



NAMRS FFY 2016 Appendices A-F

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Appendix A: Data Element and Value Definitions

Table A- 1 Agency Component Data Elements: Agency Profile

Agency Data Element	Definitions
Data Sources	The sources of information used to submit data this year to NAMRS: <ul style="list-style-type: none"> • APS agency only • APS and other agencies
Investigator FTEs filled	Number of filled APS FTEs responsible for the hotline and/or conducting investigations.
Supervisor FTEs filled	Number of filled APS FTEs responsible for supervision.
Intake	<ul style="list-style-type: none"> • Centralized or localized intake of APS reports. • Centralized at a statewide hotline or call in number • Combination of both statewide and local hotlines or call in numbers • Local at county or regional hotlines or call in numbers • Other
Reports Accepted for Investigation	Number of reports accepted for investigation during the reporting period.
Reports Not Accepted, or Resolved Through I&R/I&RA	Number of reports that were either not accepted by APS for investigation or were resolved through Information and Referral (I&R) / Information and Referral Assistance (I&RA).
Response Time	The length of time (days) from receipt of call or notice of alleged maltreatment to face-to-face contact with the client by the APS worker, based on the standard set by policy or practice.
Investigation Completion Time	The length of time (days) from investigation start to investigation completion, based on the standard set by policy or practice.

Agency Data Element	Definitions
Types of Maltreatment	<p>Indicates which types of maltreatment are investigated by APS. See definitions of maltreatment types in Key Indicators Data Elements.</p> <ul style="list-style-type: none"> • Abandonment • Emotional abuse • Suspicious death • Self-neglect • Exploitation (non-specific) • Financial exploitation • Other exploitation • Neglect • Physical abuse • Sexual abuse • Other
Types of Maltreatment	<p>Indicates which types of maltreatment are investigated by APS. See definitions of maltreatment types in Key Indicators Data Elements.</p> <ul style="list-style-type: none"> • Abandonment • Emotional abuse • Suspicious death • Self-neglect • Exploitation (non-specific) • Financial exploitation • Other exploitation • Neglect • Physical abuse • Sexual abuse • Other

Agency Data Element	Definitions
Standard of Evidence	<p>Standard used for substantiating an allegation of maltreatment.</p> <ul style="list-style-type: none"> • Clear and convincing • Credible, reasonable, or probable cause • Different standards based on type of perpetrator • No state standard • Preponderance • Other
Assessment Tools	<p>Indicates whether APS personnel use standard assessment tools throughout the state, such as client safety, at risk factors, or behavioral conditions.</p>
Service Gaps	<p>Indicates which services are not available or accessible in the state.</p>
Care/case management services	<p>Development and implementation of a service plan to mobilize the formal and informal resources and services identified in the assessment to meet the needs of the client. Includes the development and oversight of a plan to ensure the safety and well-being of the client; developing a safety plan with a person's support network; referring and arranging support services, etc.</p>
Caregiver support services	<p>Assistance to family and other informal caregivers to improve or sustain capacity for caring for the older adult or adult with disabilities. Includes counseling, support groups, training, respite, etc.</p>
Community day services	<p>Services or activities provided to adults who require care and supervision in a protective setting for a portion of a 24-hour day. Includes out of home supervision, health care, recreation, and/or independent living skills training offered in centers most commonly known as Adult Day, Adult Day Health, Senior Centers, and Disability Day Programs.</p>
Education, employment, and training services	<p>Services and activities to assist people in achieving or maintaining economic self-support. Includes training programs, job coaches, supported employment, senior employment programs, and public school individualized education plans.</p>
Emergency assistance and material aid services	<p>Providing, arranging for, or facilitating the provision of medical, social service, economic, emergency, or support services. Includes financial assistance or referral for food, clothing, energy/utility assistance, and home repairs/modifications; environmental clean-up of client's home including but not limited to removal of trash, extermination services and cleaning; relocation assistance; urgent medical expenses not typically covered by insurance (eye glasses, dentures); emergency housing/shelter; etc.</p>

Agency Data Element	Definitions
Financial planning services	Services or activities to assist in managing finances or planning for future financial needs. Includes meeting with bank officials, financial planning, estate planning, money management, and retirement income planning.
Housing and relocation services	Services or activities designed to assist in the obtaining of suitable or safe housing and living arrangements. Includes tenant counseling; helping to identify and correct substandard housing conditions; making moving arrangements and minor renovations to personal residence; and relocating to institutional care or facility care.
In-home assistance services	Services or activities provided to clients to achieve or maintain self-sufficiency. Includes homemakers and home health aides; visiting and telephone reassurance; chore maintenance; personal care services, etc.
Legal services	Legal counsel and representation provided by an attorney to address civil matters such as housing issues and advance care planning, and criminal matters.
Medical and dental services	Services and activities designed to assist individuals and families to attain and maintain a favorable condition of health; includes evaluations.
Medical rehabilitation services	Services and activities for persons with developmental or physical disabilities, or persons with visual or auditory impairments, are services or activities to maximize the potential of persons with disabilities, help alleviate the effects of physical, mental or emotional disabilities, and to enable these persons to live in the least restrictive environment possible. Includes training in mobility, communication skills, the use of special aids and appliances, self-sufficiency skills for people with disabilities, occupational therapy, physical therapy, speech and language pathology, early intervention and other therapies that help people learn the skills they need to live, learn, work and play in their communities.
Mental health services	Services and activities, including commitment, assessment, and evaluations, for people with behavioral health conditions characterized by dysregulation of mood, thought, and/or behavior, as recognized by the DSM-5. Includes services and activities that apply therapeutic processes to personal, family, situational, or occupational problems in order to bring about a positive resolution of the problem or improved individual or family functioning or circumstances.
Nutrition services	Services and activities, including appeals and applications, to provide food to a client lacking recommended daily nutritional requirements and/or Activities of Daily Living (ADL) limitations. Includes home delivered meals, nutritional counseling, congregate meals, senior farmers' market program, etc.

Agency Data Element	Definitions
Public assistance benefits	Services and assistance to provide a safety net for disadvantaged individuals who lack the resources to provide basic necessities for themselves and their families. Includes such programs as financial aid (TANF), nutrition (SNAP), energy assistance (LIHEAP), health care (Medicaid), etc.
Substance use services	Services and activities primarily designed to deter, reduce, or eliminate substance abuse or chemical dependence. Includes a comprehensive range of personal and family counseling methods, methadone treatment for opiate abusers, or detoxification treatment for alcohol abusers. Services and activities may be provided in alternative living arrangements such as institutional settings and community-based halfway houses.
Transportation services	Services or activities that provide or arrange for the travel, including travel costs, of individuals in order to access services, or obtain medical care or employment.
Victim services	Services and activities provided to, or on behalf of, victims at any stage of the criminal justice process, including post sentencing services and support. Includes programs supporting victims of domestic violence, sexual assault, abuse of older women, violence against women, and general crimes which are being handled by the police or prosecutors' offices.
Other services	Client receives services and activities not included in the categorizations provided.

