of disabled individuals who are working as a team in the midst of teens of non-disabled individuals who are performing the same work

**Details:**

**Age Group:** Child, TAY, Adult, Older Adult

**Type:** Number

**Format:** XX

**Width:** 2

**Form Type:** PAF

**CSV File Type:** PAF\_NON-RES

**Valid Codes:** 0-52

**Comments:**

Number of weeks the partner was in this employment setting DURING THE PAST 12 MONTHS

## Partnership Assessment Form (PAF) Variables

**Variable Name:** Past12\_TransitionalAvgHrWage

**Question:**

EMPLOYMENT: Transitional Employment / Enclave: Paid jobs in the community that are 1)open only to individuals with the disability AND 2) are either time-limited for the purpose of moving to a more permanent job OR are part of a group of disabled individuals who are working as a team in the midst of teens of non-disabled individuals who are performing the same work

**Details:**

**Age Group:** Child, TAY, Adult, Older Adult  
**Type:** Number  
**Format:** XXXXXX  
**Width:** 6  
**Form Type:** PAF  
**CSV File Type:** PAF\_NON-RES  
**Valid Codes:** 0-999999, Leave blank if no answer

**Comments:**

Average hourly wage the partner earned in this employment setting DURING THE PAST 12 MONTHS

## Partnership Assessment Form (PAF) Variables

**Variable Name:** Past12\_TransitionalAvgHrWeek

**Question:**

EMPLOYMENT: Transitional Employment / Enclave: Paid jobs in the community that are 1)open only to individuals with the disability AND 2) are either time-limited for the purpose of moving to a more permanent job OR are part of a group of disabled individuals who are working as a team in the midst of teens of non-disabled individuals who are performing the same work

**Details:**

**Age Group:** Child, TAY, Adult, Older Adult

**Type:** Number

**Format:** XX

**Width:** 2

**Form Type:** PAF

**CSV File Type:** PAF\_NON-RES

**Valid Codes:** 0-99

**Comments:**

Average hours per week the partner spent in this employment setting DURING THE PAST 12 MONTHS



## Partnership Assessment Form (PAF) Variables

**Variable Name:** Past12\_Unemployed

**Question:**

EMPLOYMENT: Unemployed

**Details:**

**Age Group:** Child, TAY, Adult, Older Adult

**Type:** Number

**Format:** XX

**Width:** 2

**Form Type:** PAF

**CSV File Type:** PAF\_NON-RES

**Valid Codes:** 0-52

**Comments:**

Number of weeks the partner was unemployed setting DURING THE PAST 12 MONTHS

## Partnership Assessment Form (PAF) Variables

**Variable Name:** PayeePast12

**Question:**

LEGAL ISSUES / DESIGNATIONS: Payee Information: Did the partner have a payee DURING THE PAST 12 MONTHS?

**Details:**

**Age Group:** Child, TAY, Adult, Older Adult

**Type:** Text

**Format:** X

**Width:** 1

**Form Type:** PAF

**CSV File Type:** PAF\_NON-RES

**Valid Codes:** 0 = No  
1 = Yes

**Comments:**

## Partnership Assessment Form (PAF) Variables

**Variable Name:** PayeePrior12

**Question:**

LEGAL ISSUES / DESIGNATIONS: Payee Information: Did the partner have a payee anytime PRIOR TO THE PAST 12 MONTHS?

**Details:**

**Age Group:** Child, TAY, Adult, Older Adult

**Type:** Text

**Format:** X

**Width:** 1

**Form Type:** PAF

**CSV File Type:** PAF\_NON-RES

**Valid Codes:** 0 = No  
1 = Yes

**Comments:**

## Partnership Assessment Form (PAF) Variables

**Variable Name:** PayeeStatus

**Question:**

LEGAL ISSUES / DESIGNATIONS: Payee Information: Does the partner CURRENTLY have a payee?

**Details:**

**Age Group:** Child, TAY, Adult, Older Adult

**Type:** Text

**Format:** X

**Width:** 1

**Form Type:** PAF

**CSV File Type:** PAF\_NON-RES, KET

**Valid Codes:** 0 = No  
1 = Yes

**Comments:**

## Partnership Assessment Form (PAF) Variables

**Variable Name:** PhyRelated

**Question:**

EMERGENCY INTERVENTION: Physical Health Related

**Details:**

**Age Group:** Child, TAY, Adult, Older Adult

**Type:** Number

**Format:** XX

**Width:** 2

**Form Type:** PAF

**CSV File Type:** PAF\_NON-RES

**Valid Codes:** 0-99

**Comments:**

Indicates the number of Physical Health Related emergency interventions the partner had DURING THE PAST 12 MONTHS.

## Partnership Assessment Form (PAF) Variables

**Variable Name:** PhysicianCurr

**Question:**

HEALTH STATUS: Does the partner have a primary care physician CURRENTLY?

**Details:**

**Age Group:** Child, TAY, Adult, Older Adult

**Type:** Text

**Format:** X

**Width:** 1

**Form Type:** PAF, 3M

**CSV File Type:** PAF\_NON-RES, 3M

**Valid Codes:** 0 = No  
1 = Yes

**Comments:**

## Partnership Assessment Form (PAF) Variables

**Variable Name:** PhysicianPast12

**Question:**

HEALTH STATUS: Did the partner have a primary care physician DURING THE PAST 12 MONTHS?

**Details:**

**Age Group:** Child, TAY, Adult, Older Adult

**Type:** Text

**Format:** X

**Width:** 1

**Form Type:** PAF

**CSV File Type:** PAF\_NON-RES

**Valid Codes:** 0 = No  
1 = Yes

**Comments:**

## Partnership Assessment Form (PAF) Variables

**Variable Name:** Prison\_PastTwelveDays

**Question:**

RESIDENTIAL INFORMATION: Justice Placement - Prison

**Details:**

**Age Group:** TAY, Adult, Older Adult

**Type:** Number

**Format:** XXX

**Width:** 3

**Form Type:** PAF

**CSV File Type:** PAF\_RES

**Valid Codes:** 0-365

**Comments:**

Indicates the number of DAYS the partner has been living in this setting during the past 12 months



## Partnership Assessment Form (PAF) Variables

**Variable Name:** Prison\_PastTwelveOccurences

**Question:**

RESIDENTIAL INFORMATION: Justice Placement - Prison

**Details:**

**Age Group:** TAY, Adult, Older Adult

**Type:** Number

**Format:** XXX

**Width:** 3

**Form Type:** PAF

**CSV File Type:** PAF\_RES

**Valid Codes:** 0-999

**Comments:**

Indicates the number of OCCURRENCES the partner has been living in this setting during the past 12 months

## Partnership Assessment Form (PAF) Variables

**Variable Name:** Prison\_PriorTwelve

**Question:**

RESIDENTIAL INFORMATION: Justice Placement - Prison

**Details:**

**Age Group:** TAY, Adult, Older Adult

**Type:** Text

**Format:** X

**Width:** 1

**Form Type:** PAF

**CSV File Type:** PAF\_RES

**Valid Codes:** 1 = Yes (marked)

**Comments:**

Indicates whether the partner has lived in this setting anytime PRIOR TO THE LAST 12 MONTHS

## Partnership Assessment Form (PAF) Variables

**Variable Name:** ProbationStatus

**Question:**

LEGAL ISSUES / DESIGNATIONS: Probation Information: Is the partner CURRENTLY on probation?

**Details:**

**Age Group:** Child, TAY, Adult, Older Adult

**Type:** Text

**Format:** X

**Width:** 1

**Form Type:** PAF

**CSV File Type:** PAF\_NON-RES, KET

**Valid Codes:** 0 = No  
1 = Yes

**Comments:**

## Partnership Assessment Form (PAF) Variables

**Variable Name:** ProbPast12

**Question:**

LEGAL ISSUES / DESIGNATIONS: Probation Information: Was the partner on probation DURING THE PAST 12 MONTHS?

**Details:**

**Age Group:** Child, TAY, Adult, Older Adult

**Type:** Text

**Format:** X

**Width:** 1

**Form Type:** PAF

**CSV File Type:** PAF\_NON-RES

**Valid Codes:** 0 = No  
1 = Yes

**Comments:**

## Partnership Assessment Form (PAF) Variables

**Variable Name:** ProbPrior12

**Question:**

LEGAL ISSUES / DESIGNATIONS: Probation Information: Was the partner on probation anytime PRIOR TO THE PAST 12 MONTHS?

**Details:**

**Age Group:** Child, TAY, Adult, Older Adult

**Type:** Text

**Format:** X

**Width:** 1

**Form Type:** PAF

**CSV File Type:** PAF\_NON-RES

**Valid Codes:** 0 = No  
1 = Yes

**Comments:**

## Partnership Assessment Form (PAF) Variables

**Variable Name:** ProgramDesc

**Question:**

ADMINISTRATIVE INFORMATION: Partnership Status - Full Service Partnership Program ID (code and program title are provided)

**Details:**

**Age Group:** Child, TAY, Adult, Older Adult

**Type:** Text

**Format:** FSP ProgramID Code, FSP Program Title

**Width:** 255

**Form Type:** PAF, KET

**CSV File Type:** PAF\_RES, PAF\_NON-RES, KET

**Valid Codes:** 0-9, A-Z

**Comments:**

## Partnership Assessment Form (PAF) Variables

**Variable Name:** ProviderSiteID

**Question:**

ADMINISTRATIVE INFORMATION: Partnership Status - Provider Number / NPI (Optional)

**Details:**

**Age Group:** Child, TAY, Adult, Older Adult

**Type:** Text

**Format:** XXXXXXXXXXXX

**Width:** 10

**Form Type:** PAF, KET

**CSV File Type:** PAF\_RES, PAF\_NON-RES, KET

**Valid Codes:** 0-9, A-Z

**Comments:**

## Partnership Assessment Form (PAF) Variables

**Variable Name:** PsychiatricHospital\_PastTwelveDays

**Question:**

RESIDENTIAL INFORMATION: Hospital - Acute Psychiatric Hospital / Psychiatric Health Facility (PHF)

**Details:**

**Age Group:** Child, TAY, Adult, Older Adult

**Type:** Number

**Format:** XXX

**Width:** 3

**Form Type:** PAF

**CSV File Type:** PAF\_RES

**Valid Codes:** 0-365

**Comments:**

Indicates the number of DAYS the partner has been living in this setting during the past 12 months



## Partnership Assessment Form (PAF) Variables

**Variable Name:** PsychiatricHospital\_PastTwelveOccurrences

**Question:**

RESIDENTIAL INFORMATION: Hospital - Acute Psychiatric Hospital / Psychiatric Health Facility (PHF)

**Details:**

**Age Group:** Child, TAY, Adult, Older Adult

**Type:** Number

**Format:** XXX

**Width:** 3

**Form Type:** PAF

**CSV File Type:** PAF\_RES

**Valid Codes:** 0-999

**Comments:**

Indicates the number of OCCURRENCES the partner has been living in this setting during the past 12 month

## Partnership Assessment Form (PAF) Variables

**Variable Name:** PsychiatricHospital\_PriorTwelve

**Question:**

RESIDENTIAL INFORMATION: Hospital - Acute Psychiatric Hospital / Psychiatric Health Facility (PHF)

**Details:**

**Age Group:** Child, TAY, Adult, Older Adult

**Type:** Text

**Format:** X

**Width:** 1

**Form Type:** PAF

**CSV File Type:** PAF\_RES

**Valid Codes:** 1 = Yes (marked)

**Comments:**

Indicates whether the partner has lived in this setting anytime PRIOR TO THE LAST 12 MONTHS

## Partnership Assessment Form (PAF) Variables

**Variable Name:** QtrlyCntyUse1

**Question:**

COUNTY USE QUESTIONS: Quarterly County Use Field # 1

**Details:**

**Age Group:** Child, TAY, Adult, Older Adult

**Type:** Text

**Format:** XXXXXXXXXXXXXXXXX

**Width:** 15

**Form Type:** PAF, 3M

**CSV File Type:** PAF\_NON-RES, 3M

**Valid Codes:**

**Comments:**

## Partnership Assessment Form (PAF) Variables

**Variable Name:** QtrlyCntyUse2

**Question:**

COUNTY USE QUESTIONS: Quarterly County Use Field # 2

**Details:**

**Age Group:** Child, TAY, Adult, Older Adult

**Type:** Text

**Format:** XXXXXXXXXXXXXXXXX

**Width:** 15

**Form Type:** PAF, 3M

**CSV File Type:** PAF\_NON-RES, 3M

**Valid Codes:**

**Comments:**

## Partnership Assessment Form (PAF) Variables

**Variable Name:** QtrlyCntyUse3

**Question:**

COUNTY USE QUESTIONS: Quarterly County Use Field # 3

**Details:**

**Age Group:** Child, TAY, Adult, Older Adult

**Type:** Text

**Format:** XXXXXXXXXXXXXXXXX

**Width:** 15

**Form Type:** PAF, 3M

**CSV File Type:** PAF\_NON-RES, 3M

**Valid Codes:**

**Comments:**

## Partnership Assessment Form (PAF) Variables

**Variable Name:** ReferredBy

**Question:**

PARTNERSHIP INFORMATION: Who referred the partner?

**Details:**

**Age Group:** Child, TAY, Adult, Older Adult

**Type:** Text

**Format:** XX

**Width:** 2

**Form Type:** PAF

**CSV File Type:** PAF\_RES, PAF\_NON-RES

**Valid Codes:**

- 01 = Self
- 02 = Family Member
- 03 = Significant Other
- 04 = Friend / Neighbor
- 05 = School
- 06 = Primary Care / Medical Office
- 07 = Emergency Room
- 08 = Mental Health Facility / Community Agency
- 09 = Social Services Agency
- 10 = Substance Abuse Treatment Facility / Agency
- 11 = Faith-based Organization
- 12 = Other County / Community Agency
- 13 = Homeless Shelter
- 14 = Street Outreach
- 15 = Juvenile Hall / Camp / Ranch / Division of Juvenile Justice
- 16 = Jail / Prison
- 17 = Acute Psychiatric / State Hospital
- 18 = Other referred

**Comments:**

Old variable name = Referred\_By

## Partnership Assessment Form (PAF) Variables

**Variable Name:** ResidentialTreatment\_PastTwelveDays

**Question:**

RESIDENTIAL INFORMATION: Residential Program - Licensed Residential Treatment (includes crisis, short-term, long-term, substance abuse, dual diagnosis residential programs)

**Details:**

**Age Group:** Child, TAY, Adult, Older Adult

**Type:** Number

**Format:** XXX

**Width:** 3

**Form Type:** PAF

**CSV File Type:** PAF\_RES

**Valid Codes:** 0-365

**Comments:**

Indicates the number of DAYS the partner has been living in this setting during the past 12 months

## Partnership Assessment Form (PAF) Variables

**Variable Name:** ResidentialTreatment\_PastTwelveOccurences

**Question:**

RESIDENTIAL INFORMATION: Residential Program - Licensed Residential Treatment (includes crisis, short-term, long-term, substance abuse, dual diagnosis residential programs)

**Details:**

**Age Group:** Child, TAY, Adult, Older Adult

**Type:** Number

**Format:** XXX

**Width:** 3

**Form Type:** PAF

**CSV File Type:** PAF\_RES

**Valid Codes:** 0-999

**Comments:**

Indicates the number of OCCURRENCES the partner has been living in this setting during the past 12 month



## Partnership Assessment Form (PAF) Variables

**Variable Name:** ResidentialTreatment\_PriorTwelve

**Question:**

RESIDENTIAL INFORMATION: Residential Program - Licensed Residential Treatment (includes crisis, short-term, long-term, substance abuse, dual diagnosis residential programs)

**Details:**

**Age Group:** Child, TAY, Adult, Older Adult

**Type:** Text

**Format:** X

**Width:** 1

**Form Type:** PAF

**CSV File Type:** PAF\_RES

**Valid Codes:** 1 = Yes (marked)

**Comments:**

Indicates whether the partner has lived in this setting anytime PRIOR TO THE LAST 12 MONTHS

## Partnership Assessment Form (PAF) Variables

**Variable Name:** Retirement\_Curr

**Question:**

SOURCES OF FINANCIAL SUPPORT: Retirement / Social Security Income

**Details:**

**Age Group:** Child, TAY, Adult, Older Adult

**Type:** Text

**Format:** X

**Width:** 1

**Form Type:** PAF, 3M

**CSV File Type:** PAF\_NON-RES, 3M

**Valid Codes:** 1 = Yes (marked)

**Comments:**

Indicates if the partner CURRENTLY receives this type of financial support

## Partnership Assessment Form (PAF) Variables

**Variable Name:** Retirement\_Past12

**Question:**

SOURCES OF FINANCIAL SUPPORT: Retirement / Social Security Income

**Details:**

**Age Group:** Child, TAY, Adult, Older Adult

**Type:** Text

**Format:** X

**Width:** 1

**Form Type:** PAF

**CSV File Type:** PAF\_NON-RES

**Valid Codes:** 1 = Yes (marked)

**Comments:**

Indicates if the partner received this type of financial support DURING THE PAST 12 MONTHS

## Partnership Assessment Form (PAF) Variables

**Variable Name:** Reunified

**Question:**

LEGAL ISSUES / DESIGNATIONS: Custody Information: Indicates the number of children the partner has who are CURRENTLY legally reunified with the partner.

