

A. CLIENT REGISTRATION (Rev. 4/2003)

Any individual whom the Agency determines is a part of the population served by that Agency is referred to as a **client**. Information that is collected is maintained regardless of role or status. Therefore, child abuse and/or neglect (CA/N) parties (perpetrator, child victim, caretaker, and other involved persons) and children in substitute care or adoptive placement are all considered clients.

CLIENTS:

Clients are registered in Micro-FACSYS by assigning them a unique seven (7) digit identification number and entering as much available demographic information as possible (Client Identification Number and Last Name are **required**).

Once a client is registered, information should be reviewed/updated as it becomes available.

The client must be registered in Micro-FACSYS before any events are entered.

ADDRESS:

The physical residence of the client, or where the client resided at the time of removal.

Addresses for Title IV-E eligible Adoption Assistance Clients must be where the child is living (with the adoptive parents) in order to receive the warrant and medical card.

CLIENT CHARACTERISTICS:

Purpose: This Table indicates the specific physical, mental, emotional or behavioral disability affecting a client.

Usage: Client Characteristics must be entered for all children in substitute care. A **clinical diagnosis** by a “qualified professional” of the child’s characteristic(s) must be completed for all values that are in **bold**. A “qualified professional” includes a licensed medical doctor, psychiatrist, licensed psychologist and certified chemical dependency counselor; **it does not include caseworkers**. If the child does not exhibit any of the listed conditions, enter value 97- Not Applicable.

values for Client Characteristics:

01	AIDS	21	Hydrocephaly	41	Drug Exposed	71	Alcohol Abuse (Child)
02	Allergies	22	Juvenile Diabetes	42	Alcohol Involvement	72	Drug Abuse (Child)
03	Attention Deficit Disorder	23	Learning Disabilities	43	Drug Involvement	80	Chronic Runaway
04	Autism	24	Macrocephaly/Microcephaly	44	Alcohol Addiction	81	Firesetting
05	Blind	25	Missing Limbs	45	Drug Addiction	82	Lying
06	Cerebral Palsy	26	Muscular Dystrophy	46	Gang Involvement	83	Physically Agressive
07	Cleft Lip and Palate	27	Neurological Problems	47	Prior Unruly Adjudication	84	Self-Abusive
08	Cystic Fibrosis	28	Non-Ambulatory	48	Prior Delinquent Adjud	85	Sexually Active
09	Deaf	29	Physically Abused	49	Previously Incarcerated	86	Stealing
10	Developmentally Delayed	30	Pregnant	50	Incarcerated	97	Not Applicable
11	Diabetes	31	Seizures	51	On Parole		
12	Down’s Syndrome	32	Mental Retardation	52	On Probation		
13	Emotional/Behavioral	33	Sexually Abused	53	Sexual Offender (Juvenile)		
14	Encoprosis/Enuresis	34	Sickle Cell Disease	54	Fetal Alcohol Effected		
15	Epilepsy	35	Sickle Cell Trait	55	Bi-Polar Disorder		
16	Failure to Thrive	36	Speech Problems	56	Juvenile Schizophrenia		
17	Fetal Alcohol Syndrome	37	Spina Bifida	57	Reactive Attachment Disorder		
18	Hemophilia	38	Tuberous Sclerosis	58	Mental Health/Birth Family		
19	Herpes Simplex II	39	Visually Impaired/Not Blind	59	Limited English Proficiency		
20	Hearing Impaired/Not Deaf	40	HIV	70	Other Medically Diag Con		

RACE, SEX, BIRTH DATE, SOCIAL SECURITY NUMBER, CLIENT CHARACTERISTICS, HANDICAP

ASSESSMENT:

- Purpose:** These fields document demographic information for all children whose information is being entered into Micro-FACSYS.
- Usage:** These fields must be entered for all children in substitute care/custody.

TITLE IV-E ELIGIBLE CLIENTS:

- Purpose:** This field documents the child's Title IV-E number.
- Usage:** This number will never change and is only entered once as a Reference Number; the Reference Code will be "FC" for Foster Care or "AA" for Adoption Assistance indicating which funding mechanism is in effect. The Title IV-E Number consists of a maximum of 12 digits. The first three (3) digits are the Agency's identification code followed by the seven (7) digit client identification number, and the last two (2) digits must be 80 (eight, zero).

The following element and events are state mandated for every client.

RACE:

- Purpose:** This field documents the self-declared racial background of a client. If a client is unable or unwilling to self declare their race, this field documents the perceived racial background.
- Usage:** This element, combined with Event 258: Additional Race Description, allows an Agency to enter as many race descriptions as necessary to appropriately document the race of the client. The initial race description for all clients must be entered on the Client Registration Screen which is limited to one race description. Any additional race descriptions may be entered in the Client Event 258: Additional Race Description, as many times as necessary to fully document the individual's race.

Values for Race:

09 American Indian/Alaskan Native

10 Asian

11 Black/African American

12 Hawaiian/Pacific Islander

13 White

14 Unable to Determine*

80 All Races **(This value is used only for documenting that all races are acceptable to a RESOURCE. This value is NEVER to be used to describe an individual client).**

*The value, "Unable to Determine," may only be used when a child is very young or is severely disabled and no person is able to identify the child's race; or when an adult or the child (if age appropriate) refuses to identify his or her race; or when a parent, relative or guardian refuses to identify the child's race.

The following event is not state mandated and not transmitted to Host-FACIS; however, it must be entered before other subsequent state events can be entered.

EVENT 010: CLIENT CASE OPENING

Purpose: This initial client event documents child welfare activities for all children receiving services provided by the Agency.

Usage: This event does not get transmitted to the state; however, this event **must** be entered prior to entering any other events except Central Registry.