Table A- 2. Key Indicators Component Data Elements

Key Indicators Data Element	Definitions
Investigations closed	Number of investigations closed during the reporting period.
Clients who received an investigation	Number of clients involved in an investigation that was closed or completed during the reporting period.
Clients who received interagency coordination	Number of clients referred to an agency in which an interagency coordination was part of the investigation.
Case Closure Reason: Investigation completed	The case was closed after a finding was made on the allegation of maltreatment, the investigation was closed, and no ongoing protective services case was opened.
Case Closure Reason: Investigation completed, and protective services case completed	The case was closed after the investigation was completed, additional protective services were provided, and the protective services case was closed.
Case Closure Reason: Investigation unable to be completed (non-specific)	A finding was not able to be made on the allegations of maltreatment for an unspecified reason and the case was closed.
Case Closure Reason: Investigation unable to be completed due to death of client during investigation	The client died during the investigation, the investigation was terminated without a finding, and the case was closed.
Case Closure Reason: Investigation unable to be completed due to refusal of client	The client refused to cooperate with the investigation worker, the investigation was terminated without a finding, and the case was closed.
Case Closure Reason: Protective services case opened but not completed (non-specific)	The protective services case was terminated prematurely; reason not specified.
Case Closure Reason: Protective services case closed due to death of client	The client died during the case and the case was closed.
Case Closure Reason: Protective services case closed due to client decision to not continue	The client decided not to continue work with the protective services agency, and the case was closed.
Case Closure Reason: Other	Case was closed for a reason not included in the categorizations provided.

Key Indicators Data Element	Definitions
Clients found to be victims	Number of victims in which at least one maltreatment disposition was substantiated per investigation.
Victims who received one or more benefits	Number of victims who received one or more benefits.
Victims with one or more disabilities	Number of victims with one or more disabilities.
Victims with one or more screened or diagnosed behavioral conditions	Number of victims with one or more screened or diagnosed behavioral conditions.
Victims with guardian or conservator at start of investigation	Number of victims with guardian or conservator at start of investigation.
Victims who received services or were referred for services by APS	Number of victims who received services or were referred for services by APS.
Maltreatment: Abandonment	The desertion of a person by an individual who has assumed responsibility for providing care for that person, or by an individual with physical custody of another person.
Maltreatment: Emotional abuse	The infliction of anguish, pain, or distress through verbal or nonverbal acts. This includes but is not limited to verbal assaults, insults, threats, intimidation, humiliation, and harassment.
Maltreatment: Exploitation (non-specific)	The illegal or improper use of an individual or of an individual's funds, property, or assets for another's profit or advantage.
Maltreatment: Financial exploitation	The illegal or improper use of an individual's funds, property, or assets for another person's profit or advantage.
Maltreatment: Other exploitation	The illegal or improper use of an individual for another person's profit or advantage, including exploitation of person, servitude, etc.
Maltreatment: Neglect	The failure of a caregiver or fiduciary to provide the goods or services necessary to maintain the health or safety of a person. Includes acts of omission and of commission; includes willful deprivation, etc.
Maltreatment: Physical abuse	The use of force or violence resulting in bodily injury, physical pain, or impairment. Excludes sexual abuse.
Maltreatment: Sexual abuse	Non-consensual sexual contact of any kind, including sexual contact with any person incapable of giving consent.

Key Indicators Data Element	Definitions
Maltreatment: Suspicious death	An unexpected fatality or one in which circumstances or cause are medically or legally unexplained.
Maltreatment: Self-neglect	A person's inability, due to physical or mental impairment or diminished capacity, to perform essential self-care tasks including obtaining essential food, clothing, shelter, and medical care; obtaining goods and services necessary to maintain physical health, mental health, or general safety; or managing one's own financial affairs. Includes hoarding.
Maltreatment: Other	A type of maltreatment not included in the categorizations provided.
Perpetrator	A perpetrator in an investigation is a person associated to a substantiated maltreatment.
Perpetrators who had a kinship relationship to the victim	Perpetrators related to the victim by affinity (blood, adoption, marriage, etc.)
Perpetrators who had one or more associations to victim	Perpetrators with one or more caregiving relationships to the victim.
Perpetrators for whom one or more legal remedies on behalf of the victim were recommended or sought	Perpetrators for whom at least one legal remedy was recommended or sought.

Table A- 3. Case Component Data Elements

Case Data Element	Definitions
Report Date	The month, day, and year the agency was notified of the suspected adult maltreatment. This is the date that a report of suspected maltreatment was made. If an agency combines several reports into one investigation, the Report Date is the date of the earliest report. The determination of combining reports into one investigation is per each agency's policy and procedures.
Report Source	The role or profession of the person who made the report of the suspected adult maltreatment. Multiple report source code values can be submitted for the investigation.

Case Data Element	Definitions
Report Source: Substitute decision maker	Includes health care proxy, financial proxy, guardian or conservator of person or property, representative payee.
Report Source: In-home caregiver	Individuals who have the responsibility for the care of the client, providing in-home monitoring, management, supervision, etc.
Report Source: Nursing home staff	Employees of a nursing home or skilled nursing home, which provide services for residents who require medical or nursing care, or rehabilitative services.
Report Source: Residential care community staff	Employees of a residential care community including those providing room and board of at least 2 meals per day and help with personal care. These places include residential communities identified as assisted living residences, board and care homes, congregate care, enriched housing programs, personal care homes, homes serving primarily persons with disabilities, and homes serving primarily older adults.
Report Source: Education professional	Employees of a public or private educational institution or program; includes teachers, teacher assistants, administrators, and others directly associated with the delivery of educational services.
Report Source: Financial professional	Professionals managing finances or planning for future financial needs. Includes bank officials, financial planners, etc.
Report Source: Law enforcement, judicial, or legal professional	People employed by a local, state, tribal, or federal justice agency. This includes police, courts, district attorney's office, probation or other community corrections agency, and correctional facilities.
Report Source: Medical or health professional	People employed by a medical facility or practice. This includes physicians, physician assistants, nurses, emergency medical technicians, dentists, chiropractors, coroners, and dental assistants and technicians.
Report Source: Mental and behavioral health professional	Persons who offer services for the purpose of improving an individual's mental health or to treat mental illness. Includes psychiatric nurses, clinical psychologists, etc.
Report Source: Social services professional	Employees of public or private social services or social welfare agency, or other social worker or counselor who provides similar services including rehabilitative services.
Report Source: Other professional	Persons who encountered the client as part of their occupation. Includes landlords, housing authorities, clergy, etc.
Report Source: Relative	Persons related by blood, marriage, or adoption. Includes spouse, domestic partner, parent, foster parent, child, in-laws, etc.

Case Data Element	Definitions
Report Source: Neighbor, friend, other nonrelative, other nonprofessional	Other individual who is not a professional or person related to client by blood, marriage, or adoption. Includes friends, neighbors, etc.
Report Source: Self	Person allegedly being maltreated.
State/county FIPS code of investigative agency	The Federal Information Processing Series for state (2 digits) and county code (3 digits) of the APS agency. (Primary agency responsible for the determination of the investigation) The Investigative Agency number may be a regional office or a local office depending upon the state APS administrative structure.
Investigation start date	The date the investigation is assigned to an investigation worker. If the agency uses another date to indicate the start of an investigation, that date is used. Each agency's policies and procedures define the date of an investigation. If an agency has both the date the investigation is assigned to an investigation worker and another date that is considered to be the start of the investigation, submit the date assigned to the worker.
Investigation disposition date	The date that the agency completed dispositions on the allegations of maltreatment associated with the investigation. Each agency's policies and procedures define this date. If maltreatment dispositions are associated with different dates, the Investigation Disposition Date should be the latest of these dates.
Case closure date	The date that the agency completed all activities related to the investigation of the case. Each agency's policies and procedures define the date of case closure. If the state data does not include the case closure date, the investigation disposition date may be used in this element.
Maltreatment Setting	The location where the alleged maltreatment occurred.
Maltreatment Setting: Own residence or private residence of relative or caregiver	Client's home or the client's relative or caregiver's home. Includes a house, apartment, mobile home or trailer, group of rooms, etc.
Maltreatment Setting: Residential care community (non-specific)	Provides room and board of at least two meals per day and help with personal care. Includes residential communities identified as assisted living facilities, board and care homes, congregate care, enriched housing programs, personal care homes, homes serving primarily persons with disabilities, and homes serving primarily older adults.
Maltreatment Setting: Licensed residential care community	Licensed, registered, listed, certified, or otherwise regulated by the state.