**Details:**

**Age Group:** Child, TAY, Adult, Older Adult

**Type:** Number

**Format:** XX

**Width:** 2

**Form Type:** PAF, 3M

**CSV File Type:** PAF\_NON-RES, 3M

**Valid Codes:** 0-99

**Comments:**

## Partnership Assessment Form (PAF) Variables

**Variable Name:** Savings\_Curr

**Question:**

SOURCES OF FINANCIAL SUPPORT: Savings

**Details:**

**Age Group:** Child, TAY, Adult, Older Adult

**Type:** Text

**Format:** X

**Width:** 1

**Form Type:** PAF, 3M

**CSV File Type:** PAF\_NON-RES, 3M

**Valid Codes:** 1 = Yes (marked)

**Comments:**

Indicates if the partner CURRENTLY receives this type of financial support

## Partnership Assessment Form (PAF) Variables

**Variable Name:** Savings\_Past12

**Question:**

SOURCES OF FINANCIAL SUPPORT: Savings

**Details:**

**Age Group:** Child, TAY, Adult, Older Adult

**Type:** Text

**Format:** X

**Width:** 1

**Form Type:** PAF

**CSV File Type:** PAF\_NON-RES

**Valid Codes:** 1 = Yes (marked)

**Comments:**

Indicates if the partner received this type of financial support DURING THE PAST 12 MONTHS

## Partnership Assessment Form (PAF) Variables

**Variable Name:** SDI\_Curr

**Question:**

SOURCES OF FINANCIAL SUPPORT: State Disability Insurance (SDI)

**Details:**

**Age Group:** Child, TAY, Adult, Older Adult

**Type:** Text

**Format:** X

**Width:** 1

**Form Type:** PAF, 3M

**CSV File Type:** PAF\_NON-RES, 3M

**Valid Codes:** 1 = Yes (marked)

**Comments:**

Indicates if the partner CURRENTLY receives this type of financial support

## Partnership Assessment Form (PAF) Variables

**Variable Name:** SDI\_Past12

**Question:**

SOURCES OF FINANCIAL SUPPORT: State Disability Insurance (SDI)

**Details:**

**Age Group:** Child, TAY, Adult, Older Adult

**Type:** Text

**Format:** X

**Width:** 1

**Form Type:** PAF

**CSV File Type:** PAF\_NON-RES

**Valid Codes:** 1 = Yes (marked)

**Comments:**

Indicate if the partner received this type of financial support DURING THE PAST 12 MONTHS



## Partnership Assessment Form (PAF) Variables

**Variable Name:** SingleRoomOccupancy\_PastTwelveDays

**Question:**

RESIDENTIAL INFORMATION: General Living Arrangement - single room occupancy  
(must hold lease)

**Details:**

**Age Group:** TAY, Adult, Older Adult

**Type:** Number

**Format:** XXX

**Width:** 3

**Form Type:** PAF

**CSV File Type:** PAF\_RES

**Valid Codes:** 0-365

**Comments:**

Indicates the number of DAYS the partner has been living in this setting during the past 12 months

## Partnership Assessment Form (PAF) Variables

**Variable Name:** SingleRoomOccupancy\_PastTwelveOccurences

**Question:**

RESIDENTIAL INFORMATION: General Living Arrangement - single room occupancy  
(must hold lease)

**Details:**

**Age Group:** TAY, Adult, Older Adult

**Type:** Number

**Format:** XXX

**Width:** 3

**Form Type:** PAF

**CSV File Type:** PAF\_RES

**Valid Codes:** 0-999

**Comments:**

Indicates the number of OCCURRENCES the partner has been living in this setting during the past 12 month

## Partnership Assessment Form (PAF) Variables

**Variable Name:** SingleRoomOccupancy\_PriorTwelve

**Question:**

RESIDENTIAL INFORMATION: General Living Arrangement - single room occupancy  
(must hold lease)

**Details:**

**Age Group:** TAY, Adult, Older Adult

**Type:** Text

**Format:** X

**Width:** 1

**Form Type:** PAF

**CSV File Type:** PAF\_RES

**Valid Codes:** 1 = Yes (marked)

**Comments:**

Indicates whether the partner has lived in this setting anytime PRIOR TO THE LAST 12 MONTHS

## Partnership Assessment Form (PAF) Variables

**Variable Name:** Spouse\_Curr

**Question:**

SOURCES OF FINANCIAL SUPPORT: Partner's Spouse / Significant Other's wages

**Details:**

**Age Group:** Child, TAY, Adult, Older Adult

**Type:** Text

**Format:** X

**Width:** 1

**Form Type:** PAF, 3M

**CSV File Type:** PAF\_NON-RES, 3M

**Valid Codes:** 1 = Yes (marked)

**Comments:**

Indicates if the partner CURRENTLY receives this type of financial support

## Partnership Assessment Form (PAF) Variables

**Variable Name:** Spouse\_Past12

**Question:**

SOURCES OF FINANCIAL SUPPORT: Partner's Spouse / Significant Other's wages

**Details:**

**Age Group:** Child, TAY, Adult, Older Adult

**Type:** Text

**Format:** X

**Width:** 1

**Form Type:** PAF

**CSV File Type:** PAF\_NON-RES

**Valid Codes:** 1 = Yes (marked)

**Comments:**

Indicates if the partner received this type of financial support DURING THE PAST 12 MONTHS

## Partnership Assessment Form (PAF) Variables

**Variable Name:** SSDI\_Curr

**Question:**

SOURCES OF FINANCIAL SUPPORT: Social Security Disability Insurance (SSDI)

**Details:**

**Age Group:** Child, TAY, Adult, Older Adult

**Type:** Text

**Format:** X

**Width:** 1

**Form Type:** PAF, 3M

**CSV File Type:** PAF\_NON-RES, 3M

**Valid Codes:** 1 = Yes (marked)

**Comments:**

Indicates if the partner CURRENTLY receives this type of financial support

## Partnership Assessment Form (PAF) Variables

**Variable Name:** SSDI\_Past12

**Question:**

SOURCES OF FINANCIAL SUPPORT: Social Security Disability Insurance (SSDI)

**Details:**

**Age Group:** Child, TAY, Adult, Older Adult

**Type:** Text

**Format:** X

**Width:** 1

**Form Type:** PAF

**CSV File Type:** PAF\_NON-RES

**Valid Codes:** 1 = Yes (marked)

**Comments:**

Indicates if the partner received this type of financial support DURING THE PAST 12 MONTHS

## Partnership Assessment Form (PAF) Variables

**Variable Name:** SSI\_Curr

**Question:**

SOURCES OF FINANCIAL SUPPORT: Supplemental Security Income / State Supplementary Payment (SSI / SSP) Program

**Details:**

**Age Group:** Child, TAY, Adult, Older Adult

**Type:** Text

**Format:** X

**Width:** 1

**Form Type:** PAF, 3M

**CSV File Type:** PAF\_NON-RES, 3M

**Valid Codes:** 1 = Yes (marked)

**Comments:**

Indicates if the partner CURRENTLY receives this type of financial support



## Partnership Assessment Form (PAF) Variables

**Variable Name:** SSI\_Past12

**Question:**

SOURCES OF FINANCIAL SUPPORT: Supplemental Security Income / State Supplementary Payment (SSI / SSP) Program

**Details:**

**Age Group:** Child, TAY, Adult, Older Adult

**Type:** Text

**Format:** X

**Width:** 1

**Form Type:** PAF

**CSV File Type:** PAF\_NON-RES

**Valid Codes:** 1 = Yes (marked)

**Comments:**

Indicates if the partner received this type of financial support DURING THE PAST 12 MONTHS

## Partnership Assessment Form (PAF) Variables

**Variable Name:** StatePsychiatric\_PastTwelveDays

**Question:**

RESIDENTIAL INFORMATION: Hospital - State Psychiatric Hospital

**Details:**

**Age Group:** Child, TAY, Adult, Older Adult

**Type:** Number

**Format:** XXX

**Width:** 3

**Form Type:** PAF

**CSV File Type:** PAF\_RES

**Valid Codes:** 0-365

**Comments:**

Indicates the number of DAYS the partner has been living in this setting during the past 12 months

## Partnership Assessment Form (PAF) Variables

**Variable Name:** StatePsychiatric\_PastTwelveOccurrences

**Question:**

RESIDENTIAL INFORMATION: Hospital - State Psychiatric Hospital

**Details:**

**Age Group:** Child, TAY, Adult, Older Adult

**Type:** Number

**Format:** XXX

**Width:** 3

**Form Type:** PAF

**CSV File Type:** PAF\_RES

**Valid Codes:** 0-999

**Comments:**

Indicates the number of OCCURRENCES the partner has been living in this setting during the past 12 month

## Partnership Assessment Form (PAF) Variables

**Variable Name:** StatePsychiatric\_PriorTwelve

**Question:**

RESIDENTIAL INFORMATION: Hospital - State Psychiatric Hospital

**Details:**

**Age Group:** Child, TAY, Adult, Older Adult

**Type:** Text

**Format:** X

**Width:** 1

**Form Type:** PAF

**CSV File Type:** PAF\_RES

**Valid Codes:** 1 = Yes (marked)

**Comments:**

Indicates whether the partner has lived in this setting anytime PRIOR TO THE LAST 12 MONTHS

## Partnership Assessment Form (PAF) Variables

**Variable Name:** SuspensionPast12

**Question:**

DURING THE PAST 12 MONTHS, how many times has s/he been suspended?

**Details:**

**Age Group:** Child, TAY

**Type:** Number

**Format:** XX

**Width:** 2

**Form Type:** PAF

**CSV File Type:** PAF\_NON-RES

**Valid Codes:** 0-99

**Comments:**

## Partnership Assessment Form (PAF) Variables

**Variable Name:** TANF\_Curr

**Question:**

SOURCES OF FINANCIAL SUPPORT: Temporary Assistance for needy families (TANF)

**Details:**

**Age Group:** Child, TAY, Adult, Older Adult

**Type:** Text

**Format:** X

**Width:** 1

**Form Type:** PAF, 3M

**CSV File Type:** PAF\_NON-RES, 3M

**Valid Codes:** 1 = Yes (marked)

**Comments:**

Indicates if the partner CURRENTLY receives this type of financial support

## Partnership Assessment Form (PAF) Variables

**Variable Name:** TANF\_Past12

**Question:**

SOURCES OF FINANCIAL SUPPORT: Temporary Assistance for needy families (TANF)

**Details:**

**Age Group:** Child, TAY, Adult, Older Adult

**Type:** Text

**Format:** X

**Width:** 1

**Form Type:** PAF

**CSV File Type:** PAF\_NON-RES

**Valid Codes:** 1 = Yes (marked)

**Comments:**

Indicates if the partner received this type of financial support DURING THE PAST 12 MONTHS

## Partnership Assessment Form (PAF) Variables

**Variable Name:** TechnicalCurr

**Question:**

EDUCATION: Technical / Vocational School

**Details:**

**Age Group:** TAY, Adult, Older Adult

**Type:** Text

**Format:** X

**Width:** 1

**Form Type:** PAF, KET

**CSV File Type:** PAF\_NON-RES, KET

**Valid Codes:** 1 = Yes (marked)

**Comments:**

Indicates whether the partner is CURRENTLY in this educational setting.



## Partnership Assessment Form (PAF) Variables

**Variable Name:** TechnicalPast12

**Question:**

EDUCATION: Technical / Vocational School

**Details:**

**Age Group:** TAY, Adult, Older Adult

**Type:** Number

**Format:** XX

**Width:** 2

**Form Type:** PAF

**CSV File Type:** PAF\_NON-RES

**Valid Codes:** 0-52

**Comments:**

Number of weeks the partner was in this educational setting DURING THE PAST 12 MONTHS

## Partnership Assessment Form (PAF) Variables

**Variable Name:** Telephone

**Question:**

INSTRUMENTAL ACTIVITIES OF DAILY LIVING (IADL): Can the partner use the telephone?

**Details:**

**Age Group:** Older Adult

**Type:** Text

**Format:** X

**Width:** 1

**Form Type:** PAF, 3M

**CSV File Type:** PAF\_NON-RES, 3M

**Valid Codes:** 1 = Without Help  
2 = With Some Help  
3 = Completely Unable to Do

**Comments:**

For this area of functioning, select the description that applies.

## Partnership Assessment Form (PAF) Variables

**Variable Name:** Toileting

**Question:**

INDEX OF INDEPENDENT ACTIVITIES OF DAILY LIVING (ADL): Toileting

**Details:**

**Age Group:** Older Adult

**Type:** Text

**Format:** X

**Width:** 1

**Form Type:** PAF, 3M

**CSV File Type:** PAF\_NON-RES, 3M

**Valid Codes:** 1 = Goes to 'toilet room,' cleans self, and arranges clothes without assistance  
2 = Receives assistance in going to the 'toilet room' or in cleansing self or in arranging clothes after elimination or in use of night bedpan or commode  
3 = Doesn't go to room termed 'toilet' for the elimination process

**Comments:**

For this area of functioning, select the description that applies.

## Partnership Assessment Form (PAF) Variables

**Variable Name:** Transfer

**Question:**

INDEX OF INDEPENDENT ACTIVITIES OF DAILY LIVING (ADL): Transfer

**Details:**

**Age Group:** Older Adult

**Type:** Text

**Format:** X

**Width:** 1

**Form Type:** PAF, 3M

**CSV File Type:** PAF\_NON-RES, 3M

**Valid Codes:** 1 = Moves in and out of bed as well as in and out of chair without assistance  
2 = Moves in and out of bed or chair with assistance  
3 = Doesn't get out of bed

**Comments:**

For this area of functioning, select the description that applies.

## Partnership Assessment Form (PAF) Variables

**Variable Name:** TribalBenefits\_Curr

**Question:**

SOURCES OF FINANCIAL SUPPORT: American Indian Tribal Benefits (e.g., per capita, revenue sharing, trust disbursements)

**Details:**

**Age Group:** Child, TAY, Adult, Older Adult

**Type:** Text

**Format:** X

**Width:** 1

**Form Type:** PAF, 3M

**CSV File Type:** PAF\_NON-RES, 3M

**Valid Codes:** 1 = Yes (marked)

**Comments:**

Indicates if the partner CURRENTLY receives this type of financial support

## Partnership Assessment Form (PAF) Variables

**Variable Name:** TribalBenefits\_Past12

**Question:**

SOURCES OF FINANCIAL SUPPORT: American Indian Tribal Benefits (e.g., per capita, revenue sharing, trust disbursements)

**Details:**

**Age Group:** Child, TAY, Adult, Older Adult

**Type:** Text

**Format:** X

**Width:** 1

**Form Type:** PAF

**CSV File Type:** PAF\_NON-RES

**Valid Codes:** 1 = Yes (marked)

**Comments:**

Indicates if the partner received this type of financial support DURING THE PAST 12 MONTHS

## Partnership Assessment Form (PAF) Variables

**Variable Name:** UnknownSetting\_PastTwelveDays

**Question:**

RESIDENTIAL INFORMATION: Other - Unknown

**Details:**

**Age Group:** Child, TAY, Adult, Older Adult

**Type:** Number

**Format:** XXX

**Width:** 3

**Form Type:** PAF

**CSV File Type:** PAF\_RES

**Valid Codes:** 0-365

**Comments:**

Indicates the number of DAYS the partner has been living in this setting during the past 12 months

## Partnership Assessment Form (PAF) Variables

**Variable Name:** UnknownSetting\_PastTwelveOccurrences

**Question:**

RESIDENTIAL INFORMATION: Other - Unknown

**Details:**

**Age Group:** Child, TAY, Adult, Older Adult

**Type:** Number

**Format:** XXX

**Width:** 3

**Form Type:** PAF

**CSV File Type:** PAF\_RES

**Valid Codes:** 0-999

**Comments:**

Indicates the number of OCCURRENCES the partner has been living in this setting during the past 12 month



## Partnership Assessment Form (PAF) Variables

**Variable Name:** UnknownSetting\_PriorTwelve

**Question:**

RESIDENTIAL INFORMATION: Other - Unknown

**Details:**

**Age Group:** Child, TAY, Adult, Older Adult

**Type:** Text

**Format:** X

**Width:** 1

**Form Type:** PAF

**CSV File Type:** PAF\_RES

**Valid Codes:** 1 = Yes (marked)

**Comments:**

Indicates whether the partner has lived in this setting anytime PRIOR TO THE LAST 12 MONTHS

## Partnership Assessment Form (PAF) Variables

**Variable Name:** Veterans\_Curr

**Question:**

SOURCES OF FINANCIAL SUPPORT: Veterans Assistance Benefits

**Details:**

**Age Group:** Child, TAY, Adult, Older Adult

**Type:** Text

**Format:** X

**Width:** 1

**Form Type:** PAF, 3M

**CSV File Type:** PAF\_NON-RES, 3M

**Valid Codes:** 1 = Yes (marked)

**Comments:**

Indicates if the partner CURRENTLY receives this type of financial support

## Partnership Assessment Form (PAF) Variables

**Variable Name:** Veterans\_Past12

**Question:**

SOURCES OF FINANCIAL SUPPORT: Veterans Assistance Benefits

**Details:**

**Age Group:** Child, TAY, Adult, Older Adult

**Type:** Text

**Format:** X

**Width:** 1

**Form Type:** PAF

**CSV File Type:** PAF\_NON-RES

**Valid Codes:** 1 = Yes (marked)

**Comments:**

Indicates if the partner received this type of financial support DURING THE PAST 12 MONTHS

## Partnership Assessment Form (PAF) Variables

**Variable Name:** Wages\_Curr

**Question:**

SOURCES OF FINANCIAL SUPPORT: Partner's Wages

**Details:**

**Age Group:** Child, TAY, Adult, Older Adult

**Type:** Text

**Format:** X

**Width:** 1

**Form Type:** PAF, 3M

**CSV File Type:** PAF\_NON-RES, 3M

**Valid Codes:** 1 = Yes (marked)

**Comments:**

Indicate if the partner CURRENTLY receives this type of financial support

## Partnership Assessment Form (PAF) Variables

**Variable Name:** Wages\_Past12

**Question:**

SOURCES OF FINANCIAL SUPPORT: Partner's Wages

**Details:**

**Age Group:** Child, TAY, Adult, Older Adult

**Type:** Text

**Format:** X

**Width:** 1

**Form Type:** PAF

**CSV File Type:** PAF\_NON-RES

**Valid Codes:** 1 = Yes (marked)

**Comments:**

Indicates if the partner received this type of financial support DURING THE PAST 12 MONTHS

## Partnership Assessment Form (PAF) Variables

**Variable Name:** Walking

**Question:**

INDEX OF INDEPENDENT ACTIVITIES OF DAILY LIVING (ADL): Walking

**Details:**

**Age Group:** Older Adult

**Type:** Text

**Format:** X

**Width:** 1

**Form Type:** PAF, 3M

**CSV File Type:** PAF\_NON-RES, 3M

**Valid Codes:**

- 1 = Walks on level without assistance
- 2 = Walks without assistance but uses single, straight cane
- 3 = Walks without assistance but uses two points for mechanical support such as crutches, a walker or two canes (or wears a brace)
- 4 = Walks with assistance
- 5 = Uses wheelchair only
- 6 = Not walking or using wheelchair

**Comments:**

For this area of functioning, select the description that applies.

## Partnership Assessment Form (PAF) Variables

**Variable Name:** WalkingDistance

**Question:**

INSTRUMENTAL ACTIVITIES OF DAILY LIVING (IADL): Can the partner get to places out of walking distance?