Event Date: The event date is the date the Agency decides to accept the case and provide services for the client.

Elements: Elements for Event 010: Client Case Opening are (1) Case Status, (2) Case Category, (3) Worker Assigned, and (4) Referral Source.

1. Case Status: Identifies the opening status of the client case.

- Values (2-digit codes) are county defined.
2. Case Category: Identifies the opening category of the client case.
Values (2-digit codes) are county defined.
 3. Worker Assigned: Identifies the initial worker assigned to the client case.
Values (1-4 digit codes) are county defined.
 4. Referral Source: Identifies the person who referred the client case for services.
Values (2-digit codes) are county defined.

Connectedness: None.

EVENT 128: EMANCIPATED YOUTH INFORMATION

Purpose: This Client Event documents that a youth who emancipated from the Agency has returned to the Agency for assistance.

Usage: This Client Event documents data required by the Chafee Foster Care Independence Act for young adults who emancipated (custody terminated) from the custody of the Agency because the child reached the age of 18 or older. This event is entered if the young adult returns to the Agency for services. In addition, if the Agency terminates custody, but maintains a case on the young adult, this event should be entered.

Event Date: The event date shall be the date which the emancipated youth first begins receiving services upon return to the Agency, or the date the emancipated youth's educational, employment or housing status changed.

Elements: Elements for Event 128: Emancipated Youth Information are (1-3) Reason for Case Opening, (2) Education Attainment/Enrollment, (3) Employment Status and (4) Housing Status. [If less than three reasons have been selected, enter value 97-Not Applicable to assure that each of the three elements has a value].

1-3. Reason for Case Opening:

Values for Reason for Case Opening:

- 01 Homeless
- 02 Unemployed
- 03 Mental Health Issues
- 04 Health Issues
- 05 Protection
- 06 Voluntary Referral Service
- 07 Dependency
- 97 Not Applicable

4. Education Attainment/Enrollment:

Values for Education Attainment/Enrollment:

- 01 Enrolled in High School
- 02 Graduated High School
- 03 Enrolled in GED Program
- 04 Completed GED Program
- 05 Enrolled in College/Other
- 06 Enrolled in Vocational Training
- 07 Enrolled Other Specialized Training
- 08 Dropped Out of High School
- 09 Unknown

5. Employment Status:

Values for Employment Status:

- 01 Employed Full Time
- 02 Employed Part Time
- 03 Unemployed

6. Housing Status:

Values for Housing Status:

- 01 Substitute Care
- 02 Residential Treatment Center
- 03 Detention
- 04 Kinship Care Placement
- 05 Parents/Guardians Home
- 06 Own Home Secured By Self
- 07 Subsidized Living Arrangement
- 08 Transitional/Independent
- 09 Homeless
- 10 In Jail

Connectedness: None.

EVENT 258: ADDITIONAL RACE DESCRIPTION

Purpose: This Client Event documents multiple race selection when used in conjunction with the Race on the client registration screen.

Usage: This event may be entered as many times as necessary to document the client's self-declaration of his/her race. If "Unable to Determine" has been entered on the Client Registration Screen, **do not** enter this event.

Event Date: The event date is the date the event was entered.

Elements: Element for Event 258: Additional Race Description is (1) Race.

1. Race: Describes the perceived or declared racial background of a client.

Values for Race:

- 09 American Indian/Alaskan Native
- 10 Asian
- 11 Black/African American

- 12 Hawaiian/Pacific Islander
- 13 White
- 14 Unable to Determine
- 80 All Races **(This value is used only for documenting that all races are acceptable to a RESOURCE. This value is NEVER to be used to describe an individual client).**

Connectedness: None.

EVENT 256: CLIENT ETHNICITY

Purpose: This Client Event documents the ethnic background of the client.

Usage: This event **must** be entered for an open client.

Event Date: The event date is the date the event was entered.

Elements: Element for Event 256: Client Ethnicity is (1) Ethnicity.

1. Ethnicity: The ethnic background of an individual.
Values for Ethnicity:
 - 01 Hispanic
 - 02 Non-Hispanic

Connectedness: None.

EVENT 208: TRIBAL NOTIFICATION PROVIDED

Purpose: This Client Event documents that the Agency has taken the necessary steps to contact the Bureau of Indian Affairs (BIA) Regional

Office or the child's identified tribe.

Usage: This Client Event indicates that the Agency has information that the child may be of Indian heritage and reflects the date the Agency requests the Bureau of Indian Affairs Regional Office or the child's identified tribe to determine if the tribe accepts responsibility for the care of the child.

Event Date: The event date is the date that the letter to the Bureau of Indian Affairs or the Tribe was mailed.

Elements: Element for Event 208: Tribal Notification Provided is (1) Who Notified.

1. Who Notified:

Values for Who Notified:

- 01 Notified Regional Bureau of Indian Affairs
- 02 Notified Identified Tribe

Connectedness: None.

EVENT 210: TRIBAL RESPONSE RECEIVED

Purpose: This Client Event documents the date the Agency receives a response from the Bureau of Indian Affairs (BIA) Regional Office or from the child's identified tribe, indicating whether or not the tribe will accept responsibility for the child.

Usage: This Client Event documents the response and the date of the response received by the Agency from the BIA or the child's identified tribe.

Event Date: The event date is the date the response was received from the Bureau of Indian Affairs or from the Tribe by the Agency.

Elements: Element for Event 210: Tribal Response Received is (1) Tribal Response.

1. Tribal Response:

Values for Tribal Response:

- 01 Tribe accepts responsibility
- 02 Tribe does not accept responsibility

Connectedness: An Event 208: Tribal Notification Received must be entered prior to entering this event.