Case Data Element	Definitions
Maltreatment Setting: Unlicensed residential care community	Not licensed, registered, listed, certified, or otherwise regulated by the state.
Maltreatment Setting: Nursing home (non-specific)	Nursing home or skilled nursing home that provides services for residents who require medical or nursing care, or rehabilitative services.
Maltreatment Setting: Licensed nursing home	Licensed, registered, listed, certified, or otherwise regulated by the state.
Maltreatment Setting: Unlicensed nursing home	Not licensed, registered, listed, certified, or otherwise regulated by the state.
Maltreatment Setting: Adult day services center (non-specific)	Includes adult day care, adult day health services centers. Day care services for adults are those services or activities provided to adults who require care and supervision in a protective setting for a portion of a 24-hour day.
Maltreatment Setting: Licensed adult day services center	Licensed, registered, listed, certified, or otherwise regulated by the state.
Maltreatment Setting: Unlicensed adult day services center	Not licensed, registered, listed, certified, or otherwise regulated by the state.
Maltreatment Setting: Place of business or other services	Includes place of employment, sheltered workshops, hospitals, schools, banks, other offices, shelters, places of worship, etc.
Maltreatment Setting: Other	A setting not included in categorizations provided, including recreational areas and other public spaces.
State/county FIPS code of client	The Federal Information Processing Series for state (2 digits) and county code (3 digits) of the client's residence at the start of the investigation.
Case Closure Reason	The primary reason why the case was closed.
Case Closure Reason: Investigation completed	The case was closed after a finding was made on the allegation of maltreatment, the investigation was closed, and no ongoing protective services case was opened.
Case Closure Reason: Investigation completed, and protective services case completed	The case was closed after the investigation was completed, additional protective services were provided, and the protective services case was closed.
Case Closure Reason: Investigation unable to be completed (non-specific)	A finding was not able to be made on the allegations of maltreatment for an unspecified reason and the case was closed.

Case Data Element	Definitions
Case Closure Reason: Investigation unable to be completed due to death of client during investigation	The client died during the investigation, the investigation was terminated without a finding, and the case was closed.
Case Closure Reason: Investigation unable to be completed due to refusal of client	The client refused to cooperate with the investigation worker, the investigation was terminated without a finding, and the case was closed.
Case Closure Reason: Protective services case opened but not completed (non-specific)	The protective services case was terminated prematurely; reason not specified.
Case Closure Reason: Protective services case closed due to death of client	The client died during the case and the case was closed.
Case Closure Reason: Protective services case closed due to client decision to not continue	The client decided not to continue work with the protective services agency, and the case was closed.
Case Closure Reason: Other	Case was closed for a reason not included in the categorizations provided.
Age	The age of the client/perpetrator in years (at investigation start date). The Client/Perpetrator Age is computed by subtracting the client/perpetrator's Date of Birth from the Investigation Start Date. If the age ranges between 18 and 74, the actual age is used. Ages of 17 or younger are grouped and coded as 17. Ages of 75 through 84 inclusive are grouped and coded as 75. Ages of 85 or older are grouped and coded as 85. The reason for the grouping of older ages is to further protect the possible identification of the younger or older cohort population.
Gender Identity	The actual or perceived gender-related characteristics of the client/perpetrator.
Gender Identity: Male	Male gender assigned at birth matches one's gender identity of male.
Gender Identity: Female	Female gender assigned at birth matches one's gender identity of female.
Gender Identity: Transgender	Gender identity, gender expression, and biological sex do not all align (e.g. man, masculine, and male).
Sexual Orientation	The client/perpetrator's enduring pattern of or disposition to experience sexual or romantic desires for, and relationships with, people of one's same sex, the other sex, or both sexes.

Case Data Element	Definitions
Sexual Orientation: Straight	Sexual or romantic attractions and behaviors focus exclusively or mainly on members of the other sex.
Sexual Orientation: Gay/lesbian	Sexual or romantic attractions and behaviors focus exclusively or mainly on members of the same sex.
Sexual Orientation: Bisexual	Sexual or romantic attractions and behaviors are directed at members of both sexes to a significant degree.
Sexual Orientation: Questioning	Exploring one's own sexual orientation, investigating influences that may come from family, religious upbringing, and internal motivations.
Sexual Orientation: Other	A sexual orientation not included in the categorizations provided.
Race	The population(s) or group(s) that the client/perpetrator identifies as being a member. A client/perpetrator may have more than one race (multi-racial). For example, a client/perpetrator is Asian and White, the client/perpetrator should be reported with both race values. If specific races cannot be identified for a multiracial client, the client/perpetrator is reported as "Other".
Race: American Indian or Alaska Native	Having origins in any of the original peoples of North and South America (including Central America), and who maintains tribal affiliation or community attachment.
Race: Asian	Having origins in any of the original peoples of the Far East, Southeast Asia, or the Indian subcontinent, including, for example, Cambodia, China, India, Japan, Korea, Malaysia, Pakistan, the Philippine Islands, Thailand, and Vietnam.
Race: Black or African American	Having origins in any of the black racial groups of Africa.
Race: Native Hawaiian or Other Pacific Islander	Having origins in any of the original peoples of Hawaii, Guam, Samoa, or other Pacific Islands.
Race: White	Having origins in any of the original peoples of Europe, the Middle East, or North Africa.
Race: Other	Having origins not included in the categorizations provided.
Ethnicity	The affiliation of the client/perpetrator as Hispanic or Latino/a or non-Hispanic or Latino/a.
Marital Status	The client's status based on state residency laws.
Marital Status: Never married	Refers to persons who report themselves as never married.
Marital Status: Married	Refers to persons who are currently legally married.
Marital Status: Domestic partner, including civil union	In a committed relationship with another adult, including both same sex and opposite-sex relationships
Marital Status: Divorced	Refers to those whose marriages were legally dissolved.

Case Data Element	Definitions
Marital Status: Separated	A termination of cohabitation of spouses either by mutual agreement or, in the case of judicial separation, under the decree of a court.
Marital Status: Widowed	Refers to those whose marriages were terminated through death of their spouse and have not remarried.
Marital Status: Other	A marital status not included in the categorizations provided.
Schooling Level	The highest educational degree attained by the client.
Schooling Level: Less than high school	Did not receive a high school diploma or equivalent, such as GED.
Schooling Level: High school diploma or equivalent	Received high school diploma or equivalent, such as GED.
Schooling Level: Associate's degree or bachelor's degree	Associate's degree: granted after a two-year course of study, especially by a community or junior college. Bachelor's degree: earned for an undergraduate course of study that nominally requires three to five years of study, depending on institution and field of study.
Schooling Level: Advanced degree	A postgraduate degree, such as a master's degree or a doctorate.
Employment Status:	The involvement of the client in the labor force. If client is retired but also employed, use code "Employed". If client is participating in sheltered workshops or work centers for sub-minimum wages, use code value "Other".
Employment Status: Employed	Persons who are working or temporarily not working due to illness or other reasons.
Employment Status: Unemployed	Persons who are not employed and actively looking for work and available to start a job.
Employment Status: Not in labor force	Students, homemakers, retired workers, seasonal workers not looking for work, persons residing in institutions, persons doing only incidental unpaid family work.
Employment Status: Other	Employment status not included in the categorizations provided. Includes sheltered workshop participants.
Income level	The level of annual income of the client including all sources of income.
Benefits	The federal and state benefits received by the client during the investigation. Multiple benefit code values can be submitted for the client.
Benefits: Medicaid	The United States Medicaid program provides health coverage to persons including eligible low-income adults, children, pregnant women, elderly adults, and people with disabilities.