**Details:**

**Age Group:** Older Adult

**Type:** Text

**Format:** X

**Width:** 1

**Form Type:** PAF, 3M

**CSV File Type:** PAF\_NON-RES, 3M

**Valid Codes:** 1 = Without Help  
2 = With Some Help  
3 = Completely Unable to Do

**Comments:**

For this area of functioning, select the description that applies.

## Partnership Assessment Form (PAF) Variables

**Variable Name:** WICodeStatus

**Question:**

LEGAL ISSUES / DESIGNATIONS: Dependent (W&I Code 300 Status) Information: Is the partner CURRENTLY a dependent of the court?

**Details:**

**Age Group:** Child, TAY

**Type:** Text

**Format:** X

**Width:** 1

**Form Type:** PAF

**CSV File Type:** PAF\_NON-RES, KET

**Valid Codes:** 0 = No  
1 = Yes

**Comments:**



## Partnership Assessment Form (PAF) Variables

**Variable Name:** WithOtherFamily\_PastTwelveDays

**Question:**

RESIDENTIAL INFORMATION: General Living Arrangement - With adult family member(s) other than parents / non-foster care

**Details:**

**Age Group:** Child, TAY, Adult, Older Adult

**Type:** Number

**Format:** XXX

**Width:** 3

**Form Type:** PAF

**CSV File Type:** PAF\_RES

**Valid Codes:** 0-365

**Comments:**

Indicates the number of DAYS the partner has been living in this setting during the past 12 months

## Partnership Assessment Form (PAF) Variables

**Variable Name:** WithOtherFamily\_PastTwelveOccurences

**Question:**

RESIDENTIAL INFORMATION: General Living Arrangement - With adult family member(s) other than parents / non-foster care

**Details:**

**Age Group:** Child, TAY, Adult, Older Adult

**Type:** Number

**Format:** XXX

**Width:** 3

**Form Type:** PAF

**CSV File Type:** PAF\_RES

**Valid Codes:** 0-999

**Comments:**

Indicates the number of OCCURRENCES the partner has been living in this setting during the past 12 month

## Partnership Assessment Form (PAF) Variables

**Variable Name:** WithOtherFamily\_PriorTwelve

**Question:**

RESIDENTIAL INFORMATION: General Living Arrangement - With adult family member(s) other than parents / non-foster care

**Details:**

**Age Group:** Child, TAY, Adult, Older Adult

**Type:** Text

**Format:** X

**Width:** 1

**Form Type:** PAF

**CSV File Type:** PAF\_RES

**Valid Codes:** 1 = Yes (marked)

**Comments:**

Indicates whether the partner has lived in this setting anytime PRIOR TO THE LAST 12 MONTHS

## Partnership Assessment Form (PAF) Variables

**Variable Name:** WithParents\_PastTwelveDays

**Question:**

RESIDENTIAL INFORMATION: General Living Arrangement - With one or both biological / adoptive parents

**Details:**

**Age Group:** Child, TAY, Adult, Older Adult

**Type:** Number

**Format:** XXX

**Width:** 3

**Form Type:** PAF

**CSV File Type:** PAF\_RES

**Valid Codes:** 0-365

**Comments:**

Indicates the number of DAYS the partner has been living in this setting during the past 12 months

## Partnership Assessment Form (PAF) Variables

**Variable Name:** WithParents\_PastTwelveOccurences

**Question:**

RESIDENTIAL INFORMATION: General Living Arrangement - With one or both biological / adoptive parents

**Details:**

**Age Group:** Child, TAY, Adult, Older Adult

**Type:** Number

**Format:** XXX

**Width:** 3

**Form Type:** PAF

**CSV File Type:** PAF\_RES

**Valid Codes:** 0-999

**Comments:**

Indicates the number of OCCURRENCES the partner has been living in this setting during the past 12 month

## Partnership Assessment Form (PAF) Variables

**Variable Name:** WithParents\_PriorTwelve

**Question:**

RESIDENTIAL INFORMATION: General Living Arrangement - With one or both biological / adoptive parents

**Details:**

**Age Group:** Child, TAY, Adult, Older Adult

**Type:** Text

**Format:** X

**Width:** 1

**Form Type:** PAF

**CSV File Type:** PAF\_RES

**Valid Codes:** 1 = Yes (marked)

**Comments:**

Indicates whether the partner has lived in this setting anytime PRIOR TO THE LAST 12 MONTHS

## Partnership Assessment Form (PAF) Variables

**Variable Name:** Yesterday

**Question:**

RESIDENTIAL INFORMATION: General Living Arrangement (YESTERDAY)

**Details:**

**Age Group:** Child, TAY, Adult, Older Adult

**Type:** Text

**Format:** XX

**Width:** 2

**Form Type:** PAF

**CSV File Type:** PAF\_RES

**Valid Codes:**

- 1 = With Parents
- 2 = With Other Family
- 3 = Apartment Alone
- 4 = Foster Home Relative
- 5 = Foster Home Non-relative
- 6 = Emergency Shelter
- 7 = Homeless
- 8 = Medical Hospital
- 9 = Psychiatric Hospital
- 10 = State Psychiatric
- 11 = Group Home 0-11
- 12 = Group Home 12-14
- 13 = Community Treatment
- 14 = Residential Treatment
- 15 = Juvenile Hall / Camp
- 16 = DJJ
- 17 = Other Setting
- 18 = Unknown Setting
- 19 = Single Room Occupancy
- 20 = Individual Placement
- 21 = Congregate Placement
- 22 = Community Care
- 23 = Nursing Physical
- 24 = Nursing Psychiatric
- 25 = Long-Term Care
- 26 = Prison
- 27 = Jail
- 28 = Assisted Living

**Comments:**

## Partnership Assessment Form (PAF) Variables

**Variable Name:** Yesterday

**Question:**

RESIDENTIAL INFORMATION: General Living Arrangement (YESTERDAY)



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## Key Event Tracking (KET) Variables

**Variable Name:** AB2034

**Question:**

ADMINISTRATIVE INFORMATION: Program Information - Was the partner involved in the AB2034 program?

**Details:**

**Age Group:** TAY, Adult, Older Adult

**Type:** Text

**Format:** X

**Width:** 1

**Form Type:** KET

**CSV File Type:** PAF\_RES, PAF\_NON-RES, KET

**Valid Codes:** 0 = No longer participating in the AB2034 Program  
1 = Now enrolled in the AB2034 Program

**Comments:**

Indicates whether the partner was involved in the AB2034 program

## Key Event Tracking (KET) Variables

**Variable Name:** AB2034ChangeDate

**Question:**

ADMINISTRATIVE INFORMATION: Program Information - Date of AB2034 Program Change

**Details:**

**Age Group:** TAY, Adult, Older Adult

**Type:** Text

**Format:** mm/dd/yyyy

**Width:** 10

**Form Type:** KET

**CSV File Type:** KET

**Valid Codes:** leading zeros

**Comments:**

## Key Event Tracking (KET) Variables

**Variable Name:** Age\_Group

**Question:**

Internal DCR Administrative field which indicates the age group the partner belonged to at the time the form was completed

**Details:**

**Age Group:** Child, TAY, Adult, Older Adult

**Type:** Number

**Format:** XX

**Width:** 2

**Form Type:** PAF, KET, 3M

**CSV File Type:** PAF\_RES, PAF\_NON-RES, KET, 3M

**Valid Codes:**

- 1 = Child PAF
- 2 = Child KET
- 3 = Child 3M
- 4 = TAY PAF
- 5 = TAY KET
- 6 = TAY 3M
- 7 = Adult PAF
- 8 = Adult KET
- 9 = Adult 3M
- 10 = Older Adult PAF
- 11 = Older Adult KET
- 12 = Older Adult 3M

**Comments:**

## Key Event Tracking (KET) Variables

**Variable Name:** AssessmentDate

**Question:**

PARTNERSHIP INFORMATION: Date Completed - If the record is a PAF, the value for this field is the same as the Partnership Date

**Details:**

**Age Group:** Child, TAY, Adult, Older Adult

**Type:** Text

**Format:** mm/dd/yyyy

**Width:** 10

**Form Type:** PAF, KET, 3M

**CSV File Type:** PAF\_RES, PAF\_NON-RES, KET, 3M

**Valid Codes:** leading zeros

**Comments:**

## Key Event Tracking (KET) Variables

**Variable Name:** AssessmentID

**Question:**

Internal DCR Administrative field for individually identifying each assessment

**Details:**

**Age Group:** Child, TAY, Adult, Older Adult

**Type:** Text

**Format:** XXXXX

**Width:** 5

**Form Type:** PAF, KET, 3M

**CSV File Type:** PAF\_RES, PAF\_NON-RES, KET, 3M

**Valid Codes:**

**Comments:**

## Key Event Tracking (KET) Variables

**Variable Name:** AssessmentSource

**Question:**

Internal DCR Administrative field which indicates how the record was submitted/edited

**Details:**

**Age Group:** Child, TAY, Adult, Older Adult

**Type:** Number

**Format:** X

**Width:** 1

**Form Type:** PAF, KET, 3M

**CSV File Type:** PAF\_RES, PAF\_NON-RES, KET, 3M

**Valid Codes:** 1 = DCR Online System  
2 = XML Batch Upload  
3 = Legacy/DCR Interim System

**Comments:**



## Key Event Tracking (KET) Variables

**Variable Name:** AssessmentType

**Question:**

Internal DCR Administrative field which indicates the form type from which the data were collected

**Details:**

**Age Group:** Child, TAY, Adult, Older Adult

**Type:** Text

**Format:** XXX

**Width:** 3

**Form Type:** PAF, KET, 3M

**CSV File Type:** PAF\_RES, PAF\_NON-RES, KET, 3M

**Valid Codes:** PAF = Partnership Assessment Form  
KET = Key Event Tracking form  
3M = Quarterly Assessment form

**Comments:**

## Key Event Tracking (KET) Variables

**Variable Name:** CommunityCollegeCurr

**Question:**

EDUCATION: Community College / 4 Year College

**Details:**

**Age Group:** TAY, Adult, Older Adult

**Type:** Text

**Format:** X

**Width:** 1

**Form Type:** PAF, KET

**CSV File Type:** PAF\_NON-RES, KET

**Valid Codes:** 1 = Yes (marked)

**Comments:**

Indicates whether the partner is CURRENTLY in this educational setting.

## Key Event Tracking (KET) Variables

**Variable Name:** CompletePgm

**Question:**

EDUCATION: If stopping school, did the partner complete a class and/or program?

**Details:**

**Age Group:** TAY, Adult, Older Adult

**Type:** Text

**Format:** X

**Width:** 1

**Form Type:** KET

**CSV File Type:** KET

**Valid Codes:** 0 = No  
1 = Yes

**Comments:**

## Key Event Tracking (KET) Variables

**Variable Name:** ConservaStatus

**Question:**

LEGAL ISSUES / DESIGNATIONS: Indicate new conservatorship status

**Details:**

**Age Group:** Child, TAY, Adult, Older Adult

**Type:** Text

**Format:** X

**Width:** 1

**Form Type:** KET

**CSV File Type:** PAF\_NON-RES, KET

**Valid Codes:** 0 = Removed from conservatorship  
1 = Placed on conservatorship

**Comments:**

## Key Event Tracking (KET) Variables

**Variable Name:** CoordinatorID

**Question:**

ADMINISTRATIVE INFORMATION: Partnership Status - Partnership Service Coordinator ID

**Details:**

**Age Group:** Child, TAY, Adult, Older Adult

**Type:** Text

**Format:** PSCLastName, PSCFirstName

**Width:** 25

**Form Type:** PAF, KET

**CSV File Type:** PAF\_RES, PAF\_NON-RES, KET

**Valid Codes:** 0-9, A-Z

**Comments:**

## Key Event Tracking (KET) Variables

**Variable Name:** CountyFSPID

**Question:**

PARTNERSHIP INFORMATION: County Partner ID (Optional)

**Details:**

**Age Group:** Child, TAY, Adult, Older Adult

**Type:** Text

**Format:** XXXXXXXXXXXXXXXXX

**Width:** 15

**Form Type:** PAF, KET, 3M

**CSV File Type:** PAF\_RES, PAF\_NON-RES, KET, 3M

**Valid Codes:** 0-9, A-Z Right justify, use left leading zeros

**Comments:**

Optional internal county identifier.

## Key Event Tracking (KET) Variables

**Variable Name:** CountyID

**Question:**

PARTNERSHIP INFORMATION: County (city submitting record)

**Details:**

**Age Group:** Child, TAY, Adult, Older Adult

**Type:** Text

**Format:** XX

**Width:** 2

**Form Type:** PAF, KET, 3M

**CSV File Type:** PAF\_RES, PAF\_NON-RES, KET, 3M

**Valid Codes:** 01 - 66, See Appendix A for codes

**Comments:**

NOTE: Should include leading zeros

## Key Event Tracking (KET) Variables

**Variable Name:** CreatedDate

**Question:**

Internal DCR Administrative field that indicates the date when the record was submitted to the DCR.

**Details:**

**Age Group:** Child, TAY, Adult, Older Adult

**Type:** Text

**Format:** mm/dd/yyyy

**Width:** 10

**Form Type:** PAF, KET, 3M

**CSV File Type:** PAF\_RES, PAF\_NON-RES, KET, 3M

**Valid Codes:**

**Comments:**



## Key Event Tracking (KET) Variables

**Variable Name:** CSIDateOfBirth

**Question:**

When available, this variable is populated using the DMH Client and Services Information System (CSI) when a valid CCN is provided to the DCR

**Details:**

**Age Group:** Child, TAY, Adult, Older Adult

**Type:** Text

**Format:** mm/dd/yyyy

**Width:** 10

**Form Type:** PAF, KET, 3M

**CSV File Type:** PAF\_RES, PAF\_NON-RES, KET, 3M

**Valid Codes:**

**Comments:**

Populated using the DMH Client and Services Information (CSI) System "date of birth" variable (if available) after a match is found between the CCN entered into the DCR and the CCN submitted to the CSI System.

## Key Event Tracking (KET) Variables

**Variable Name:** CSHispanic

**Question:**

Is the client of Hispanic or Latino ethnicity? When available, this variable is obtained from the DMH Client and Services Information System (CSI) when a valid CCN is provided to the DCR.

**Details:**

**Age Group:** Child, TAY, Adult, Older Adult

**Type:** None

**Format:** X

**Width:** None

**Form Type:** PAF, KET, 3M

**CSV File Type:** PAF\_RES, PAF\_NON-RES, KET, 3M

**Valid Codes:** Y = Yes  
N = No  
U = Unknown/Not Reported

**Comments:**

Populated using the DMH Client and Services Information (CSI) System "Ethnicity" variable (if available) after a match is found between the CCN entered into the DCR and the CCN submitted to the CSI System. (Note: This field is currently not being populated from CSI.

## Key Event Tracking (KET) Variables

**Variable Name:** CSINumber

**Question:**

PARTNERSHIP INFORMATION: CSI County Client Number (CCN)

**Details:**

**Age Group:** Child, TAY, Adult, Older Adult

**Type:** Text

**Format:** XXXXXXXXX

**Width:** 9

**Form Type:** PAF, KET, 3M

**CSV File Type:** PAF\_RES, PAF\_NON-RES, KET, 3M

**Valid Codes:** 0-9, A-Z Right justify, use left leading zeros

**Comments:**

This is the same client identifier that is created by the county and submitted to the DMH Client and Services Information (CSI) System. Note: Should include leading zeros.

## Key Event Tracking (KET) Variables

**Variable Name:** CSIRace1

**Question:**

When available, this variable is populated using the DMH Client and Services Information System (CSI) when a valid CCN is provided to the DCR

**Details:**

**Age Group:** Child, TAY, Adult, Older Adult

**Type:** None

**Format:** X

**Width:** None

**Form Type:** PAF, KET, 3M

**CSV File Type:** PAF\_RES, PAF\_NON-RES, KET, 3M

**Valid Codes:**

- 1 = White
- 2 = Hispanic
- 3 = Black
- 5 = American Native
- 7 = Filipino
- A = Amerasian
- C = Chinese
- H = Cambodian
- J = Japanese
- K = Korean
- M = Samoan
- N = Asian Indian
- P = Hawaiian Native
- R = Guamanian
- T = Laotian
- V = Vietnamese
- X = Multiple (only valid in subfield B)
- 4 = Other Asian or Pacific Islander
- 8 = Other
- 9 = Unknown / Not Reported

**Comments:**

Populated using the DMH Client and Services Information (CSI) System "Race1" variable (if available) after a match is found between the CCN entered into the DCR and the CCN submitted to the CSI System.

## Key Event Tracking (KET) Variables

**Variable Name:** CSIRace2

**Question:**

When available, this variable is populated using the DMH Client and Services Information System (CSI) when a valid CCN is provided to the DCR

**Details:**

**Age Group:** Child, TAY, Adult, Older Adult

**Type:** None

**Format:** X

**Width:** None

**Form Type:** PAF, KET, 3M

**CSV File Type:** PAF\_RES, PAF\_NON-RES, KET, 3M

**Valid Codes:**

- 1 = White
- 2 = Hispanic
- 3 = Black
- 5 = American Native
- 7 = Filipino
- A = Amerasian
- C = Chinese
- H = Cambodian
- J = Japanese
- K = Korean
- M = Samoan
- N = Asian Indian
- P = Hawaiian Native
- R = Guamanian
- T = Laotian
- V = Vietnamese
- X = Multiple (only valid in subfield B)
- 4 = Other Asian or Pacific Islander
- 8 = Other
- 9 = Unknown / Not Reported

**Comments:**

Populated using the DMH Client and Services Information (CSI) System "Race2" variable (if available) after a match is found between the CCN entered into the DCR and the CCN submitted to the CSI System.

## Key Event Tracking (KET) Variables

**Variable Name:** CSIRace3

**Question:**

When available, this variable is populated using the DMH Client and Services Information System (CSI) when a valid CCN is provided to the DCR

**Details:**

**Age Group:** Child, TAY, Adult, Older Adult

**Type:** None

**Format:** X

**Width:** None

**Form Type:** PAF, KET, 3M

**CSV File Type:** PAF\_RES, PAF\_NON-RES, KET, 3M

**Valid Codes:**

- 1 = White
- 2 = Hispanic
- 3 = Black
- 5 = American Native
- 7 = Filipino
- A = Amerasian
- C = Chinese
- H = Cambodian
- J = Japanese
- K = Korean
- M = Samoan
- N = Asian Indian
- P = Hawaiian Native
- R = Guamanian
- T = Laotian
- V = Vietnamese
- X = Multiple (only valid in subfield B)
- 4 = Other Asian or Pacific Islander
- 8 = Other
- 9 = Unknown / Not Reported

**Comments:**

Populated using the DMH Client and Services Information (CSI) System "Race3" variable (if available) after a match is found between the CCN entered into the DCR and the CCN submitted to the CSI System.