Case Data Element	Definitions
Benefits: Medicare	The United States Medicare program is a health insurance program for people age 65 and older, people under age 65 with certain disabilities, and people of all ages with End-Stage Renal Disease (permanent kidney failure requiring dialysis or a kidney transplant).
Benefits: Publicly-subsidized housing	Government sponsored economic assistance aimed toward alleviating housing costs and expenses for people in need with low to moderate incomes. Includes direct housing subsidies, non-profit housing, rent supplements, and some forms of co-operative and private sector housing.
Benefits: Social Security Disability Insurance (SSDI)	SSDI provides benefits to disabled or blind persons who are “insured” by workers’ contributions to the Social Security trust fund.
Benefits: Social Security retirement benefits	Benefits received by retired workers who have paid into the Social Security system during their working years. Paid out on a monthly basis to retired workers and their surviving spouses.
Benefits: Supplemental Security Income (SSI)	SSI makes cash assistance payments to aged, blind, and disabled persons (including children) who have limited income and resources.
Benefits: Temporary Assistance for Needy Families (TANF)	Temporary financial assistance through TANF program, which helps pregnant women and families with one or more dependent children pay for food, shelter, utilities, and expenses other than medical.
Benefits: Veterans’ disabled benefits	Disability compensation paid to Veterans because of injuries or diseases that were incurred in or aggravated during active duty, active duty training, or inactive duty training.
Benefits: Other	Public benefit other than those specified in the categorizations provided.
Veteran Status	The client’s status related to the US Armed Forces.
Veteran Status: Veteran	Person who has served in the United States Armed Forces or is otherwise classified as a veteran by the United States Department of Veteran Affairs.
Veteran Status: Non-veteran	Person who has not served in the United States Armed Forces or is otherwise not classified as a veteran by the United States Department of Veteran Affairs.
Disabilities	The client/perpetrator’s physical, emotional, and mental health issues that result in limitation in activities and restrictions to fully participate at school, work, or in the community. Multiple disability code values can be submitted for the client/perpetrator.
Disabilities: Ambulatory difficulty	Having serious difficulty walking or climbing stairs.
Disabilities: Cognitive difficulty	Because of a physical, mental, or emotional problem, having difficulty remembering, concentrating, or making decisions.

Case Data Element	Definitions
Disabilities: Communication difficulty	Because of a physical, mental, or emotional problem, having difficulty with speech or language.
Disabilities: Hearing difficulty	Deaf or having serious difficulty hearing.
Disabilities: Independent living difficulty	Because of a physical, mental, or emotional problem, having difficulty doing errands alone such as visiting a doctor's office or shopping.
Disabilities: Self-care difficulty	Having difficulty bathing or dressing.
Disabilities: Vision difficulty	Blind or having serious difficulty seeing, even when wearing glasses.
Disabilities: Other	Disabilities other than those specified in the categorizations provided.
ADL score	The client's score on the Katz Index of Independence in Activities of Daily Living (ADL).
IADL score	The client's score on the Lawton Instrumental Activities of Daily Living (IADL).
Behavioral Health Screenings or Diagnoses	The results of assessments on the client/perpetrator, conducted by the APS agency. Multiple behavioral health code values can be submitted for the client/perpetrator. APS staff may perform assessments or screenings which indicate that a client/perpetrator may need referral to a health care professional. These assessments/screenings may be indicated by choosing the appropriate code values. In addition, APS staff may have access to medical records indicating a client/perpetrator's diagnoses and if so choose appropriate code values.
Behavioral Health Screenings or Diagnoses: Alcohol use disorder	The consumption of alcohol that impacts the ability to conduct daily activities including quantity and frequency of alcohol consumption as well as feelings of not being able to stop drinking, of remorse about drinking, not being able to remember due to drinking, needing a drink early in the day, etc. Screening tools, such as the Alcohol Use Disorders Identification Test (AUDIT) or others, may be used. Diagnosis depends upon clinical training.
Behavioral Health Screenings or Diagnoses: Anxiety	An affective disorder that makes it difficult to conduct daily activities including feelings of nervousness, not being able to stop or control worrying, worrying too much about different things, being restless so it is hard to sit still, becoming easily annoyed or irritable and feeling afraid. Screening tools, such as the Generalized Anxiety Disorder 7 Item Scale (GAD-7) or others, may be used. Diagnosis depends upon clinical training.
Behavioral Health Screenings or Diagnoses: Bipolar disorder	A mood disorder characterized by alternating moods of mania and depression which can last for long periods of time and which may impact the ability to plan, schedule, and complete daily activities. Screening tools, such as the Mood Disorder Questionnaire or others, may be used. Diagnosis depends upon clinical training.

Case Data Element	Definitions
Behavioral Health Screenings or Diagnoses: Dementia	The progressive decline of cognitive ability which impacts daily activities. Alzheimer's is one type of dementia. Dementia may be associated with memory loss, difficulty performing familiar tasks, problems with language, disorientation to time and place, poor or decreased judgment, problems with abstract thinking, loss of initiative and changes in personality, mood, or behavior. Screening tools, such as the Alzheimer's Association Ten Warning Signs or others, may be used. Diagnosis depends upon clinical training.
Behavioral Health Screenings or Diagnoses: Depression	A loss of interest in daily activities including feelings of hopelessness, little energy, poor appetite or overeating, feeling bad about oneself, trouble concentrating and thoughts of suicide. Screening tools, such as the Patient Health Questionnaire (PHQ-9) or others, may be used. Diagnosis depends upon clinical training.
Behavioral Health Screenings or Diagnoses: Schizophrenia and other psychotic disorders	An affective disorder characterized by having delusions and hallucinations that may impact daily activities by causing difficulties in interacting with others. Screening tools, such as the Schizophrenia Test and Early Psychosis Indicator (STEP1) or others, may be used. Diagnosis depends upon clinical training.
Behavioral Health Screenings or Diagnoses: Substance use disorder	The use of drugs, including over the counter drugs, prescriptions drugs, cannabis (marijuana, hashish), solvents, tranquilizers, barbiturates, cocaine, stimulants, hallucinogens or narcotics that impact the ability to conduct daily activities including the quantity and frequency of use of such drugs, and feelings of being unable to stop when wanting to, of guilt or being neglectful, of withdrawal symptoms or having blackouts or flashbacks due to drug usage. Screening tools, such as the Drug Abuse Screening Test (DAST 10) or others, may be used. Diagnosis depends upon clinical training.
Behavioral Health Screenings or Diagnoses: Traumatic brain injury	The result of a violent blow or injury to the head. Physical damage to the brain may result in long term complications that impact daily activities due to difficulties in sleeping, dizziness, vision, memory concentration, and mood changes. Screening tool is usually the result of self-reporting of the injury or symptoms. Diagnosis depends upon clinical training.
Behavioral Health Screenings or Diagnoses: Other	Behavioral conditions not included in the value list of behavioral health that are due to brain damage, disease or unknown causes which impact the ability to conduct daily activities. Examples include amnesia, delirium, behavioral syndromes such as eating disorders, sleep disorders, and other personality disorders. Screening may use a range of tools. Diagnosis depends upon clinical training.
Living Setting at Start/Close	The primary residential environment of the client at the start/close of investigation.

Case Data Element	Definitions
Living Setting: Own residence or residence of relative or caregiver	Client's home or the client's relative or caregiver's home. Includes a house, apartment, mobile home or trailer, group of rooms, etc.
Living Setting: Residential care community (non-specific)	Provides room and board of at least two meals per day and help with personal care. Includes residential communities identified as assisted living residences, board and care homes, congregate care, enriched housing programs, personal care homes, homes serving primarily persons with disabilities, and homes serving primarily older adults.
Living Setting: Licensed residential care community	Licensed, registered, listed, certified, or otherwise regulated by the state.
Living Setting: Non-licensed residential care community	Not licensed, registered, listed, certified, or otherwise regulated by the state.
Living Setting: Nursing home (non-specific)	Nursing home or skilled nursing home that provides services for residents who require medical or nursing care, or rehabilitative services.
Living Setting: Licensed nursing home	Licensed, registered, listed, certified, or otherwise regulated by the state.
Living Setting: Non-licensed nursing home	Not licensed, registered, listed, certified, or otherwise regulated by the state.
Living Setting: Other	A setting not included in categorizations provided, including shelters, correctional facilities, or no fixed residence.
Substitute Decision Makers at Start/Close	The authorizations that are in effect related to health, personal, or financial decision making for the client at the start/close of the investigation. Multiple substitute decision maker code values can be submitted for the client.
Substitute Decision Makers at Start/Close: Health care proxy in effect	The appointment of a person to communicate the clients' wishes as to medical treatment in terminal illness or injury situations and to communicate for them in the event they cannot communicate for themselves. A document also known as a durable power of attorney for health care, medical power of attorney, or appointment of a healthcare agent, allows an individual to appoint another person (a proxy or agent) to express the individual's wishes and make health care decisions for the individual if he or she cannot speak for him or herself. Depending on the state, these documents are known as living wills, medical directives, health care proxies, or advance health care directives.

Case Data Element	Definitions
Substitute Decision Makers at Start/Close: Financial proxy in effect	Authorization, by a written document, that one individual may act in another's place as agent or attorney-in-fact with respect to some or all legal and financial matters. The scope of authority granted is specified in the document and may be limited by state statute. A power of attorney terminates on the death of the person granting the power (unless "coupled with an interest") and may terminate on the subsequent disability of the person granting the power (unless the power is "durable" under the instrument or state law).
Substitute Decision Makers at Start/Close: Guardianship or conservatorship (non-specific)	A relationship created by state law in which a court determines that an adult individual lacks capacity to make decisions about self-care or property, and appoints another individual or entity as a conservator, or by a similar term, as a surrogate decision maker. It becomes the duty and power of that individual to make personal and/or property decisions for another.
Substitute Decision Makers at Start/Close: Guardianship or conservatorship of person	If the individual has a critical need for someone to act on their behalf due to mental or physical disability.
Substitute Decision Makers at Start/Close: Guardianship or conservatorship of property	(Or Estate): if the person is incapable of managing his or her own financial affairs.
Substitute Decision Makers at Start/Close: Representative payee	An individual or organization appointed by SSA to receive Social Security and/or SSI benefits for someone who cannot manage or direct someone else to manage his or her money. The main responsibilities of a payee are to use the benefits to pay for the current and foreseeable needs of the beneficiary and properly save any benefits not needed to meet current needs. A payee must also keep records of expenses. When SSA requests a report, a payee must provide an accounting to SSA of how benefits were used or saved.
Services at Start	The services known to the agency that the client was already receiving at the start of the investigation. Multiple service code values can be submitted for the client.
Services APS	The services that the agency provided on behalf of the client during the investigation or while the agency kept an open case. Multiple service code values can be submitted for the client.
Services Referred	The services for which the agency referred the client. Multiple services code values can be submitted for the client.
Services at Close	The services known to the agency that the client was receiving at the time of case closure. Multiple services code values can be submitted for the client.

Case Data Element	Definitions
Services: Care/case management services	Development and implementation of a service plan to mobilize the formal and informal resources and services identified in the assessment to meet the needs of the client. Includes the development and oversight of a plan to ensure the safety and well-being of the client; developing a safety plan with a person's support network; referring and arranging support services, etc.
Services: Caregiver support services	Assistance to family and other informal caregivers to improve or sustain capacity for caring for the older adult or adult with disabilities. Includes counseling, support groups, training, respite, etc.
Services: Community day services	Services or activities provided to adults who require care and supervision in a protective setting for a portion of a 24-hour day. Includes out of home supervision, health care, recreation, and/or independent living skills training offered in centers most commonly known as Adult Day, Adult Day Health, Senior Centers, and Disability Day Programs.
Services: Education, employment, and training services	Services and activities to assist people in achieving or maintaining economic self-support. Includes training programs, job coaches, supported employment, senior employment programs, and public school individualized education plans.
Services: Emergency assistance and material aid services	Providing, arranging for, or facilitating the provision of medical, social service, economic, emergency, or support services. Includes financial assistance or referral for food, clothing, energy/utility assistance, and home repairs/modifications; environmental clean-up of client's home including but not limited to removal of trash, extermination services and cleaning; relocation assistance; urgent medical expenses not typically covered by insurance (eye glasses, dentures); emergency housing/shelter; etc.
Services: Financial planning services	Services or activities to assist in managing finances or planning for future financial needs. Includes meeting with bank officials, financial planning, estate planning, money management, and retirement income planning.
Services: Housing and relocation services	Services or activities designed to assist in the obtaining of suitable or safe housing and living arrangements. Includes tenant counseling; helping to identify and correct substandard housing conditions; making moving arrangements and minor renovations to personal residence; and relocating to institutional care or facility care.
Services: In-home assistance services	Services or activities provided to clients to achieve or maintain self-sufficiency. Includes homemakers and home health aides; visiting and telephone reassurance; chore maintenance; personal care services, etc.