## Key Event Tracking (KET) Variables

**Variable Name:** CSIRace4

**Question:**

When available, this variable is populated using the DMH Client and Services Information System (CSI) when a valid CCN is provided to the DCR

**Details:**

**Age Group:** Child, TAY, Adult, Older Adult

**Type:** None

**Format:** X

**Width:** None

**Form Type:** PAF, KET, 3M

**CSV File Type:** PAF\_RES, PAF\_NON-RES, KET, 3M

**Valid Codes:**

- 1 = White
- 2 = Hispanic
- 3 = Black
- 5 = American Native
- 7 = Filipino
- A = Amerasian
- C = Chinese
- H = Cambodian
- J = Japanese
- K = Korean
- M = Samoan
- N = Asian Indian
- P = Hawaiian Native
- R = Guamanian
- T = Laotian
- V = Vietnamese
- X = Multiple (only valid in subfield B)
- 4 = Other Asian or Pacific Islander
- 8 = Other
- 9 = Unknown / Not Reported

**Comments:**

Populated using the DMH Client and Services Information (CSI) System "Race4" variable (if available) after a match is found between the CCN entered into the DCR and the CCN submitted to the CSI System.

## Key Event Tracking (KET) Variables

**Variable Name:** CSIRace5

**Question:**

When available, this variable is populated using the DMH Client and Services Information System (CSI) when a valid CCN is provided to the DCR

**Details:**

**Age Group:** Child, TAY, Adult, Older Adult

**Type:** None

**Format:** X

**Width:** None

**Form Type:** PAF, KET, 3M

**CSV File Type:** PAF\_RES, PAF\_NON-RES, KET, 3M

**Valid Codes:**

- 1 = White
- 2 = Hispanic
- 3 = Black
- 5 = American Native
- 7 = Filipino
- A = Amerasian
- C = Chinese
- H = Cambodian
- J = Japanese
- K = Korean
- M = Samoan
- N = Asian Indian
- P = Hawaiian Native
- R = Guamanian
- T = Laotian
- V = Vietnamese
- X = Multiple (only valid in subfield B)
- 4 = Other Asian or Pacific Islander
- 8 = Other
- 9 = Unknown / Not Reported

**Comments:**

Populated using the DMH Client and Services Information (CSI) System "Race5" variable (if available) after a match is found between the CCN entered into the DCR and the CCN submitted to the CSI System.



## Key Event Tracking (KET) Variables

**Variable Name:** Current

**Question:**

RESIDENTIAL INFORMATION: General Living Arrangement (TONIGHT)

**Details:**

**Age Group:** Child, TAY, Adult, Older Adult

**Type:** Text

**Format:** XX

**Width:** 2

**Form Type:** PAF, KET

**CSV File Type:** PAF\_RES, KET

**Valid Codes:**

- 1 = With Parents
- 2 = With Other Family
- 3 = Apartment Alone
- 4 = Foster Home Relative
- 5 = Foster Home Non-relative
- 6 = Emergency Shelter
- 7 = Homeless
- 8 = Medical Hospital
- 9 = Psychiatric Hospital
- 10 = State Psychiatric
- 11 = Group Home 0-11
- 12 = Group Home 12-14
- 13 = Community Treatment
- 14 = Residential Treatment
- 15 = Juvenile Hall / Camp
- 16 = DJJ
- 17 = Other Setting
- 18 = Unknown Setting
- 19 = Single Room Occupancy
- 20 = Individual Placement
- 21 = Congregate Placement
- 22 = Community Care
- 23 = Nursing Physical
- 24 = Nursing Psychiatric
- 25 = Long-Term Care
- 26 = Prison
- 27 = Jail
- 28 = Assisted Living

## Key Event Tracking (KET) Variables

**Variable Name:** Current

**Question:**

RESIDENTIAL INFORMATION: General Living Arrangement (TONIGHT)

**Comments:**

## Key Event Tracking (KET) Variables

**Variable Name:** Current\_CompetitiveAvgHrWage

**Question:**

EMPLOYMENT: Competitive Employment - Paid Employment in the community in a position that is also open to individuals without a disability

**Details:**

**Age Group:** Child, TAY, Adult, Older Adult

**Type:** Number

**Format:** XXXXXX

**Width:** 6

**Form Type:** PAF, KET

**CSV File Type:** PAF\_NON-RES, KET

**Valid Codes:** 0-999999, Leave blank if no answer

**Comments:**

Average hourly wage the partner CURRENTLY earns in this employment setting

## Key Event Tracking (KET) Variables

**Variable Name:** Current\_CompetitiveAvgHrWeek

**Question:**

EMPLOYMENT: Competitive Employment - Paid Employment in the community in a position that is also open to individuals without a disability

**Details:**

**Age Group:** Child, TAY, Adult, Older Adult

**Type:** Number

**Format:** XX

**Width:** 2

**Form Type:** PAF, KET

**CSV File Type:** PAF\_NON-RES, KET

**Valid Codes:** 0-99

**Comments:**

Average hours per week the partner CURRENTLY spends in this employment setting

## Key Event Tracking (KET) Variables

**Variable Name:** Current\_In-HouseAvgHrWage

**Question:**

EMPLOYMENT: Paid In-House Work (Sheltered Workshop / Work Experience / Agency-owned Business) - Paid jobs open only to program participants with a disability. A sheltered workshop usually offers sub-minimum wage work in a simulated environment. A Work Experience (adjustment) program within an agency provides exposure to the standard expectations and advantages of employment. An agency-owned business serves customers outside the agency and provides realistic work experiences and can be located at the program site or in the community.

**Details:**

**Age Group:** Child, TAY, Adult, Older Adult  
**Type:** Number  
**Format:** XXXXXX  
**Width:** 6  
**Form Type:** PAF, KET  
**CSV File Type:** PAF\_NON-RES, KET  
**Valid Codes:** 0-999999, Leave blank if no answer

**Comments:**

Average hourly wage the partner CURRENTLY earns in this employment setting

## Key Event Tracking (KET) Variables

**Variable Name:** Current\_In-HouseAvgHrWeek

**Question:**

EMPLOYMENT: Paid In-House Work (Sheltered Workshop / Work Experience / Agency-owned Business) - Paid jobs open only to program participants with a disability. A sheltered workshop usually offers sub-minimum wage work in a simulated environment. A Work Experience (adjustment) program within an agency provides exposure to the standard expectations and advantages of employment. An agency-owned business serves customers outside the agency and provides realistic work experiences and can be located at the program site or in the community.

**Details:**

**Age Group:** Child, TAY, Adult, Older Adult  
**Type:** Number  
**Format:** XX  
**Width:** 2  
**Form Type:** PAF, KET  
**CSV File Type:** PAF\_NON-RES, KET  
**Valid Codes:** 0-99

**Comments:**

Average hours per week the partner CURRENTLY spends in this employment setting

## Key Event Tracking (KET) Variables

**Variable Name:** Current\_Non-paidAvgHrWeek

**Question:**

EMPLOYMENT: Non-paid (Volunteer) Work Experience - Non-paid (volunteer) jobs in an agency or volunteer work in the community that provides exposure to the standard expectations of employment.

**Details:**

**Age Group:** Child, TAY, Adult, Older Adult

**Type:** Number

**Format:** XX

**Width:** 2

**Form Type:** PAF, KET

**CSV File Type:** PAF\_NON-RES, KET

**Valid Codes:** 0-99

**Comments:**

Average hours per week the partner CURRENTLY spends in this employment setting

## Key Event Tracking (KET) Variables

**Variable Name:** Current\_OtherEmploymentAvgHrWage

**Question:**

EMPLOYMENT: Other Gainful / Employment Activity - Any informal employment activity that increases the partner's income (e.g., recycling, gardening, babysitting) OR participation in formal structured classes and / or workshops providing instruction on issues pertinent to getting a job. (Does NOT include such activities as panhandling or illegal activities such as prostitution.)

**Details:**

**Age Group:** Child, TAY, Adult, Older Adult  
**Type:** Number  
**Format:** XXXXXX  
**Width:** 6  
**Form Type:** PAF, KET  
**CSV File Type:** PAF\_NON-RES, KET  
**Valid Codes:** 0-999999, Leave blank if no answer

**Comments:**

Average hourly wage the partner CURRENTLY earns in this employment setting



## Key Event Tracking (KET) Variables

**Variable Name:** Current\_OtherEmploymentAvgHrWeek

**Question:**

EMPLOYMENT: Other Gainful / Employment Activity - Any informal employment activity that increases the partner's income (e.g., recycling, gardening, babysitting) OR participation in formal structured classes and / or workshops providing instruction on issues pertinent to getting a job. (Does NOT include such activities as panhandling or illegal activities such as prostitution.)

**Details:**

**Age Group:** Child, TAY, Adult, Older Adult

**Type:** Number

**Format:** XX

**Width:** 2

**Form Type:** PAF, KET

**CSV File Type:** PAF\_NON-RES, KET

**Valid Codes:** 0-99

**Comments:**

Average hours per week the partner CURRENTLY spends in this employment setting

## Key Event Tracking (KET) Variables

**Variable Name:** Current\_SupportedAvgHrWage

**Question:**

EMPLOYMENT: Supported Employment - Competitive Employment (see above) with ongoing on-site or off-site job-related support services provided

**Details:**

**Age Group:** Child, TAY, Adult, Older Adult

**Type:** Number

**Format:** XXXXXX

**Width:** 6

**Form Type:** PAF, KET

**CSV File Type:** PAF\_NON-RES, KET

**Valid Codes:** 0-999999, Leave blank if no answer

**Comments:**

Average hourly wage the partner CURRENTLY earns in this employment setting

## Key Event Tracking (KET) Variables

**Variable Name:** Current\_SupportedAvgHrWeek

**Question:**

EMPLOYMENT: Supported Employment - Competitive Employment (see above) with ongoing on-site or off-site job-related support services provided

**Details:**

**Age Group:** Child, TAY, Adult, Older Adult

**Type:** Number

**Format:** XX

**Width:** 2

**Form Type:** PAF, KET

**CSV File Type:** PAF\_NON-RES, KET

**Valid Codes:** 0-99

**Comments:**

Average hours per week the partner CURRENTLY spends in this employment setting

## Key Event Tracking (KET) Variables

**Variable Name:** Current\_TransitionalAvgHrWage

**Question:**

EMPLOYMENT: Transitional Employment / Enclave - Paid jobs in the community that are 1)open only to individuals with the disability AND 2) are either time-limited for the purpose of moving to a more permanent job OR are part of a group of disabled individuals who are working as a team in the midst of teens of non-disabled individuals who are performing the same work

**Details:**

**Age Group:** Child, TAY, Adult, Older Adult  
**Type:** Number  
**Format:** XXXXXX  
**Width:** 6  
**Form Type:** PAF, KET  
**CSV File Type:** PAF\_NON-RES, KET  
**Valid Codes:** 0-999999, Leave blank if no answer

**Comments:**

Average hourly wage the partner CURRENTLY earns in this employment setting

## Key Event Tracking (KET) Variables

**Variable Name:** Current\_TransitionalAvgHrWeek

**Question:**

EMPLOYMENT: Transitional Employment / Enclave - Paid jobs in the community that are 1)open only to individuals with the disability AND 2) are either time-limited for the purpose of moving to a more permanent job OR are part of a group of disabled individuals who are working as a team in the midst of teens of non-disabled individuals who are performing the same work

**Details:**

**Age Group:** Child, TAY, Adult, Older Adult

**Type:** Number

**Format:** XX

**Width:** 2

**Form Type:** PAF, KET

**CSV File Type:** PAF\_NON-RES, KET

**Valid Codes:** 0-99

**Comments:**

Average hours per week the partner CURRENTLY spends in this employment setting

## Key Event Tracking (KET) Variables

**Variable Name:** Current\_Unemployed

**Question:**

EMPLOYMENT: The partner is not employed at this time.

**Details:**

**Age Group:** Child, TAY, Adult, Older Adult

**Type:** Text

**Format:** X

**Width:** 1

**Form Type:** PAF, KET

**CSV File Type:** PAF\_NON-RES, KET

**Valid Codes:** 1 = Yes (marked)

**Comments:**

Indicates whether the partner is CURRENTLY unemployed

## Key Event Tracking (KET) Variables

**Variable Name:** DateArrested

**Question:**

LEGAL ISSUES / DESIGNATIONS: Arrest Information - Date Partner Arrested

**Details:**

**Age Group:** Child, TAY, Adult, Older Adult

**Type:** Text

**Format:** mm/dd/yyyy

**Width:** 10

**Form Type:** KET

**CSV File Type:** KET

**Valid Codes:** leading zeros

**Comments:**

## Key Event Tracking (KET) Variables

**Variable Name:** DateConserva

**Question:**

LEGAL ISSUES / DESIGNATIONS: Conservatorship Information - Date of Conservatorship Status Change

**Details:**

**Age Group:** Child, TAY, Adult, Older Adult

**Type:** Text

**Format:** mm/dd/yyyy

**Width:** 10

**Form Type:** KET

**CSV File Type:** KET

**Valid Codes:** leading zeros

**Comments:**



## Key Event Tracking (KET) Variables

**Variable Name:** DateDepen

**Question:**

LEGAL ISSUES / DESIGNATIONS: Dependent Information - Date of W&I Code 300 Status Change

**Details:**

**Age Group:** Child, TAY

**Type:** Text

**Format:** mm/dd/yyyy

**Width:** 10

**Form Type:** KET

**CSV File Type:** KET

**Valid Codes:** leading zeros

**Comments:**

## Key Event Tracking (KET) Variables

**Variable Name:** DateEmergencyChange

**Question:**

EMERGENCY INTERVENTION: Date of Emergency Intervention

**Details:**

**Age Group:** Child, TAY, Adult, Older Adult

**Type:** Text

**Format:** mm/dd/yyyy

**Width:** 10

**Form Type:** KET

**CSV File Type:** KET

**Valid Codes:** leading zeros

**Comments:**

## Key Event Tracking (KET) Variables

**Variable Name:** DateEmpChange

**Question:**

EMPLOYMENT: Date of Employment Change

**Details:**

**Age Group:** Child, TAY, Adult, Older Adult

**Type:** Text

**Format:** mm/dd/yyyy

**Width:** 10

**Form Type:** KET

**CSV File Type:** KET

**Valid Codes:** leading zeros

**Comments:**

## Key Event Tracking (KET) Variables

**Variable Name:** DateExpulsion

**Question:**

EDUCATION: Expulsion Information - Date of Expulsion

**Details:**

**Age Group:** Child, TAY

**Type:** Text

**Format:** mm/dd/yyyy

**Width:** 10

**Form Type:** KET

**CSV File Type:** KET

**Valid Codes:** leading zeros

**Comments:**

## Key Event Tracking (KET) Variables

**Variable Name:** DateGradeComplete

**Question:**

EDUCATION: Grade Level Information - Date of Grade Level Completion

**Details:**

**Age Group:** Child, TAY, Adult, Older Adult

**Type:** Text

**Format:** mm/dd/yyyy

**Width:** 10

**Form Type:** KET

**CSV File Type:** KET

**Valid Codes:** leading zeros

**Comments:**

## Key Event Tracking (KET) Variables

**Variable Name:** DateKETCntyUse1

**Question:**

COUNTY USE QUESTIONS: Date of KET County Use Field # 1 Change

**Details:**

**Age Group:** Child, TAY, Adult, Older Adult

**Type:** Text

**Format:** mm/dd/yyyy

**Width:** 10

**Form Type:** KET

**CSV File Type:** KET

**Valid Codes:** leading zeros

**Comments:**

## Key Event Tracking (KET) Variables

**Variable Name:** DateKETCntyUse2

**Question:**

COUNTY USE QUESTIONS: Date of KET County Use Field # 2 Change

**Details:**

**Age Group:** Child, TAY, Adult, Older Adult

**Type:** Text

**Format:** mm/dd/yyyy

**Width:** 10

**Form Type:** KET

**CSV File Type:** KET

**Valid Codes:** leading zeros

**Comments:**

## Key Event Tracking (KET) Variables

**Variable Name:** DateKETCntyUse3

**Question:**

COUNTY USE QUESTIONS: Date of KET County Use Field # 3 Change

**Details:**

**Age Group:** Child, TAY, Adult, Older Adult

**Type:** Text

**Format:** mm/dd/yyyy

**Width:** 10

**Form Type:** KET

**CSV File Type:** KET

**Valid Codes:** leading zeros

**Comments:**



## Key Event Tracking (KET) Variables

**Variable Name:** DateKETStatusChange

**Question:**

CHANGE IN ADMINISTRATIVE INFORMATION: This is the field on the KET form that says "Date of Partnership Status Change." This field indicates the date of change when the partnership is either "discontinued/interrupted" or "reestablished."

**Details:**

**Age Group:** Child, TAY, Adult, Older Adult

**Type:** Text

**Format:** mm/dd/yyyy

**Width:** 10

**Form Type:** KET

**CSV File Type:** KET

**Valid Codes:** leading zeros

**Comments:**

## Key Event Tracking (KET) Variables

**Variable Name:** DateOfBirth

**Question:**

PARTNERSHIP INFORMATION: Partner's Date of Birth

**Details:**

**Age Group:** Child, TAY, Adult, Older Adult

**Type:** Text

**Format:** mm/dd/yyyy

**Width:** 10

**Form Type:** PAF, KET, 3M

**CSV File Type:** PAF\_RES, PAF\_NON-RES, KET, 3M

**Valid Codes:** leading zeros

**Comments:**

## Key Event Tracking (KET) Variables

**Variable Name:** DateParole

**Question:**

LEGAL ISSUES / DESIGNATIONS: Parole Information - Date of Division of Juvenile Justice  
Parole Status Change

**Details:**

**Age Group:** Child, TAY

**Type:** Text

**Format:** mm/dd/yyyy

**Width:** 10

**Form Type:** KET

**CSV File Type:** KET

**Valid Codes:** leading zeros

**Comments:**

## Key Event Tracking (KET) Variables

**Variable Name:** DatePartnershipStatusChange

**Question:**

Internal DCR administrative field. Indicates the date that Partnership Status changed.

**Details:**

**Age Group:** Child, TAY, Adult, Older Adult

**Type:** Text

**Format:** mm/dd/yyyy

**Width:** 10

**Form Type:** PAF, KET, 3M

**CSV File Type:** PAF\_RES, PAF\_NON-RES, KET, 3M

**Valid Codes:** leading zeros

**Comments:**

## Key Event Tracking (KET) Variables

**Variable Name:** DatePayee

**Question:**

LEGAL ISSUES / DESIGNATIONS: Payee Information - Date of Payee Status Change

**Details:**

**Age Group:** Child, TAY, Adult, Older Adult

**Type:** Text

**Format:** mm/dd/yyyy

**Width:** 10

**Form Type:** KET

**CSV File Type:** KET

**Valid Codes:** leading zeros

**Comments:**

## Key Event Tracking (KET) Variables

**Variable Name:** DateProbation

**Question:**

LEGAL ISSUES / DESIGNATIONS: Probation Information - Date of Probation Status Change

**Details:**

**Age Group:** Child, TAY, Adult, Older Adult

**Type:** Text

**Format:** mm/dd/yyyy

**Width:** 10

**Form Type:** KET

**CSV File Type:** KET

**Valid Codes:** leading zeros

**Comments:**

## Key Event Tracking (KET) Variables

**Variable Name:** DateProgmChange

**Question:**

CHANGE IN ADMINISTRATIVE INFORMATION: Partnership Status - Date of Full Service Partnership Program ID Change

**Details:**

**Age Group:** Child, TAY, Adult, Older Adult

**Type:** Text

**Format:** mm/dd/yyyy

**Width:** 10

**Form Type:** KET

**CSV File Type:** KET

**Valid Codes:** leading zeros

**Comments:**

## Key Event Tracking (KET) Variables

**Variable Name:** DateProviChange

**Question:**

CHANGE IN ADMINISTRATIVE INFORMATION: Partnership Status - Date of Provider Number/NPI Change

**Details:**

**Age Group:** Child, TAY, Adult, Older Adult

**Type:** Text

**Format:** mm/dd/yyyy

**Width:** 10

**Form Type:** KET

**CSV File Type:** KET

**Valid Codes:** leading zeros

**Comments:**



## Key Event Tracking (KET) Variables

**Variable Name:** DatePSCIDChange

**Question:**

CHANGE IN ADMINISTRATIVE INFORMATION: Partnership Status - Date of Partnership  
Service Coordinator ID Change

**Details:**

**Age Group:** Child, TAY, Adult, Older Adult

**Type:** Text

**Format:** mm/dd/yyyy

**Width:** 10

**Form Type:** KET

**CSV File Type:** KET

**Valid Codes:** leading zeros

**Comments:**

## Key Event Tracking (KET) Variables

**Variable Name:** DateResidentialChange

**Question:**

RESIDENTIAL INFORMATION: Date of Residential Status Change

**Details:**

**Age Group:** Child, TAY, Adult, Older Adult

**Type:** Text

**Format:** mm/dd/yyyy

**Width:** 10

**Form Type:** KET

**CSV File Type:** KET

**Valid Codes:** leading zeros

**Comments:**

## Key Event Tracking (KET) Variables

**Variable Name:** DateSettingChange

**Question:**

EDUCATION: Educational Setting Information - Date of Educational Setting Change

**Details:**

**Age Group:** TAY, Adult, Older Adult

**Type:** Text

**Format:** mm/dd/yyyy

**Width:** 10

**Form Type:** KET

**CSV File Type:** KET

**Valid Codes:** leading zeros

**Comments:**

## Key Event Tracking (KET) Variables

**Variable Name:** DateSuspension

**Question:**

EDUCATION: Suspension Information - Date of Suspension

**Details:**

**Age Group:** Child, TAY

**Type:** Text

**Format:** mm/dd/yyyy

**Width:** 10

**Form Type:** KET

**CSV File Type:** KET

**Valid Codes:** leading zeros

**Comments:**

## Key Event Tracking (KET) Variables

**Variable Name:** DiscontReason

**Question:**

CHANGE IN ADMINISTRATIVE INFORMATION: Partnership Status - If there is a DISCONTINUATION/INTERRUPTION of Full Service Partnership and/or community services/program, indicate the reason.

**Details:**

**Age Group:** Child, TAY, Adult, Older Adult

**Type:** Text

**Format:** XX

**Width:** 2

**Form Type:** KET

**CSV File Type:** KET

**Valid Codes:** 1 = Target Criteria  
2 = Discontinue  
3 = Moved  
4 = Not Located  
5 = Institution Child  
5 = Institution TAY Adult Oadult  
6 = Serving Jail  
7 = Met Goals  
8 = Deceased  
9 = Placed Juvenile Hall  
10 = Placed DJJ  
11 = Serving Prison

## Key Event Tracking (KET) Variables

**Variable Name:** DiscontReason

**Question:**

CHANGE IN ADMINISTRATIVE INFORMATION: Partnership Status - If there is a DISCONTINUATION/INTERRUPTION of Full Service Partnership and/or community services/program, indicate the reason.

**Comments:**

- 1=Target population criteria are not met.
- 2=Partner decided to discontinue Full Service Partnership participation after partnership established.
- 3=Partner moved to another county / service area.
- 4=After repeated attempts to contact partner, s/he cannot be located.
- 5=Community services / program interrupted – Partner's circumstances reflect a need for residential / institutional mental health services at this time (such as State Hospital).
- 5=Community services / program interrupted – Partner's circumstances reflect a need for residential / institutional mental health services at this time [such as an Institution for Mental Disease (IMD), Mental Health Rehabilitation Center (MHRC), State Hospital].
- 6=Community services / program interrupted – Partner will be serving JAIL sentence.
- 7=Partner has successfully met his / her goals such that discontinuation of Full Service Partnership is appropriate.
- 8=Partner is deceased.
- 9=Community services / program interrupted – Partner will be placed in JUVENILE HALL / CAMP / RANCH.
- 10=Community services / program interrupted – Partner will be placed in DIVISION of JUVENILE JUSTICE.
- 11=Community services / program interrupted – Partner will be serving PRISION sentence.

## Key Event Tracking (KET) Variables

**Variable Name:** EdRecoveryGoals

**Question:**

EDUCATION: Does one of the partner's recovery goals include any kind of education at this time?

**Details:**

**Age Group:** TAY, Adult, Older Adult

**Type:** Text

**Format:** X

**Width:** 1

**Form Type:** PAF, KET

**CSV File Type:** PAF\_NON-RES, KET

**Valid Codes:** 0 = No  
1 = Yes

**Comments:**

## Key Event Tracking (KET) Variables

**Variable Name:** EmergencyType

**Question:**

EMERGENCY INTERVENTION: Indicates the type of emergency intervention

**Details:**

**Age Group:** Child, TAY, Adult, Older Adult

**Type:** Text

**Format:** X

**Width:** 1

**Form Type:** KET

**CSV File Type:** KET

**Valid Codes:** 1 = Physical health Related  
2 = Mental Health/Substance Abuse Related

**Comments:**



## Key Event Tracking (KET) Variables

**Variable Name:** EmpRecoveryGoals

**Question:**

EMPLOYMENT: Does one of the partner's recovery goals include any kind of employment at this time?

**Details:**

**Age Group:** Child, TAY, Adult, Older Adult

**Type:** Text

**Format:** X

**Width:** 1

**Form Type:** PAF, KET

**CSV File Type:** PAF\_NON-RES, KET

**Valid Codes:** 0 = No  
1 = Yes

**Comments:**

## Key Event Tracking (KET) Variables

**Variable Name:** Ethnicity\_A

**Question:**

When available, this variable is populated using the DMH Client and Services Information System (CSI) when a valid CCN is provided to the DCR

**Details:**

**Age Group:** Child, TAY, Adult, Older Adult

**Type:** Text

**Format:** X

**Width:** 1

**Form Type:** PAF, KET, 3M

**CSV File Type:** PAF\_RES, PAF\_NON-RES, KET, 3M

**Valid Codes:** 1 = White  
2 = Hispanic  
3 = Black  
5 = American Native  
7 = Filipino  
A = Amerasian  
C = Chinese  
H = Cambodian  
J = Japanese  
K = Korean  
M = Samoan  
N = Asian Indian  
P = Hawaiian Native  
R = Guamanian  
T = Laotian  
V = Vietnamese  
X = Multiple (only valid in subfield B)  
4 = Other Asian or Pacific Islander  
8 = Other  
9 = Unknown / Not Reported

**Comments:**

Populated using the DMH Client and Services Information (CSI) System "Ethnicity\_A" variable (if available) after a match is found between the CCN entered into the DCR and the CCN submitted to the CSI System.

## Key Event Tracking (KET) Variables

**Variable Name:** Ethnicity\_B

**Question:**

When available, this variable is populated using the DMH Client and Services Information System (CSI) when a valid CCN is provided to the DCR

**Details:**

**Age Group:** Child, TAY, Adult, Older Adult

**Type:** Text

**Format:** X

**Width:** 1

**Form Type:** PAF, KET, 3M

**CSV File Type:** PAF\_RES, PAF\_NON-RES, KET, 3M

**Valid Codes:** 1 = White  
2 = Hispanic  
3 = Black  
5 = American Native  
7 = Filipino  
A = Amerasian  
C = Chinese  
H = Cambodian  
J = Japanese  
K = Korean  
M = Samoan  
N = Asian Indian  
P = Hawaiian Native  
R = Guamanian  
T = Laotian  
V = Vietnamese  
X = Multiple (only valid in subfield B)  
4 = Other Asian or Pacific Islander  
8 = Other  
9 = Unknown / Not Reported

**Comments:**

Populated using the DMH Client and Services Information (CSI) System "Ethnicity\_B" variable (if available) after a match is found between the CCN entered into the DCR and the CCN submitted to the CSI System.

## Key Event Tracking (KET) Variables

**Variable Name:** Gender

**Question:**

When available, this variable is populated using the DMH Client and Services Information System (CSI) when a valid CCN is provided to the DCR

**Details:**

**Age Group:** Child, TAY, Adult, Older Adult

**Type:** Text

**Format:** X

**Width:** 1

**Form Type:** PAF, KET, 3M

**CSV File Type:** PAF\_RES, PAF\_NON-RES, KET, 3M

**Valid Codes:** M = Male  
F = Female  
O = Other  
U = Unknown

**Comments:**

Populated using the DMH Client and Services Information (CSI) System "gender" variable (if available) after a match is found between the CCN entered into the DCR and the CCN submitted to the CSI System.

## Key Event Tracking (KET) Variables

**Variable Name:** GHI

**Question:**

ADMINISTRATIVE INFORMATION: Program Information - In which additional program is the partner currently involved? Governor's Homeless Initiative (GHI)

**Details:**

**Age Group:** TAY, Adult, Older Adult

**Type:** Text

**Format:** X

**Width:** 1

**Form Type:** KET

**CSV File Type:** PAF\_RES, PAF\_NON-RES, KET

**Valid Codes:** 0 = No longer participating in the GHI Program  
1 = Now enrolled in the GHI Program

**Comments:**

Indicates whether the partner is currently involved in the Governor's Homeless Initiative (GHI) Program

## Key Event Tracking (KET) Variables

**Variable Name:** GHChangeDate

**Question:**

PROGRAM INFORMATION: Date of Governor's Homeless Initiative (GHI) Program Change

**Details:**

**Age Group:** TAY, Adult, Older Adult

**Type:** Text

**Format:** mm/dd/yyyy

**Width:** 10

**Form Type:** KET

**CSV File Type:** KET

**Valid Codes:** leading zeros

**Comments:**

## Key Event Tracking (KET) Variables

**Variable Name:** GlobalID

**Question:**

Internal DCR Client Identifier (for linking assessments)

**Details:**

**Age Group:** Child, TAY, Adult, Older Adult

**Type:** Text

**Format:** XX

**Width:** 36

**Form Type:** PAF, KET, 3M

**CSV File Type:** PAF\_RES, PAF\_NON-RES, KET, 3M

**Valid Codes:**

**Comments:**

DCR Client Identifier for linking assessments across different forms (can be useful when the CSI Number is missing).

## Key Event Tracking (KET) Variables

**Variable Name:** GraduateCurr

**Question:**

EDUCATION: Graduate School

**Details:**

**Age Group:** TAY, Adult, Older Adult

**Type:** Text

**Format:** X

**Width:** 1

**Form Type:** PAF, KET

**CSV File Type:** PAF\_NON-RES, KET

**Valid Codes:** 1 = Yes (marked)

**Comments:**

Indicates whether the partner is CURRENTLY in this educational setting.



## Key Event Tracking (KET) Variables

**Variable Name:** HighestGrade

**Question:**

EDUCATION: Highest level of education completed:

**Details:**

**Age Group:** Child, TAY, Adult, Older Adult

**Type:** Text

**Format:** XX

**Width:** 2

**Form Type:** PAF, KET

**CSV File Type:** PAF\_NON-RES, KET

**Valid Codes:** 01 = Day Care  
02 = Preschool  
03 = Kindergarten  
04 = 1st grade  
05 = 2nd grade  
06 = 3rd grade  
07 = 4th grade  
08 = 5th grade  
09 = 6th grade  
10 = 7th grade  
11 = 8th grade  
12 = 9th grade  
13 = 10th grade  
14 = 11th grade  
15 = 12th grade  
16 = GED coursework  
17 = Diploma  
18 = Some college / Some technical or Vocational Training  
19 = Associate's Degree (e.g., A.A., A.S.) / Technical or Vocational Degree  
20 = No High School Diploma / No GED  
22 = Bachelor's Degree (e.g., B.A., B.S.)  
24 = Master's Degree (e.g., M.A., M.S.)  
26 = Doctoral Degree (e.g., M.D., Ph.D.)  
27 = Level Unknown

**Comments:**

## Key Event Tracking (KET) Variables

**Variable Name:** HighSchoolCurr

**Question:**

EDUCATION: High School / Adult Education

**Details:**

**Age Group:** TAY, Adult, Older Adult

**Type:** Text

**Format:** X

**Width:** 1

**Form Type:** PAF, KET

**CSV File Type:** PAF\_NON-RES, KET

**Valid Codes:** 1 = Yes (marked)

**Comments:**

Indicates whether the partner is CURRENTLY in this educational setting.

## Key Event Tracking (KET) Variables

**Variable Name:** KETCntyUse1

**Question:**

COUNTY USE QUESTIONS: KET County Use Field # 1

**Details:**

**Age Group:** Child, TAY, Adult, Older Adult

**Type:** Text

**Format:** XXXXXXXXXXXXXXXXX

**Width:** 15

**Form Type:** PAF, KET

**CSV File Type:** PAF\_NON-RES, KET

**Valid Codes:**

**Comments:**

## Key Event Tracking (KET) Variables

**Variable Name:** KETCntyUse2

**Question:**

COUNTY USE QUESTIONS: KET County Use Field # 2

**Details:**

**Age Group:** Child, TAY, Adult, Older Adult

**Type:** Text

**Format:** XXXXXXXXXXXXXXXXX

**Width:** 15

**Form Type:** PAF, KET

**CSV File Type:** PAF\_NON-RES, KET

**Valid Codes:**

**Comments:**

## Key Event Tracking (KET) Variables

**Variable Name:** KETCntyUse3

**Question:**

COUNTY USE QUESTIONS: KET County Use Field # 3

**Details:**

**Age Group:** Child, TAY, Adult, Older Adult

**Type:** Text

**Format:** XXXXXXXXXXXXXXXXX

**Width:** 15

**Form Type:** PAF, KET

**CSV File Type:** PAF\_NON-RES, KET

**Valid Codes:**

**Comments:**

## Key Event Tracking (KET) Variables

**Variable Name:** KETStatus

**Question:**

This is the field on the KET form that says "Indicate NEW partnership status." This field indicates whether the partnership is either "discontinued/interrupted" or "reestablished."

**Details:**

**Age Group:** Child, TAY, Adult, Older Adult

**Type:** Text

**Format:** X

**Width:** 1

**Form Type:** KET

**CSV File Type:** KET

**Valid Codes:** 0 = Discontinuation  
1 = Reestablishment

**Comments:**

## Key Event Tracking (KET) Variables

**Variable Name:** MHSA

**Question:**

ADMINISTRATIVE INFORMATION: Program Information - In which additional program is the partner currently involved? MHSA Housing Program

**Details:**

**Age Group:** TAY, Adult, Older Adult

**Type:** Text

**Format:** X

**Width:** 1

**Form Type:** KET

**CSV File Type:** PAF\_RES, PAF\_NON-RES, KET

**Valid Codes:** 0 = No longer participating in the MHSA Housing Program  
1 = Now enrolled in the MHSA Housing Program

**Comments:**

Indicates whether the partner is currently involved in the MHSA Housing Program

Check the box if the partner:

Is housed in an MHSA Housing Program project. An MHSA Housing Program project provides permanent supportive housing to persons with serious mental illness who are homeless or at risk of homelessness. To determine if the housing project is supported by MHSA funds, please refer to the list provided by your county, or go to the California Department of Mental Health, MHSA (Prop 63)/Housing/MHSA Housing Program Application Overview for a list of Housing Program projects in your county. If the project is not listed, it is not an MHSA Housing Project.

## Key Event Tracking (KET) Variables

**Variable Name:** MHSChangeDate

**Question:**

PROGRAM INFORMATION: Date of MHSA Housing Program Change

**Details:**

**Age Group:** TAY, Adult, Older Adult

**Type:** Text

**Format:** mm/dd/yyyy

**Width:** 10

**Form Type:** KET

**CSV File Type:** KET

**Valid Codes:** leading zeros

**Comments:**



## Key Event Tracking (KET) Variables

**Variable Name:** Name

**Question:**

PARTNERSHIP INFORMATION: Partner's last name, Partner's first name

**Details:**

**Age Group:** Child, TAY, Adult, Older Adult

**Type:** Text

**Format:** LastName, FirstName

**Width:** 25,25

**Form Type:** PAF, KET, 3M

**CSV File Type:** PAF\_RES, PAF\_NON-RES, KET, 3M

**Valid Codes:**

**Comments:**

## Key Event Tracking (KET) Variables

**Variable Name:** NotinschoolCurr

**Question:**

EDUCATION: Not in school of any kind

**Details:**

**Age Group:** TAY, Adult, Older Adult

**Type:** Text

**Format:** X

**Width:** 1

**Form Type:** PAF, KET

**CSV File Type:** PAF\_NON-RES, KET

**Valid Codes:** 1 = Yes (marked)

**Comments:**

Indicates whether the partner is CURRENTLY in this educational setting.