Case Data Element	Definitions
Services: Legal services	Legal counsel and representation provided by an attorney to address civil matters such as housing issues and advance care planning, and criminal matters.
Services: Medical and dental services	Services and activities designed to assist individuals and families to attain and maintain a favorable condition of health; includes evaluations.
Services: Medical rehabilitation services	Services and activities for persons with developmental or physical disabilities, or persons with visual or auditory impairments, are services or activities to maximize the potential of persons with disabilities, help alleviate the effects of physical, mental or emotional disabilities, and to enable these persons to live in the least restrictive environment possible. Includes training in mobility, communication skills, the use of special aids and appliances, self-sufficiency skills for people with disabilities, occupational therapy, physical therapy, speech and language pathology, early intervention and other therapies that help people learn the skills they need to live, learn, work and play in their communities.
Services: Mental health services	Services and activities, including commitment, assessment, and evaluations, for people with behavioral health conditions characterized by dysregulation of mood, thought, and/or behavior, as recognized by the DSM-5. Includes services and activities that apply therapeutic processes to personal, family, situational, or occupational problems in order to bring about a positive resolution of the problem or improved individual or family functioning or circumstances.
Services: Nutrition services	Services and activities, including appeals and applications, to provide food to a client lacking recommended daily nutritional requirements and/or Activities of Daily Living (ADL) limitations. Includes home delivered meals, nutritional counseling, congregate meals, senior farmers' market program, etc.
Services: Public assistance benefits	Services and assistance to provide a safety net for disadvantaged individuals who lack the resources to provide basic necessities for themselves and their families. Includes such programs as financial aid (TANF), nutrition (SNAP), energy assistance (LIHEAP), health care (Medicaid), etc.
Services: Substance use services	Services and activities primarily designed to deter, reduce, or eliminate substance abuse or chemical dependence. Includes a comprehensive range of personal and family counseling methods, methadone treatment for opiate abusers, or detoxification treatment for alcohol abusers. Services and activities may be provided in alternative living arrangements such as institutional settings and community-based halfway houses.

Case Data Element	Definitions
Services: Transportation services	Services or activities that provide or arrange for the travel, including travel costs, of individuals in order to access services, or obtain medical care or employment.
Services: Victim services	Services and activities provided to, or on behalf of, victims at any stage of the criminal justice process, including post sentencing services and support. Includes programs supporting victims of domestic violence, sexual assault, abuse of older women, violence against women, and general crimes which are being handled by the police or prosecutors' offices.
Services: Other services	Client receives services and activities not included in the categorizations provided.
Interagency Coordination	The agencies to which the client was referred. Multiple interagency coordination code values can be submitted for the client.
Interagency Coordination: Law enforcement or prosecutorial offices	Agencies responsible for enforcing laws and maintaining public order and safety, including government units staffed by police, sheriffs, district attorneys, etc.
Interagency Coordination: Protection and Advocacy or Client Advocacy Program (CAP)	Agencies under the Protection and Advocacy for Persons with Mental Illness Act that have the authority to provide legal representation and other advocacy services, under all federal and state laws, to all people with disabilities, along with those agencies that provide information and assistance to individuals seeking or receiving vocational rehabilitation services under the Rehabilitation Act.
Interagency Coordination: State licensing agency	Government units responsible for the licensing of facilities and agencies serving older adults and adults with disabilities.
Interagency Coordination: State Medicaid Fraud Control Unit (MFCU)	State agencies that investigate and prosecute Medicaid fraud as well as patient abuse and neglect in health care facilities.
Interagency Coordination: Long-Term Care Ombudsman Program	State program that addresses complaints and advocates for people in the long-term care system.
Interagency Coordination: Other	Client was referred to a type of agency not included in the categorizations provided.
Previous Report	The indication that the agency has information that the client was the subject of a previous report.
Maltreatment Disposition	The disposition of the alleged maltreatment.
Maltreatment Disposition: Substantiated	The finding that the allegation of maltreatment is supported under state law and policy.

Case Data Element	Definitions
Maltreatment Disposition: Inconclusive	The finding that there is insufficient information to either support or not support the allegation of maltreatment, but there is a reason to suspect maltreatment.
Maltreatment Disposition: Unsubstantiated	The finding that the allegation of maltreatment is not supported under state law and policy.
Maltreatment Disposition: Other	Disposition not included in categorizations provided. Includes inappropriate allegations that were investigated.
Cohabitation at Start/Close	The indication if the perpetrator and client are cohabitating at the start/close of the investigation.
Kinship Relationship	The indication if the perpetrator is related to the client by affinity (blood, adoption, marriage, etc.).
Kinship Relationship: Yes (non-specific)	Kinship relationship exists
Kinship Relationship: Spouse	Partner in a marriage
Kinship Relationship: Domestic partner, including civil union	Adults in a committed relationship with another adult, including both same sex and opposite-sex relationships
Kinship Relationship: Parent	The birth mother or father, adoptive mother or father, or stepmother or stepfather of the client.
Kinship Relationship: Child	Biological son or daughter, adoptive son or daughter, or step-son or daughter
Kinship Relationship: Sibling	Children or offspring have one or both parents in common; a brother or sister (by blood, adoption, marriage)
Kinship Relationship: Grandparent	Parent of one's father or mother; a grandmother or grandfather (by blood, adoption, marriage)
Kinship Relationship: Grandchild	A child of one's son or daughter (by blood, adoption, marriage)
Kinship Relationship: Other relative	Another family member, including in-laws and kinship foster parents
Perpetrator Association at Start/Close	The indication if the perpetrator has a caregiving relationship to the client at the start/close of the investigation.
Perpetrator Association at Start/Close: Nursing home staff	An employee of a nursing home, including a skilled nursing home. Nursing homes primarily provide skilled nursing, rehabilitation, and long term care.

Case Data Element	Definitions
Perpetrator Association at Start/Close: Residential care community staff	An employee of a residential care community including those providing room and board of at least 2 meals per day and help with personal care. These places include residential communities identified as assisted living residences, board and care homes, congregate care, enriched housing programs, personal care homes, homes serving primarily persons with disabilities, and homes serving primarily older adults.
Perpetrator Association at Start/Close: Relative caregiver (non-specific)	An individual related to the client by blood, adoption, marriage, etc. who has the responsibility for the care of the client, providing in-home monitoring, management, supervision, etc.
Perpetrator Association at Start/Close: Paid relative caregiver	An individual related to the client by blood, adoption, marriage, etc. who has the responsibility for the care of the client, and receives payment for providing in-home monitoring, management, supervision, etc.
Perpetrator Association at Start/Close: Unpaid relative caregiver	An individual related to the client by blood, adoption, marriage, etc. who has the responsibility for the care of the client, and does not receive payment for providing in-home monitoring, management, supervision, etc.
Perpetrator Association at Start/Close: Nonrelative caregiver (non-specific)	An individual not related to the client by blood, adoption, marriage, etc. who has the responsibility for the care of the client, providing in-home monitoring, management, supervision, etc.
Perpetrator Association at Start/Close: Paid nonrelative caregiver	An individual not related to the client by blood, adoption, marriage, etc. who has the responsibility for the care of the client, and receives payment for providing in-home monitoring, management, supervision, etc.
Perpetrator Association at Start/Close: Unpaid nonrelative caregiver	An individual not related to the client by blood, adoption, marriage, etc. who has the responsibility for the care of the client, and does not receive payment for providing in-home monitoring, management, supervision, etc.
Perpetrator Association at Start/Close: Other relationship	Another trusted person providing care, not included in the categorizations provided.
Perpetrator Legal Remedy Recommendation	The legal remedies that were recommended or sought by the APS agency regarding the status of the perpetrator. Multiple legal remedy recommendation code values can be submitted for the client perpetrator relationship.

Case Data Element	Definitions
Legal Remedy: Removal of guardianship rights	The termination of a relationship, created by state law and determined by a court, in which an individual or entity acts as a conservator, or by a similar term, as a surrogate decision maker for another person who lacks capacity to make decisions about self-care or property. The individual no longer has duty and power to make personal and/or property decisions for the other.
Legal Remedy: Restraining order on perpetrator regarding the client	A court order issued to prohibit an individual from carrying out a particular action, especially approaching or contacting a specified person.
Legal Remedy: Eviction of perpetrator	The act of expelling someone, usually a tenant, from a property.
Legal Remedy: Restitution by perpetrator	Compensation paid to client by perpetrator for the losses or injuries incurred as a result of a criminal offense.
Legal Remedy: Other legal remedy	Legal remedy recommendations not included in the categorizations provided.