## Key Event Tracking (KET) Variables

**Variable Name:** OtherEducationCurr

**Question:**

EDUCATION: Other Education

**Details:**

**Age Group:** TAY, Adult, Older Adult

**Type:** Text

**Format:** X

**Width:** 1

**Form Type:** PAF, KET

**CSV File Type:** PAF\_NON-RES, KET

**Valid Codes:** 1 = Yes (marked)

**Comments:**

Indicates whether the partner is CURRENTLY in this educational setting.

## Key Event Tracking (KET) Variables

**Variable Name:** ParoleStatus

**Question:**

LEGAL ISSUES / DESIGNATIONS: Parole Information: Indicate new Division of Juvenile Justice parole status

**Details:**

**Age Group:** Child, TAY

**Type:** Text

**Format:** X

**Width:** 1

**Form Type:** KET

**CSV File Type:** PAF\_NON-RES, KET

**Valid Codes:** 0 = Removed from Division of Juvenile Justice Parole  
1 = Placed on Division of Juvenile Justice Parole

**Comments:**

## Key Event Tracking (KET) Variables

**Variable Name:** PartnershipDate

**Question:**

PARTNERSHIP INFORMATION: Partnership Date (date when the Partnership was established)

**Details:**

**Age Group:** Child, TAY, Adult, Older Adult

**Type:** Text

**Format:** mm/dd/yyyy

**Width:** 10

**Form Type:** PAF, KET, 3M

**CSV File Type:** PAF\_RES, PAF\_NON-RES, KET, 3M

**Valid Codes:** leading zeros

**Comments:**

## Key Event Tracking (KET) Variables

**Variable Name:** PartnershipStatus

**Question:**

Internal DCR administrative field. Indicates the current Partnership Status

**Details:**

**Age Group:** Child, TAY, Adult, Older Adult

**Type:** Number

**Format:** X

**Width:** 1

**Form Type:** PAF, KET, 3M

**CSV File Type:** PAF\_RES, PAF\_NON-RES, KET, 3M

**Valid Codes:** 0 = Inactive  
1 = Active  
3 = PFR (Partners who are reactivated after 1 year)

**Comments:**

0 = Inactive Partner - Services interrupted / discontinued, 1 = Active Partner, 3 = PAF Renewal (PFR) Identifies an older, historical, PAF for a partner who was discontinued or had an interruption in their partnership and was reestablished after a year or longer.

## Key Event Tracking (KET) Variables

**Variable Name:** PayeeStatus

**Question:**

LEGAL ISSUES / DESIGNATIONS: Indicate new payee status

**Details:**

**Age Group:** Child, TAY, Adult, Older Adult

**Type:** Text

**Format:** X

**Width:** 1

**Form Type:** KET

**CSV File Type:** PAF\_NON-RES, KET

**Valid Codes:** 0 = Removed from payee status  
1 = Placed on payee status

**Comments:**

## Key Event Tracking (KET) Variables

**Variable Name:** ProbationStatus

**Question:**

LEGAL ISSUES / DESIGNATIONS: Probation Information: Indicate new probation status

**Details:**

**Age Group:** Child, TAY, Adult, Older Adult

**Type:** Text

**Format:** X

**Width:** 1

**Form Type:** KET

**CSV File Type:** PAF\_NON-RES, KET

**Valid Codes:** 0 = Removed from probation  
1 = Placed on probation

**Comments:**



## Key Event Tracking (KET) Variables

**Variable Name:** ProgramDesc

**Question:**

ADMINISTRATIVE INFORMATION: Partnership Status - Full Service Partnership Program ID (code and program title are provided)

**Details:**

**Age Group:** Child, TAY, Adult, Older Adult

**Type:** Text

**Format:** FSP ProgramID Code, FSP Program Title

**Width:** 255

**Form Type:** PAF, KET

**CSV File Type:** PAF\_RES, PAF\_NON-RES, KET

**Valid Codes:** 0-9, A-Z

**Comments:**

## Key Event Tracking (KET) Variables

**Variable Name:** ProviderSiteID

**Question:**

ADMINISTRATIVE INFORMATION: Partnership Status - Provider Number / NPI (Optional)

**Details:**

**Age Group:** Child, TAY, Adult, Older Adult

**Type:** Text

**Format:** XXXXXXXXXXXX

**Width:** 10

**Form Type:** PAF, KET

**CSV File Type:** PAF\_RES, PAF\_NON-RES, KET

**Valid Codes:** 0-9, A-Z

**Comments:**

## Key Event Tracking (KET) Variables

**Variable Name:** TechnicalCurr

**Question:**

EDUCATION: Technical / Vocational School

**Details:**

**Age Group:** TAY, Adult, Older Adult

**Type:** Text

**Format:** X

**Width:** 1

**Form Type:** PAF, KET

**CSV File Type:** PAF\_NON-RES, KET

**Valid Codes:** 1 = Yes (marked)

**Comments:**

Indicates whether the partner is CURRENTLY in this educational setting.

## Key Event Tracking (KET) Variables

**Variable Name:** WICodeStatus

**Question:**

LEGAL ISSUES / DESIGNATIONS: Dependent (W&I Code 300 Status) Information: Indicate new W & I Code 300 status

**Details:**

**Age Group:** Child, TAY

**Type:** Text

**Format:** X

**Width:** 1

**Form Type:** KET

**CSV File Type:** PAF\_NON-RES, KET

**Valid Codes:** 0 = Removed from W & I Code 300 status  
1 = Placed on W & I Code 300 status

**Comments:**

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## Quarterly Assessment Form (3M) Variables

**Variable Name:** AbuseServices

**Question:**

SUBSTANCE ABUSE: Is the partner CURRENTLY receiving substance abuse services?

**Details:**

**Age Group:** Child, TAY, Adult, Older Adult

**Type:** Text

**Format:** X

**Width:** 1

**Form Type:** PAF, 3M

**CSV File Type:** PAF\_NON-RES, 3M

**Valid Codes:** 0 = No  
1 = Yes

**Comments:**

## Quarterly Assessment Form (3M) Variables

**Variable Name:** ActiveProblem

**Question:**

SUBSTANCE ABUSE: In the opinion of the partnership service coordinator, does the partner CURRENTLY have a co-occurring mental illness and substance abuse problem?

**Details:**

**Age Group:** Child, TAY, Adult, Older Adult

**Type:** Text

**Format:** X

**Width:** 1

**Form Type:** PAF, 3M

**CSV File Type:** PAF\_NON-RES, 3M

**Valid Codes:** 0 = No  
1 = Yes

**Comments:**



## Quarterly Assessment Form (3M) Variables

**Variable Name:** Adopted

**Question:**

LEGAL ISSUES / DESIGNATIONS: Custody Information - Indicate the number of children the partner has who are CURRENTLY adopted out.

**Details:**

**Age Group:** Child, TAY, Adult, Older Adult

**Type:** Number

**Format:** XX

**Width:** 2

**Form Type:** PAF, 3M

**CSV File Type:** PAF\_NON-RES, 3M

**Valid Codes:** 0-99

**Comments:**

## Quarterly Assessment Form (3M) Variables

**Variable Name:** Age\_Group

**Question:**

Internal DCR Administrative field which indicates the age group the partner belonged to at the time the form was completed

**Details:**

**Age Group:** Child, TAY, Adult, Older Adult

**Type:** Number

**Format:** XX

**Width:** 2

**Form Type:** PAF, KET, 3M

**CSV File Type:** PAF\_RES, PAF\_NON-RES, KET, 3M

**Valid Codes:**

- 1 = Child PAF
- 2 = Child KET
- 3 = Child 3M
- 4 = TAY PAF
- 5 = TAY KET
- 6 = TAY 3M
- 7 = Adult PAF
- 8 = Adult KET
- 9 = Adult 3M
- 10 = Older Adult PAF
- 11 = Older Adult KET
- 12 = Older Adult 3M

**Comments:**

## Quarterly Assessment Form (3M) Variables

**Variable Name:** AnotherReason

**Question:**

EDUCATION: Is the partner CURRENTLY receiving special education due to another reason?

**Details:**

**Age Group:** Child, TAY

**Type:** Text

**Format:** X

**Width:** 1

**Form Type:** PAF, 3M

**CSV File Type:** PAF\_NON-RES, 3M

**Valid Codes:** 0 = No  
1 = Yes

**Comments:**

## Quarterly Assessment Form (3M) Variables

**Variable Name:** AssessmentDate

**Question:**

PARTNERSHIP INFORMATION: Date Completed - If the record is a PAF, the value for this field is the same as the Partnership Date

**Details:**

**Age Group:** Child, TAY, Adult, Older Adult

**Type:** Text

**Format:** mm/dd/yyyy

**Width:** 10

**Form Type:** PAF, KET, 3M

**CSV File Type:** PAF\_RES, PAF\_NON-RES, KET, 3M

**Valid Codes:** leading zeros

**Comments:**

## Quarterly Assessment Form (3M) Variables

**Variable Name:** AssessmentID

**Question:**

Internal DCR Administrative field for individually identifying each assessment

**Details:**

**Age Group:** Child, TAY, Adult, Older Adult

**Type:** Text

**Format:** XXXXX

**Width:** 5

**Form Type:** PAF, KET, 3M

**CSV File Type:** PAF\_RES, PAF\_NON-RES, KET, 3M

**Valid Codes:**

**Comments:**

## Quarterly Assessment Form (3M) Variables

**Variable Name:** AssessmentSource

**Question:**

Internal DCR Administrative field which indicates how the record was submitted/edited

**Details:**

**Age Group:** Child, TAY, Adult, Older Adult

**Type:** Number

**Format:** X

**Width:** 1

**Form Type:** PAF, KET, 3M

**CSV File Type:** PAF\_RES, PAF\_NON-RES, KET, 3M

**Valid Codes:** 1 = DCR Online System  
2 = XML Batch Upload  
3 = Legacy/DCR Interim System

**Comments:**

## Quarterly Assessment Form (3M) Variables

**Variable Name:** AssessmentType

**Question:**

Internal DCR Administrative field which indicates the form type from which the data were collected

**Details:**

**Age Group:** Child, TAY, Adult, Older Adult

**Type:** Text

**Format:** XXX

**Width:** 3

**Form Type:** PAF, KET, 3M

**CSV File Type:** PAF\_RES, PAF\_NON-RES, KET, 3M

**Valid Codes:** PAF = Partnership Assessment Form  
KET = Key Event Tracking form  
3M = Quarterly Assessment form

**Comments:**

## Quarterly Assessment Form (3M) Variables

**Variable Name:** AttendanceCurr

**Question:**

EDUCATION: Estimate the partner's attendance level (excluding scheduled breaks and excused absences) CURRENTLY:

**Details:**

**Age Group:** Child, TAY

**Type:** Text

**Format:** X

**Width:** 1

**Form Type:** PAF, 3M

**CSV File Type:** PAF\_NON-RES, 3M

**Valid Codes:** 1 = Always attends school (never truant)  
2 = Attends school most of the time  
3 = Sometimes attends school  
4 = Infrequently attends school  
5 = Never attends school

**Comments:**



## Quarterly Assessment Form (3M) Variables

**Variable Name:** Bathing

**Question:**

INDEX OF INDEPENDENT ACTIVITIES OF DAILY LIVING (ADL): Bathing - either sponge bath, tub bath or shower

**Details:**

**Age Group:** Older Adult

**Type:** Text

**Format:** X

**Width:** 1

**Form Type:** PAF, 3M

**CSV File Type:** PAF\_NON-RES, 3M

**Valid Codes:** 1 = Receives no assistance  
2 = Receives assistance in bathing only one part of the body  
3 = Receives assistance in bathing more than one part of the body (or not bathed)

**Comments:**

For this area of functioning, select the description that applies.

## Quarterly Assessment Form (3M) Variables

**Variable Name:** Caregivers\_Curr

**Question:**

SOURCES OF FINANCIAL SUPPORT: Caregiver's Wages

**Details:**

**Age Group:** Child, TAY

**Type:** Text

**Format:** X

**Width:** 1

**Form Type:** PAF, 3M

**CSV File Type:** PAF\_NON-RES, 3M

**Valid Codes:** 1 = Yes (marked)

**Comments:**

Indicates if the partner CURRENTLY receives this type of financial support

## Quarterly Assessment Form (3M) Variables

**Variable Name:** ChildSupport\_Curr

**Question:**

SOURCES OF FINANCIAL SUPPORT: Child Support

**Details:**

**Age Group:** Child, TAY

**Type:** Text

**Format:** X

**Width:** 1

**Form Type:** PAF, 3M

**CSV File Type:** PAF\_NON-RES, 3M

**Valid Codes:** 1 = Yes (marked)

**Comments:**

Indicates if the partner CURRENTLY receives this type of financial support

## Quarterly Assessment Form (3M) Variables

**Variable Name:** Contenance

**Question:**

INDEX OF INDEPENDENT ACTIVITIES OF DAILY LIVING (ADL): Contenance

**Details:**

**Age Group:** Older Adult

**Type:** Text

**Format:** X

**Width:** 1

**Form Type:** PAF, 3M

**CSV File Type:** PAF\_NON-RES, 3M

**Valid Codes:** 1 = Controls urination and bowel movement completely by self  
2 = Has occasional 'accidents'  
3 = Supervision helps keep urine or bowel control; catheter is used, or person is incontinent

**Comments:**

For this area of functioning, select the description that applies.

## Quarterly Assessment Form (3M) Variables

**Variable Name:** CountyFSPID

**Question:**

PARTNERSHIP INFORMATION: County Partner ID (Optional)

**Details:**

**Age Group:** Child, TAY, Adult, Older Adult

**Type:** Text

**Format:** XXXXXXXXXXXXXXXXX

**Width:** 15

**Form Type:** PAF, KET, 3M

**CSV File Type:** PAF\_RES, PAF\_NON-RES, KET, 3M

**Valid Codes:** 0-9, A-Z Right justify, use left leading zeros

**Comments:**

Optional internal county identifier.

## Quarterly Assessment Form (3M) Variables

**Variable Name:** CountyID

**Question:**

PARTNERSHIP INFORMATION: County (city submitting record)

**Details:**

**Age Group:** Child, TAY, Adult, Older Adult

**Type:** Text

**Format:** XX

**Width:** 2

**Form Type:** PAF, KET, 3M

**CSV File Type:** PAF\_RES, PAF\_NON-RES, KET, 3M

**Valid Codes:** 01 - 66, See Appendix A for codes

**Comments:**

NOTE: Should include leading zeros

## Quarterly Assessment Form (3M) Variables

**Variable Name:** CreatedDate

**Question:**

Internal DCR Administrative field that indicates the date when the record was submitted to the DCR.

**Details:**

**Age Group:** Child, TAY, Adult, Older Adult

**Type:** Text

**Format:** mm/dd/yyyy

**Width:** 10

**Form Type:** PAF, KET, 3M

**CSV File Type:** PAF\_RES, PAF\_NON-RES, KET, 3M

**Valid Codes:**

**Comments:**

## Quarterly Assessment Form (3M) Variables

**Variable Name:** CSIDateOfBirth

**Question:**

When available, this variable is populated using the DMH Client and Services Information System (CSI) when a valid CCN is provided to the DCR

**Details:**

**Age Group:** Child, TAY, Adult, Older Adult

**Type:** Text

**Format:** mm/dd/yyyy

**Width:** 10

**Form Type:** PAF, KET, 3M

**CSV File Type:** PAF\_RES, PAF\_NON-RES, KET, 3M

**Valid Codes:**

**Comments:**

Populated using the DMH Client and Services Information (CSI) System "date of birth" variable (if available) after a match is found between the CCN entered into the DCR and the CCN submitted to the CSI System.



## Quarterly Assessment Form (3M) Variables

**Variable Name:** CSHispanic

**Question:**

Is the client of Hispanic or Latino ethnicity? When available, this variable is obtained from the DMH Client and Services Information System (CSI) when a valid CCN is provided to the DCR.

**Details:**

**Age Group:** Child, TAY, Adult, Older Adult

**Type:** None

**Format:** X

**Width:** None

**Form Type:** PAF, KET, 3M

**CSV File Type:** PAF\_RES, PAF\_NON-RES, KET, 3M

**Valid Codes:** Y = Yes  
N = No  
U = Unknown/Not Reported

**Comments:**

Populated using the DMH Client and Services Information (CSI) System "Ethnicity" variable (if available) after a match is found between the CCN entered into the DCR and the CCN submitted to the CSI System. (Note: This field is currently not being populated from CSI.)

## Quarterly Assessment Form (3M) Variables

**Variable Name:** CSINumber

**Question:**

PARTNERSHIP INFORMATION: CSI County Client Number (CCN)

**Details:**

**Age Group:** Child, TAY, Adult, Older Adult

**Type:** Text

**Format:** XXXXXXXXX

**Width:** 9

**Form Type:** PAF, KET, 3M

**CSV File Type:** PAF\_RES, PAF\_NON-RES, KET, 3M

**Valid Codes:** 0-9, A-Z Right justify, use left leading zeros

**Comments:**

This is the same client identifier that is created by the county and submitted to the DMH Client and Services Information (CSI) System. Note: Should include leading zeros.

# FSP Data Dictionary

## Quarterly Assessment Form (3M) Variables

**Variable Name:** CSIRace1

**Question:**

When available, this variable is populated using the DMH Client and Services Information System (CSI) when a valid CCN is provided to the DCR

**Details:**

**Age Group:** Child, TAY, Adult, Older Adult

**Type:** None

**Format:** X

**Width:** None

**Form Type:** PAF, KET, 3M

**CSV File Type:** PAF\_RES, PAF\_NON-RES, KET, 3M

**Valid Codes:**

- 1 = White
- 2 = Hispanic
- 3 = Black
- 5 = American Native
- 7 = Filipino
- A = Amerasian
- C = Chinese
- H = Cambodian
- J = Japanese
- K = Korean
- M = Samoan
- N = Asian Indian
- P = Hawaiian Native
- R = Guamanian
- T = Laotian
- V = Vietnamese
- X = Multiple (only valid in subfield B)
- 4 = Other Asian or Pacific Islander
- 8 = Other
- 9 = Unknown / Not Reported

**Comments:**

Populated using the DMH Client and Services Information (CSI) System "Race1" variable (if available) after a match is found between the CCN entered into the DCR and the CCN submitted to the CSI System.

# FSP Data Dictionary

## Quarterly Assessment Form (3M) Variables

**Variable Name:** CSIRace2

**Question:**

When available, this variable is populated using the DMH Client and Services Information System (CSI) when a valid CCN is provided to the DCR

**Details:**

**Age Group:** Child, TAY, Adult, Older Adult

**Type:** None

**Format:** X

**Width:** None

**Form Type:** PAF, KET, 3M

**CSV File Type:** PAF\_RES, PAF\_NON-RES, KET, 3M

**Valid Codes:**

- 1 = White
- 2 = Hispanic
- 3 = Black
- 5 = American Native
- 7 = Filipino
- A = Amerasian
- C = Chinese
- H = Cambodian
- J = Japanese
- K = Korean
- M = Samoan
- N = Asian Indian
- P = Hawaiian Native
- R = Guamanian
- T = Laotian
- V = Vietnamese
- X = Multiple (only valid in subfield B)
- 4 = Other Asian or Pacific Islander
- 8 = Other
- 9 = Unknown / Not Reported

**Comments:**

Populated using the DMH Client and Services Information (CSI) System "Race2" variable (if available) after a match is found between the CCN entered into the DCR and the CCN submitted to the CSI System.

# FSP Data Dictionary

## Quarterly Assessment Form (3M) Variables

**Variable Name:** CSIRace3

**Question:**

When available, this variable is populated using the DMH Client and Services Information System (CSI) when a valid CCN is provided to the DCR

**Details:**

**Age Group:** Child, TAY, Adult, Older Adult

**Type:** None

**Format:** X

**Width:** None

**Form Type:** PAF, KET, 3M

**CSV File Type:** PAF\_RES, PAF\_NON-RES, KET, 3M

**Valid Codes:** 1 = White  
2 = Hispanic  
3 = Black  
5 = American Native  
7 = Filipino  
A = Amerasian  
C = Chinese  
H = Cambodian  
J = Japanese  
K = Korean  
M = Samoan  
N = Asian Indian  
P = Hawaiian Native  
R = Guamanian  
T = Laotian  
V = Vietnamese  
X = Multiple (only valid in subfield B)  
4 = Other Asian or Pacific Islander  
8 = Other  
9 = Unknown / Not Reported

**Comments:**

Populated using the DMH Client and Services Information (CSI) System "Race3" variable (if available) after a match is found between the CCN entered into the DCR and the CCN submitted to the CSI System.

# FSP Data Dictionary

## Quarterly Assessment Form (3M) Variables

**Variable Name:** CSIRace4

**Question:**

When available, this variable is populated using the DMH Client and Services Information System (CSI) when a valid CCN is provided to the DCR

**Details:**

**Age Group:** Child, TAY, Adult, Older Adult

**Type:** None

**Format:** X

**Width:** None

**Form Type:** PAF, KET, 3M

**CSV File Type:** PAF\_RES, PAF\_NON-RES, KET, 3M

**Valid Codes:**

- 1 = White
- 2 = Hispanic
- 3 = Black
- 5 = American Native
- 7 = Filipino
- A = Amerasian
- C = Chinese
- H = Cambodian
- J = Japanese
- K = Korean
- M = Samoan
- N = Asian Indian
- P = Hawaiian Native
- R = Guamanian
- T = Laotian
- V = Vietnamese
- X = Multiple (only valid in subfield B)
- 4 = Other Asian or Pacific Islander
- 8 = Other
- 9 = Unknown / Not Reported

**Comments:**

Populated using the DMH Client and Services Information (CSI) System "Race4" variable (if available) after a match is found between the CCN entered into the DCR and the CCN submitted to the CSI System.

# FSP Data Dictionary

## Quarterly Assessment Form (3M) Variables

**Variable Name:** CSIRace5

**Question:**

When available, this variable is populated using the DMH Client and Services Information System (CSI) when a valid CCN is provided to the DCR

**Details:**

**Age Group:** Child, TAY, Adult, Older Adult

**Type:** None

**Format:** X

**Width:** None

**Form Type:** PAF, KET, 3M

**CSV File Type:** PAF\_RES, PAF\_NON-RES, KET, 3M

**Valid Codes:**

- 1 = White
- 2 = Hispanic
- 3 = Black
- 5 = American Native
- 7 = Filipino
- A = Amerasian
- C = Chinese
- H = Cambodian
- J = Japanese
- K = Korean
- M = Samoan
- N = Asian Indian
- P = Hawaiian Native
- R = Guamanian
- T = Laotian
- V = Vietnamese
- X = Multiple (only valid in subfield B)
- 4 = Other Asian or Pacific Islander
- 8 = Other
- 9 = Unknown / Not Reported

**Comments:**

Populated using the DMH Client and Services Information (CSI) System "Race5" variable (if available) after a match is found between the CCN entered into the DCR and the CCN submitted to the CSI System.

## Quarterly Assessment Form (3M) Variables

**Variable Name:** DateOfBirth

**Question:**

PARTNERSHIP INFORMATION: Partner's Date of Birth

**Details:**

**Age Group:** Child, TAY, Adult, Older Adult

**Type:** Text

**Format:** mm/dd/yyyy

**Width:** 10

**Form Type:** PAF, KET, 3M

**CSV File Type:** PAF\_RES, PAF\_NON-RES, KET, 3M

**Valid Codes:** leading zeros

**Comments:**



## Quarterly Assessment Form (3M) Variables

**Variable Name:** DatePartnershipStatusChange

**Question:**

Internal DCR administrative field. Indicates the date that Partnership Status changed.

**Details:**

**Age Group:** Child, TAY, Adult, Older Adult

**Type:** Text

**Format:** mm/dd/yyyy

**Width:** 10

**Form Type:** PAF, KET, 3M

**CSV File Type:** PAF\_RES, PAF\_NON-RES, KET, 3M

**Valid Codes:** leading zeros

**Comments:**

## Quarterly Assessment Form (3M) Variables

**Variable Name:** Dependent

**Question:**

LEGAL ISSUES / DESIGNATIONS: Custody Information - Indicates the number of children the partner has who are CURRENTLY placed on W&I Code 300 status (dependent of the court).

**Details:**

**Age Group:** Child, TAY, Adult, Older Adult

**Type:** Number

**Format:** XX

**Width:** 2

**Form Type:** PAF, 3M

**CSV File Type:** PAF\_NON-RES, 3M

**Valid Codes:** 0-99

**Comments:**

## Quarterly Assessment Form (3M) Variables

**Variable Name:** Dressing

**Question:**

INDEX OF INDEPENDENT ACTIVITIES OF DAILY LIVING (ADL): Dressing - gets clothes from closets and drawers, including underclothes, outer garments and uses fasteners (including braces, if worn)

**Details:**

**Age Group:** Older Adult

**Type:** Text

**Format:** X

**Width:** 1

**Form Type:** PAF, 3M

**CSV File Type:** PAF\_NON-RES, 3M

**Valid Codes:** 1 = Gets clothes and gets completely dressed without assistance  
2 = Gets clothes and gets dressed without assistance, except for assistance in tying shoes  
3 = Receives assistance in getting clothes or in getting dressed, or stays partly or completely undressed

**Comments:**

For this area of functioning, select the description that applies.

## Quarterly Assessment Form (3M) Variables

**Variable Name:** EmotionalDisturbance

**Question:**

EDUCATION: Is the partner CURRENTLY receiving special education due to serious emotional disturbance?

**Details:**

**Age Group:** Child, TAY

**Type:** Text

**Format:** X

**Width:** 1

**Form Type:** PAF, 3M

**CSV File Type:** PAF\_NON-RES, 3M

**Valid Codes:** 0 = No  
1 = Yes

**Comments:**

## Quarterly Assessment Form (3M) Variables

**Variable Name:** Ethnicity\_A

**Question:**

When available, this variable is populated using the DMH Client and Services Information System (CSI) when a valid CCN is provided to the DCR

**Details:**

**Age Group:** Child, TAY, Adult, Older Adult

**Type:** Text

**Format:** X

**Width:** 1

**Form Type:** PAF, KET, 3M

**CSV File Type:** PAF\_RES, PAF\_NON-RES, KET, 3M

**Valid Codes:** 1 = White  
2 = Hispanic  
3 = Black  
5 = American Native  
7 = Filipino  
A = Amerasian  
C = Chinese  
H = Cambodian  
J = Japanese  
K = Korean  
M = Samoan  
N = Asian Indian  
P = Hawaiian Native  
R = Guamanian  
T = Laotian  
V = Vietnamese  
X = Multiple (only valid in subfield B)  
4 = Other Asian or Pacific Islander  
8 = Other  
9 = Unknown / Not Reported

**Comments:**

Populated using the DMH Client and Services Information (CSI) System "Ethnicity\_A" variable (if available) after a match is found between the CCN entered into the DCR and the CCN submitted to the CSI System.

# FSP Data Dictionary

## Quarterly Assessment Form (3M) Variables

**Variable Name:** Ethnicity\_B

**Question:**

When available, this variable is populated using the DMH Client and Services Information System (CSI) when a valid CCN is provided to the DCR

**Details:**

**Age Group:** Child, TAY, Adult, Older Adult

**Type:** Text

**Format:** X

**Width:** 1

**Form Type:** PAF, KET, 3M

**CSV File Type:** PAF\_RES, PAF\_NON-RES, KET, 3M

**Valid Codes:** 1 = White  
2 = Hispanic  
3 = Black  
5 = American Native  
7 = Filipino  
A = Amerasian  
C = Chinese  
H = Cambodian  
J = Japanese  
K = Korean  
M = Samoan  
N = Asian Indian  
P = Hawaiian Native  
R = Guamanian  
T = Laotian  
V = Vietnamese  
X = Multiple (only valid in subfield B)  
4 = Other Asian or Pacific Islander  
8 = Other  
9 = Unknown / Not Reported

**Comments:**

Populated using the DMH Client and Services Information (CSI) System "Ethnicity\_B" variable (if available) after a match is found between the CCN entered into the DCR and the CCN submitted to the CSI System.

## Quarterly Assessment Form (3M) Variables

**Variable Name:** Feeding

**Question:**

INDEX OF INDEPENDENT ACTIVITIES OF DAILY LIVING (ADL): Feeding

**Details:**

**Age Group:** Older Adult

**Type:** Text

**Format:** X

**Width:** 1

**Form Type:** PAF, 3M

**CSV File Type:** PAF\_NON-RES, 3M

**Valid Codes:** 1 = Feeds self without assistance  
2 = Feeds self except for getting assistance in cutting meat or buttering bread  
3 = Receives assistance in feeding or is fed partly or completely by using tubes or I.V. fluids

**Comments:**

For this area of functioning, select the description that applies.

## Quarterly Assessment Form (3M) Variables

**Variable Name:** FoodStamps\_Curr

**Question:**

SOURCES OF FINANCIAL SUPPORT: Food Stamps

**Details:**

**Age Group:** Child, TAY, Adult, Older Adult

**Type:** Text

**Format:** X

**Width:** 1

**Form Type:** PAF, 3M

**CSV File Type:** PAF\_NON-RES, 3M

**Valid Codes:** 1 = Yes (marked)

**Comments:**

Indicates if the partner CURRENTLY receives this type of financial support



## Quarterly Assessment Form (3M) Variables

**Variable Name:** Foster

**Question:**

LEGAL ISSUES / DESIGNATIONS: Custody Information - Indicates the number of children the partner has who are CURRENTLY placed in foster care.

**Details:**

**Age Group:** Child, TAY, Adult, Older Adult

**Type:** Number

**Format:** XX

**Width:** 2

**Form Type:** PAF, 3M

**CSV File Type:** PAF\_NON-RES, 3M

**Valid Codes:** 0-99

**Comments:**

## Quarterly Assessment Form (3M) Variables

**Variable Name:** Gender

**Question:**

When available, this variable is populated using the DMH Client and Services Information System (CSI) when a valid CCN is provided to the DCR

**Details:**

**Age Group:** Child, TAY, Adult, Older Adult

**Type:** Text

**Format:** X

**Width:** 1

**Form Type:** PAF, KET, 3M

**CSV File Type:** PAF\_RES, PAF\_NON-RES, KET, 3M

**Valid Codes:** M = Male  
F = Female  
O = Other  
U = Unknown

**Comments:**

Populated using the DMH Client and Services Information (CSI) System "gender" variable (if available) after a match is found between the CCN entered into the DCR and the CCN submitted to the CSI System.

## Quarterly Assessment Form (3M) Variables

**Variable Name:** General\_Curr

**Question:**

SOURCES OF FINANCIAL SUPPORT: General Relief / General Assistance

**Details:**

**Age Group:** Child, TAY, Adult, Older Adult

**Type:** Text

**Format:** X

**Width:** 1

**Form Type:** PAF, 3M

**CSV File Type:** PAF\_NON-RES, 3M

**Valid Codes:** 1 = Yes (marked)

**Comments:**

Indicates if the partner CURRENTLY receives this type of financial support

## Quarterly Assessment Form (3M) Variables

**Variable Name:** GlobalID

**Question:**

Internal DCR Client Identifier (for linking assessments)

**Details:**

**Age Group:** Child, TAY, Adult, Older Adult

**Type:** Text

**Format:** XX

**Width:** 36

**Form Type:** PAF, KET, 3M

**CSV File Type:** PAF\_RES, PAF\_NON-RES, KET, 3M

**Valid Codes:**

**Comments:**

DCR Client Identifier for linking assessments across different forms (can be useful when the CSI Number is missing).

## Quarterly Assessment Form (3M) Variables

**Variable Name:** GradesCurr

**Question:**

EDUCATION: CURRENTLY, his/her grades are:

**Details:**

**Age Group:** Child, TAY

**Type:** Text

**Format:** X

**Width:** 1

**Form Type:** PAF, 3M

**CSV File Type:** PAF\_NON-RES, 3M

**Valid Codes:** 1 = Very Good  
2 = Good  
3 = Average  
4 = Below Average  
5 = Poor

**Comments:**

## Quarterly Assessment Form (3M) Variables

**Variable Name:** Groceries

**Question:**

INSTRUMENTAL ACTIVITIES OF DAILY LIVING (IADL): Can the partner go shopping for groceries?

**Details:**

**Age Group:** Older Adult

**Type:** Text

**Format:** X

**Width:** 1

**Form Type:** PAF, 3M

**CSV File Type:** PAF\_NON-RES, 3M

**Valid Codes:** 1 = Without Help  
2 = With Some Help  
3 = Completely Unable to Do

**Comments:**

For this area of functioning, select the description that applies.

## Quarterly Assessment Form (3M) Variables

**Variable Name:** Handyman

**Question:**

INSTRUMENTAL ACTIVITIES OF DAILY LIVING (IADL): Can the partner do his/her own handyman work?

**Details:**

**Age Group:** Older Adult

**Type:** Text

**Format:** X

**Width:** 1

**Form Type:** PAF, 3M

**CSV File Type:** PAF\_NON-RES, 3M

**Valid Codes:** 1 = Without Help  
2 = With Some Help  
3 = Completely Unable to Do

**Comments:**

For this area of functioning, select the description that applies.

## Quarterly Assessment Form (3M) Variables

**Variable Name:** HouseConfinement

**Question:**

INDEX OF INDEPENDENT ACTIVITIES OF DAILY LIVING (ADL): House-Confinement

**Details:**

**Age Group:** Older Adult

**Type:** Text

**Format:** X

**Width:** 1

**Form Type:** PAF, 3M

**CSV File Type:** PAF\_NON-RES, 3M

**Valid Codes:** 1 = Has been outside of residence on 3 or more days during the past 2 weeks  
2 = Has been outside of residence on only 1 or 2 days during the past 2 weeks  
3 = Has not been outside of residence in past 2 weeks

**Comments:**

For this area of functioning, select the description that applies.



## Quarterly Assessment Form (3M) Variables

**Variable Name:** Housework

**Question:**

INSTRUMENTAL ACTIVITIES OF DAILY LIVING (IADL): Can the partner do his/her own housework?

**Details:**

**Age Group:** Older Adult

**Type:** Text

**Format:** X

**Width:** 1

**Form Type:** PAF, 3M

**CSV File Type:** PAF\_NON-RES, 3M

**Valid Codes:** 1 = Without Help  
2 = With Some Help  
3 = Completely Unable to Do

**Comments:**

For this area of functioning, select the description that applies.

## Quarterly Assessment Form (3M) Variables

**Variable Name:** Housing\_Curr

**Question:**

SOURCES OF FINANCIAL SUPPORT: Housing Subsidy

**Details:**

**Age Group:** Child, TAY, Adult, Older Adult

**Type:** Text

**Format:** X

**Width:** 1

**Form Type:** PAF, 3M

**CSV File Type:** PAF\_NON-RES, 3M

**Valid Codes:** 1 = Yes (marked)

**Comments:**

Indicates if the partner CURRENTLY receives this type of financial support

## Quarterly Assessment Form (3M) Variables

**Variable Name:** Laundry

**Question:**

INSTRUMENTAL ACTIVITIES OF DAILY LIVING (IADL): Can the partner do his/her own laundry?

**Details:**

**Age Group:** Older Adult

**Type:** Text

**Format:** X

**Width:** 1

**Form Type:** PAF, 3M

**CSV File Type:** PAF\_NON-RES, 3M

**Valid Codes:** 1 = Without Help  
2 = With Some Help  
3 = Completely Unable to Do

**Comments:**

For this area of functioning, select the description that applies.

## Quarterly Assessment Form (3M) Variables

**Variable Name:** Loan\_Curr

**Question:**

SOURCES OF FINANCIAL SUPPORT: Loans / Credit

**Details:**

**Age Group:** Child, TAY, Adult, Older Adult

**Type:** Text

**Format:** X

**Width:** 1

**Form Type:** PAF, 3M

**CSV File Type:** PAF\_NON-RES, 3M

**Valid Codes:** 1 = Yes (marked)

**Comments:**

Indicates if the partner CURRENTLY receives this type of financial support

## Quarterly Assessment Form (3M) Variables

**Variable Name:** Meals

**Question:**

INSTRUMENTAL ACTIVITIES OF DAILY LIVING (IADL): Can the partner prepare his/her own meals?