Appendix B: Laws, Rules, Regulations, and Guidance Sources

Laws, Rules, Regulations, and Guidance sources' website addresses mentioned in NAMRS FFY 2016 Reports

Federal Laws

“Older Americans Act,” congress.gov, last reauthorized 2016, <https://www.congress.gov/>

“Social Security Act,” congress.gov, last modified 2016, <https://www.congress.gov/>

“Elder Justice Act,” congress.gov, 2009, <https://www.congress.gov/>

Federal Agency Rules, Regulations, and Guidance

U.S. Office of Management and Budget, 1997 approval memorandum for data collected by U.S. Census Bureau, <https://www.whitehouse.gov/omb>

U.S. Census American Community Survey, <https://www.census.gov/programs-surveys/acs/>

U.S. Department of Health and Human Services, Assistant Secretary for Planning and Evaluation, publications, <https://aspe.hhs.gov/reports>

U.S. Department of Health and Human Services, Administration for Community Living, <https://www.acl.gov/programs>

U.S. Department of Health and Human Services, Centers for Disease Control, <https://www.cdc.gov/datastatistics/index.html>

U.S. Department of Housing and Urban Development, <https://portal.hud.gov/hudportal/HUD?src=/topics>

U.S. Department of Justice, <https://www.justice.gov/publications>

U.S. Veterans Administration, <https://www.benefits.va.gov/benefits/>

U.S. Department of Justice Bureau of Justice Statistics, <https://www.bjs.gov/>

National Organizations

ABA Commission on Law and Aging: https://www.americanbar.org/groups/law_aging.html

American Psychiatric Association Diagnostic and Statistical Manual of Mental Disorders, <https://www.psychiatry.org/psychiatrists/practice/dsm>

Appendix C: Agency Component Data Specifications

The Agency Component includes agency information such as agency name, addresses, and contact information. The Agency Component data are entered directly on to an online form on the NAMRS website. The Agency Component collects information on the policies and practices of each state APS agency as context for understanding the Case Component or the Key Indicators Component submission. The reporting period is the Federal Fiscal Year (FFY), October 1st – September 30th. While all data elements pertain to the reporting period for the annual data collection, the information in some elements may not change each year. Data topics include the following:

- Data sources—sources of information used to submit data
- Population served—characteristics of the population served
- Staffing—number of filled investigator and supervisor ftes
- Intake processes—centralized, local or regional, combination
- Referrals—number of reports accepted for investigation; not accepted, or resolved through information and referral (i&r) or information and referral/assistance (i&ra)
- Response time—amount of time from receipt of call or notice of alleged maltreatment to contact with client, based on standard
- Completion of investigation—amount of time for aps to complete investigations, based on standard
- Types of maltreatment—state definitions or statutory references for definitions
- Standard of evidence—legal criteria for substantiating maltreatment
- Assessment tools—uses statewide standardized tools for investigation
- Service gaps—client services that are not available
- Perpetrators—whether or not the agency collects person-specific data on perpetrators

Each data topic includes a comment field that allows States to submit additional explanatory information on each item as needed.

Additional information on terms used in NAMRS is available in the NAMRS Code Values and Definitions document.

A web-based form that contains fields for all the data points in the Agency Component will be available on the NAMRS Website, as of October 1, 2016. The user can fill out the form, save the data, and return later to work on it as needed. Basic data type and required field validation will take place when the form is saved. If there are any errors, the user will be prompted to fix the errors. The NAMRS Technical Assistance Team is available if assistance is needed.

Table C- 1. Agency Component Data Specifications: General Information

Element No.	Element Name	Element Description	Required	Field Entry Format
Agency 1.1	Agency Name 1	Department or agency name	Yes	Text - 100 characters
Agency 1.2	Agency Name 2	Branch or unit name	No	Text - 100 characters
Agency 2.1	Street 1	First line street address of agency physical address	Yes	Text - 100 characters
Agency 2.2	Street 2	Second line street address of agency physical address	No	Text - 100 characters
Agency 2.3	City	City of agency physical address	Yes	Text - 100 characters
Agency 2.4	State	State of agency physical address	Yes	Select from list
Agency 2.5	ZIP	ZIP of agency physical address	Yes	##### or #####-####
Agency 3.1	Street 1	First line street address of agency mailing address	Yes	Text - 100 characters
Agency 3.2	Street 2	Second line street address of agency physical address	No	Text - 100 characters
Agency 3.3	City	City of agency physical address	Yes	Text - 100 characters
Agency 3.4	State	State of agency physical address	Yes	Select from list
Agency 3.5	ZIP	ZIP of agency physical address	Yes	##### or #####-####
Agency 4.1	Name	Contact name	Yes	Text - 100 characters
Agency 4.2	Title	Contact title	Yes	Text - 100 characters
Agency 4.3	E-mail	Contact e-mail	Yes	E-mail address format
Agency 4.4	Phone	Contact telephone	Yes	Text - 50 characters

Element No.	Element Name	Element Description	Required	Field Entry Format
Agency 4.5	Contact's role in agency	Contact's role in agency <i>Selection List:</i> <ul style="list-style-type: none"> • Case manager • Data coordinator/manager • Field coordinator • Intake manager/supervisor • Investigator • IT/data specialist • Manager/director/supervisor • Policy specialist • Regional supervisor • Social worker • Training coordinator/specialist 	No	Select one from list

Table C- 2. Agency Component Data Specifications: Agency Profile

Element No.	Element Name	Element Description	Required	Field Entry Format
Agency 5	Data Sources	The sources of information used to submit data this year to NAMRS. <i>Selection List:</i> <ul style="list-style-type: none"> • APS agency only • APS and other agencies 	No	Select one from list
Agency 5.1	Comment	Provide names of other agencies that provided data.	No	Text – 5,000 characters
Agency 6	Population Served	Provide a brief description of the characteristics of the population, including age, living arrangement, vulnerability, etc. whom APS is mandated to serve. Provide the citation in state statute or regulation, or agency policy.	No	Text – 5,000 characters

Element No.	Element Name	Element Description	Required	Field Entry Format
Agency 6.1	Population served: setting	If your agency investigates allegations in residential care communities and/or nursing homes, please indicate whether or not your agency would conduct an investigation if the allegation does not pertain to a specific resident, but rather to the residents in general.	No	Text – 5,000 characters
Agency 7	Investigator FTEs filled	Number of filled APS FTEs responsible for the hotline and/or conducting investigations.	No	Numeric – 10 integers
Agency 7.1	Supervisor FTEs filled	Number of filled APS FTEs responsible for supervision.	No	Numeric – 10 integers
Agency 7.2	Comment	Provide additional information as to whether the numbers in 7 and 7.1 were the annual total or total for a given day.	No	Text – 5,000 characters
Agency 8	Intake	Centralized or localized intake of APS reports. <i>Selection List:</i> <ul style="list-style-type: none"> • Centralized at a statewide hotline or call in number • Combination of both statewide and local hotlines or call in numbers • Local at county or regional hotlines or call in numbers • Other 	No	Select one from list
Agency 8.1	Comment	Provide additional information on your state’s definition of intake.	No	Text – 5,000 characters
Agency 9	Reports Accepted for Investigation	Number of reports accepted for investigation during the reporting period.	No	Numeric – 10 integers
Agency 9.1	Reports Not Accepted, or Resolved Through I&R/I&RA	Number of reports that were either not accepted by APS for investigation or were resolved through Information and Referral (I&R) / Information and Referral Assistance (I&RA).	No	Numeric – 10 integers