**Details:**

**Age Group:** Older Adult

**Type:** Text

**Format:** X

**Width:** 1

**Form Type:** PAF, 3M

**CSV File Type:** PAF\_NON-RES, 3M

**Valid Codes:** 1 = Without Help  
2 = With Some Help  
3 = Completely Unable to Do

**Comments:**

For this area of functioning, select the description that applies.

## Quarterly Assessment Form (3M) Variables

**Variable Name:** Medication

**Question:**

INSTRUMENTAL ACTIVITIES OF DAILY LIVING (IADL): If the partner takes medication (or if the partner had to take medication) could she/he take it on his/her own?

**Details:**

**Age Group:** Older Adult

**Type:** Text

**Format:** X

**Width:** 1

**Form Type:** PAF, 3M

**CSV File Type:** PAF\_NON-RES, 3M

**Valid Codes:** 1 = Without Help  
2 = With Some Help  
3 = Completely Unable to Do

**Comments:**

For this area of functioning, select the description that applies.

## Quarterly Assessment Form (3M) Variables

**Variable Name:** Money

**Question:**

INSTRUMENTAL ACTIVITIES OF DAILY LIVING (IADL): Can the partner manage his/her own money?

**Details:**

**Age Group:** Older Adult

**Type:** Text

**Format:** X

**Width:** 1

**Form Type:** PAF, 3M

**CSV File Type:** PAF\_NON-RES, 3M

**Valid Codes:** 1 = Without Help  
2 = With Some Help  
3 = Completely Unable to Do

**Comments:**

For this area of functioning, select the description that applies.

## Quarterly Assessment Form (3M) Variables

**Variable Name:** Name

**Question:**

PARTNERSHIP INFORMATION: Partner's last name, Partner's first name

**Details:**

**Age Group:** Child, TAY, Adult, Older Adult

**Type:** Text

**Format:** LastName, FirstName

**Width:** 25,25

**Form Type:** PAF, KET, 3M

**CSV File Type:** PAF\_RES, PAF\_NON-RES, KET, 3M

**Valid Codes:**

**Comments:**



## Quarterly Assessment Form (3M) Variables

**Variable Name:** NoSupport\_Curr

**Question:**

SOURCES OF FINANCIAL SUPPORT: No financial support

**Details:**

**Age Group:** Child, TAY, Adult, Older Adult

**Type:** Text

**Format:** X

**Width:** 1

**Form Type:** PAF, 3M

**CSV File Type:** PAF\_NON-RES, 3M

**Valid Codes:** 1 = Yes (marked)

**Comments:**

Indicates the partner CURRENTLY receives no financial support

## Quarterly Assessment Form (3M) Variables

**Variable Name:** OtherFamily\_Curr

**Question:**

SOURCES OF FINANCIAL SUPPORT: Other family member / friends

**Details:**

**Age Group:** Child, TAY, Adult, Older Adult

**Type:** Text

**Format:** X

**Width:** 1

**Form Type:** PAF, 3M

**CSV File Type:** PAF\_NON-RES, 3M

**Valid Codes:** 1 = Yes (marked)

**Comments:**

Indicates if the partner CURRENTLY receives this type of financial support

## Quarterly Assessment Form (3M) Variables

**Variable Name:** OtherSupport\_Curr

**Question:**

SOURCES OF FINANCIAL SUPPORT: Other

**Details:**

**Age Group:** Child, TAY, Adult, Older Adult

**Type:** Text

**Format:** X

**Width:** 1

**Form Type:** PAF, 3M

**CSV File Type:** PAF\_NON-RES, 3M

**Valid Codes:** 1 = Yes (marked)

**Comments:**

Indicates if the partner CURRENTLY receives this type of financial support

## Quarterly Assessment Form (3M) Variables

**Variable Name:** PartnershipDate

**Question:**

PARTNERSHIP INFORMATION: Partnership Date (date when the Partnership was established)

**Details:**

**Age Group:** Child, TAY, Adult, Older Adult

**Type:** Text

**Format:** mm/dd/yyyy

**Width:** 10

**Form Type:** PAF, KET, 3M

**CSV File Type:** PAF\_RES, PAF\_NON-RES, KET, 3M

**Valid Codes:** leading zeros

**Comments:**

## Quarterly Assessment Form (3M) Variables

**Variable Name:** PartnershipStatus

**Question:**

Internal DCR administrative field. Indicates the current Partnership Status

**Details:**

**Age Group:** Child, TAY, Adult, Older Adult

**Type:** Number

**Format:** X

**Width:** 1

**Form Type:** PAF, KET, 3M

**CSV File Type:** PAF\_RES, PAF\_NON-RES, KET, 3M

**Valid Codes:** 0 = Inactive  
1 = Active  
3 = PFR (Partners who are reactivated after 1 year)

**Comments:**

0 = Inactive Partner - Services interrupted / discontinued, 1 = Active Partner, 3 = PAF Renewal (PFR) Identifies an older, historical, PAF for a partner who was discontinued or had an interruption in their partnership and was reestablished after a year or longer.

## Quarterly Assessment Form (3M) Variables

**Variable Name:** PhysicianCurr

**Question:**

HEALTH STATUS: Does the partner have a primary care physician CURRENTLY?

**Details:**

**Age Group:** Child, TAY, Adult, Older Adult

**Type:** Text

**Format:** X

**Width:** 1

**Form Type:** PAF, 3M

**CSV File Type:** PAF\_NON-RES, 3M

**Valid Codes:** 0 = No  
1 = Yes

**Comments:**

## Quarterly Assessment Form (3M) Variables

**Variable Name:** QtrlyCntyUse1

**Question:**

COUNTY USE QUESTIONS: Quarterly County Use Field # 1

**Details:**

**Age Group:** Child, TAY, Adult, Older Adult

**Type:** Text

**Format:** XXXXXXXXXXXXXXXXX

**Width:** 15

**Form Type:** PAF, 3M

**CSV File Type:** PAF\_NON-RES, 3M

**Valid Codes:**

**Comments:**

## Quarterly Assessment Form (3M) Variables

**Variable Name:** QtrlyCntyUse2

**Question:**

COUNTY USE QUESTIONS: Quarterly County Use Field # 2

**Details:**

**Age Group:** Child, TAY, Adult, Older Adult

**Type:** Text

**Format:** XXXXXXXXXXXXXXXXX

**Width:** 15

**Form Type:** PAF, 3M

**CSV File Type:** PAF\_NON-RES, 3M

**Valid Codes:**

**Comments:**



## Quarterly Assessment Form (3M) Variables

**Variable Name:** QtrlyCntyUse3

**Question:**

COUNTY USE QUESTIONS: Quarterly County Use Field # 3

**Details:**

**Age Group:** Child, TAY, Adult, Older Adult

**Type:** Text

**Format:** XXXXXXXXXXXXXXXXX

**Width:** 15

**Form Type:** PAF, 3M

**CSV File Type:** PAF\_NON-RES, 3M

**Valid Codes:**

**Comments:**

## Quarterly Assessment Form (3M) Variables

**Variable Name:** Retirement\_Curr

**Question:**

SOURCES OF FINANCIAL SUPPORT: Retirement / Social Security Income

**Details:**

**Age Group:** Child, TAY, Adult, Older Adult

**Type:** Text

**Format:** X

**Width:** 1

**Form Type:** PAF, 3M

**CSV File Type:** PAF\_NON-RES, 3M

**Valid Codes:** 1 = Yes (marked)

**Comments:**

Indicates if the partner CURRENTLY receives this type of financial support

## Quarterly Assessment Form (3M) Variables

**Variable Name:** Reunified

**Question:**

LEGAL ISSUES / DESIGNATIONS: Custody Information: Indicates the number of children the partner has who are CURRENTLY legally reunified with the partner.

**Details:**

**Age Group:** Child, TAY, Adult, Older Adult

**Type:** Number

**Format:** XX

**Width:** 2

**Form Type:** PAF, 3M

**CSV File Type:** PAF\_NON-RES, 3M

**Valid Codes:** 0-99

**Comments:**

## Quarterly Assessment Form (3M) Variables

**Variable Name:** Savings\_Curr

**Question:**

SOURCES OF FINANCIAL SUPPORT: Savings

**Details:**

**Age Group:** Child, TAY, Adult, Older Adult

**Type:** Text

**Format:** X

**Width:** 1

**Form Type:** PAF, 3M

**CSV File Type:** PAF\_NON-RES, 3M

**Valid Codes:** 1 = Yes (marked)

**Comments:**

Indicates if the partner CURRENTLY receives this type of financial support

## Quarterly Assessment Form (3M) Variables

**Variable Name:** SDI\_Curr

**Question:**

SOURCES OF FINANCIAL SUPPORT: State Disability Insurance (SDI)

**Details:**

**Age Group:** Child, TAY, Adult, Older Adult

**Type:** Text

**Format:** X

**Width:** 1

**Form Type:** PAF, 3M

**CSV File Type:** PAF\_NON-RES, 3M

**Valid Codes:** 1 = Yes (marked)

**Comments:**

Indicates if the partner CURRENTLY receives this type of financial support

## Quarterly Assessment Form (3M) Variables

**Variable Name:** Spouse\_Curr

**Question:**

SOURCES OF FINANCIAL SUPPORT: Partner's Spouse / Significant Other's wages

**Details:**

**Age Group:** Child, TAY, Adult, Older Adult

**Type:** Text

**Format:** X

**Width:** 1

**Form Type:** PAF, 3M

**CSV File Type:** PAF\_NON-RES, 3M

**Valid Codes:** 1 = Yes (marked)

**Comments:**

Indicates if the partner CURRENTLY receives this type of financial support

## Quarterly Assessment Form (3M) Variables

**Variable Name:** SSDI\_Curr

**Question:**

SOURCES OF FINANCIAL SUPPORT: Social Security Disability Insurance (SSDI)

**Details:**

**Age Group:** Child, TAY, Adult, Older Adult

**Type:** Text

**Format:** X

**Width:** 1

**Form Type:** PAF, 3M

**CSV File Type:** PAF\_NON-RES, 3M

**Valid Codes:** 1 = Yes (marked)

**Comments:**

Indicates if the partner CURRENTLY receives this type of financial support

## Quarterly Assessment Form (3M) Variables

**Variable Name:** SSI\_Curr

**Question:**

SOURCES OF FINANCIAL SUPPORT: Supplemental Security Income / State Supplementary Payment (SSI / SSP) Program

**Details:**

**Age Group:** Child, TAY, Adult, Older Adult

**Type:** Text

**Format:** X

**Width:** 1

**Form Type:** PAF, 3M

**CSV File Type:** PAF\_NON-RES, 3M

**Valid Codes:** 1 = Yes (marked)

**Comments:**

Indicates if the partner CURRENTLY receives this type of financial support



## Quarterly Assessment Form (3M) Variables

**Variable Name:** TANF\_Curr

**Question:**

SOURCES OF FINANCIAL SUPPORT: Temporary Assistance for needy families (TANF)

**Details:**

**Age Group:** Child, TAY, Adult, Older Adult

**Type:** Text

**Format:** X

**Width:** 1

**Form Type:** PAF, 3M

**CSV File Type:** PAF\_NON-RES, 3M

**Valid Codes:** 1 = Yes (marked)

**Comments:**

Indicates if the partner CURRENTLY receives this type of financial support

## Quarterly Assessment Form (3M) Variables

**Variable Name:** Telephone

**Question:**

INSTRUMENTAL ACTIVITIES OF DAILY LIVING (IADL): Can the partner use the telephone?

**Details:**

**Age Group:** Older Adult

**Type:** Text

**Format:** X

**Width:** 1

**Form Type:** PAF, 3M

**CSV File Type:** PAF\_NON-RES, 3M

**Valid Codes:** 1 = Without Help  
2 = With Some Help  
3 = Completely Unable to Do

**Comments:**

For this area of functioning, select the description that applies.

## Quarterly Assessment Form (3M) Variables

**Variable Name:** Toileting

**Question:**

INDEX OF INDEPENDENT ACTIVITIES OF DAILY LIVING (ADL): Toileting

**Details:**

**Age Group:** Older Adult

**Type:** Text

**Format:** X

**Width:** 1

**Form Type:** PAF, 3M

**CSV File Type:** PAF\_NON-RES, 3M

**Valid Codes:** 1 = Goes to 'toilet room,' cleans self, and arranges clothes without assistance  
2 = Receives assistance in going to the 'toilet room' or in cleansing self or in arranging clothes after elimination or in use of night bedpan or commode  
3 = Doesn't go to room termed 'toilet' for the elimination process

**Comments:**

For this area of functioning, select the description that applies.

## Quarterly Assessment Form (3M) Variables

**Variable Name:** Transfer

**Question:**

INDEX OF INDEPENDENT ACTIVITIES OF DAILY LIVING (ADL): Transfer

**Details:**

**Age Group:** Older Adult

**Type:** Text

**Format:** X

**Width:** 1

**Form Type:** PAF, 3M

**CSV File Type:** PAF\_NON-RES, 3M

**Valid Codes:** 1 = Moves in and out of bed as well as in and out of chair without assistance  
2 = Moves in and out of bed or chair with assistance  
3 = Doesn't get out of bed

**Comments:**

For this area of functioning, select the description that applies.

## Quarterly Assessment Form (3M) Variables

**Variable Name:** TribalBenefits\_Curr

**Question:**

SOURCES OF FINANCIAL SUPPORT: American Indian Tribal Benefits (e.g., per capita, revenue sharing, trust disbursements)

**Details:**

**Age Group:** Child, TAY, Adult, Older Adult

**Type:** Text

**Format:** X

**Width:** 1

**Form Type:** PAF, 3M

**CSV File Type:** PAF\_NON-RES, 3M

**Valid Codes:** 1 = Yes (marked)

**Comments:**

Indicates if the partner CURRENTLY receives this type of financial support

## Quarterly Assessment Form (3M) Variables

**Variable Name:** Veterans\_Curr

**Question:**

SOURCES OF FINANCIAL SUPPORT: Veterans Assistance Benefits

**Details:**

**Age Group:** Child, TAY, Adult, Older Adult

**Type:** Text

**Format:** X

**Width:** 1

**Form Type:** PAF, 3M

**CSV File Type:** PAF\_NON-RES, 3M

**Valid Codes:** 1 = Yes (marked)

**Comments:**

Indicates if the partner CURRENTLY receives this type of financial support

## Quarterly Assessment Form (3M) Variables

**Variable Name:** Wages\_Curr

**Question:**

SOURCES OF FINANCIAL SUPPORT: Partner's Wages

**Details:**

**Age Group:** Child, TAY, Adult, Older Adult

**Type:** Text

**Format:** X

**Width:** 1

**Form Type:** PAF, 3M

**CSV File Type:** PAF\_NON-RES, 3M

**Valid Codes:** 1 = Yes (marked)

**Comments:**

Indicate if the partner CURRENTLY receives this type of financial support

## Quarterly Assessment Form (3M) Variables

**Variable Name:** Walking

**Question:**

INDEX OF INDEPENDENT ACTIVITIES OF DAILY LIVING (ADL): Walking

**Details:**

**Age Group:** Older Adult

**Type:** Text

**Format:** X

**Width:** 1

**Form Type:** PAF, 3M

**CSV File Type:** PAF\_NON-RES, 3M

**Valid Codes:**

- 1 = Walks on level without assistance
- 2 = Walks without assistance but uses single, straight cane
- 3 = Walks without assistance but uses two points for mechanical support such as crutches, a walker or two canes (or wears a brace)
- 4 = Walks with assistance
- 5 = Uses wheelchair only
- 6 = Not walking or using wheelchair

**Comments:**

For this area of functioning, select the description that applies.



## Quarterly Assessment Form (3M) Variables

**Variable Name:** WalkingDistance

**Question:**

INSTRUMENTAL ACTIVITIES OF DAILY LIVING (IADL): Can the partner get to places out of walking distance?

**Details:**

**Age Group:** Older Adult

**Type:** Text

**Format:** X

**Width:** 1

**Form Type:** PAF, 3M

**CSV File Type:** PAF\_NON-RES, 3M

**Valid Codes:** 1 = Without Help  
2 = With Some Help  
3 = Completely Unable to Do

**Comments:**

For this area of functioning, select the description that applies.

# Appendix A: County Codes

Code	Name
01	Alameda
02	Alpine
03	Amador
04	Butte
05	Calaveras
06	Colusa
07	Contra Costa
08	Del Norte
09	El Dorado
10	Fresno
11	Glenn
12	Humboldt
13	Imperial
14	Inyo
15	Kern
16	Kings
17	Lake
18	Lassen
19	Los Angeles
20	Madera
21	Marin
22	Mariposa
23	Mendocino
24	Merced
25	Modoc
26	Mono
27	Monterey
28	Napa
29	Nevada
30	Orange

Code	Name
31	Placer
32	Plumas
33	Riverside
34	Sacramento
35	San Benito
36	San Bernardino
37	San Diego
38	San Francisco
39	San Joaquin
40	San Luis Obispo
41	San Mateo
42	Santa Barbara
43	Santa Clara
44	Santa Cruz
45	Shasta
46	Sierra
47	Siskiyou
48	Solano
49	Sonoma
50	Stanislaus
52	Tehama
53	Trinity
54	Tulare
55	Tuolumne
56	Ventura
57	Yolo
63	Sutter/Yuba
65	Berkeley City
66	Tri-City

# Appendix B: Explanation of Data File Export Format

## ***XML Formatting***

Counties using their own technology to collect information must send the Full Service Partnership data to the State via the DMH-provided XML Schema which will be published at a later date

### **CCN**

*Consumer 1* and *Consumer 3* have county client numbers which are seven and eight characters wide instead of the nine characters allocated in the Data Dictionary (county client number widths vary across counties). Notice that the field values are right-justified with leading zero's added to fill vacant columns in CCN's with less than 9 characters.

### **DOB**

Notice for *Consumer 1* and *Consumer 3* the date values in the Date of Birth columns (positions 10-17) are in the MMDDYYYY format, have leading zeros, and do *not* include placeholders. For example, for *Consumer 1* notice that columns numbered 10 and 11 (which indicate month) and columns numbered 12 and 13 (which indicate day) each have a leading zero. *Consumer 3* has an estimated year of birth and zeros for month and day of birth. This conforms to the CSI requirements regarding missing date of birth information.

When the complete date of birth is unknown, as much of the date as is known shall be reported. If nothing is known, estimate and report an approximate year of birth and use zeros for the month and day. If only the age in years is known, calculate the year of birth and use zeros for the month and day. If the year and month of birth are known, but the exact day of birth is not, report the year and month only, and use zeros for the day.