Element No.	Element Name	Element Description	Required	Field Entry Format
Agency 9.2	Comment	Please confirm that the sum of 9 and 9.1 is the total number of investigations received during the reporting period. Please provide additional information regarding policy for accepting reports and not accepting reports, or resolving through I&R/I&RA.	No	Text – 5,000 characters
Agency 10	Response Time in Hours	The length of time (hours) from receipt of call or notice of alleged maltreatment to face-to-face contact with the client by the APS worker, based on the standard set by policy or practice.	No	Numeric – 3 integers
Agency 10.1	Comment	Provide additional information on the definition of response time to allegations of maltreatment. If different types of allegations are given different priorities in terms of response time, please provide additional information.	No	Text – 5,000 characters
Agency 11	Investigation Completion Time in Days	The length of time (days) from investigation start to investigation completion, based on the standard set by policy or practice.	No	Numeric – 3 integers
Agency 11.1	Comment	Provide additional information on the definition of start of investigation and completion of an investigation.	No	Text – 5,000 characters

Element No.	Element Name	Element Description	Required	Field Entry Format
Agency 12	Types of Maltreatment	<p>Indicate which types of maltreatment are investigated by APS.</p> <p><i>Selection List:</i></p> <ul style="list-style-type: none"> • Abandonment • Emotional abuse • Exploitation (non-specific) • Financial exploitation • Other exploitation • Neglect • Physical abuse • Sexual abuse • Suspicious death • Self-neglect • Other 	No	Select one or more from list
Agency 12.1	Comment	Provide citation or URL in state law, regulations, or program guidance for maltreatment types investigated by APS.	No	Text – 5,000 characters
Agency 13	Standard of Evidence	<p>Standard used for substantiating an allegation of maltreatment.</p> <p><i>Selection List:</i></p> <ul style="list-style-type: none"> • Clear and convincing • Credible, reasonable, or probable cause • Different standards based on type of perpetrator • No state standard • Preponderance • Other 	No	Select one from list
Agency 13.1	Comment	Provide citation or URL of state law, regulations, or program guidance. Include discussion of definitions of perpetrator if relevant.	No	Text – 5,000 characters

Element No.	Element Name	Element Description	Required	Field Entry Format
Agency 14	Assessment Tools	<p>Indicate whether APS personnel use standard assessment tools throughout the state, such as client safety, at risk factors, or behavioral conditions.</p> <p><i>Selection List:</i></p> <ul style="list-style-type: none"> No, assessment instruments are determined by each county or left to the worker’s discretion Yes, use common instrument or tool throughout the state 	No	Select one from list
Agency 14.1	Comment	Provide the name and reference (i.e., URL) for each standardized tool that is used.	No	Text – 5,000 characters
Agency 15	Service Gaps	<p>Indicate which services are not available or accessible in the state.</p> <p><i>Selection List:</i></p> <ul style="list-style-type: none"> Care/Case Management Services Caregiver Support Services Community Day Services Education, Employment, and Training Services Emergency Assistance and Material Aid Services Financial Planning Services Housing and Relocation Services In-home Assistance Services Legal Services Medical and Dental Services Medical Rehabilitation Services Mental Health Services Nutrition Public Assistance Benefits Substance Use Services Transportation Victim Services Other Services 	No	Select one from list
Agency 15.1	Comment	Provide additional information on how gaps in services were identified, if possible.	No	Text – 5,000 characters

Element No.	Element Name	Element Description	Required	Field Entry Format
Agency 16	Perpetrators	Does APS collect person-specific data on persons found to be perpetrators of substantiated maltreatment? Does your information system collect unique IDs and demographic characteristics of such persons? If there is specific state statute or regulation, or agency policy on such data, please provide the citation.	No	Text – 5,000 characters

Appendix D: Key Indicators Component Data Specifications

The Key Indicators Component includes aggregated (summary) counts of key statistics related to an investigation, clients, and perpetrators. The Key Indicators Component data are entered directly on to an online form in NAMRS. This component is designed to collect data that are most commonly computed by states on an annual basis. The reporting period is the Federal Fiscal Year (FFY), October 1st – September 30th. States may need to re-compute these statistics for the reporting period, which may be different from the standard reporting period used by the state. The Key Indicators Component is submitted only by those states that cannot submit the Case Component.

The Key Indicators Component collects duplicated counts of clients or perpetrators. If a client is involved in multiple investigations, the client is counted multiple times.

The data domains in the Key Indicators Component include the following:

- investigations—number closed or completed
- clients—number that received an investigation, that received interagency coordination, and by case closure reason
- victims—clients found to be victims by one or more maltreatments, by demographics, disabilities, behavioral conditions, maltreatment type, and outcomes
- perpetrators—by demographics, kinship relationship, association to victim, and legal remedy recommendations.

Some data elements have a tiered structure of code values. In such cases the specifications show the tiered structure by indenting the optional, more specific code values.

States can submit additional explanatory information on each item.

Additional information on terms used in NAMRS is available in [Appendix A: Code Values and Definitions document](#).

A web-based form that contains fields for all the data points in the Key Component will be available on the NAMRS Website, as of October 1, 2016. The user can fill out the form, save the data, and return later to work on it as needed. The data are validated when the form is saved. The validation rules are listed in the second section of this document. If there are any errors, the user will be prompted to fix the errors. The NAMRS Technical Assistance Team is available if assistance is needed.

Table D- 1. Investigations

Element No.	Element Name	Element Description/ Categories	Required	Field Entry Format
K 1	Investigations closed	Number of investigations closed during the reporting period. Investigation could have been received in previous reporting period but must have been closed during current reporting period. Closed investigations include those completed and resulted in a finding (e.g., substantiated, unsubstantiated). Closed investigations also include those where the investigation was not completed due to reasons such as client refused services. Do not include investigation closed due to administrative reasons such as opened in error.	Yes	Numeric - 10 integers
K 1.1	Comment	Provide additional information on the number of investigations closed during the reporting period.	No	Text - 5,000 characters

Table D- 2. Clients

Element No.	Element Name	Element Description/ Categories	Required	Field Entry Format
K 2	Clients who received an investigation	Number of clients involved in an investigation that was closed or completed during the reporting period. Count each client in each investigation. If a client was the subject of two investigations, count twice.	Yes	Numeric - 10 integers
K 2.1	Comment	Provide additional information on how number of clients was determined.	No	Text - 5,000 characters
K 3	Clients who received interagency coordination	Number of clients referred to an agency in which an interagency coordination was part of the investigation. Count each client once for each investigation in which he/she received one or more interagency coordination activities. Examples of agencies include: law enforcement or prosecutorial offices, protection and advocacy or Client Advocacy Program (CAP), state licensing agency, State Medicaid Fraud Control Unit (MFCU), and Long-Term Care Ombudsman Program	No	Numeric - 10 integers

Element No.	Element Name	Element Description/ Categories	Required	Field Entry Format
K 3.1	Comment	Provide additional information on how number of clients who received interagency coordination was determined.	No	Text - 5,000 characters
K 4	Clients by case closure reason	This includes the number of clients by case closure reason whose case was closed for a specific reason. A client is counted for each case closure. There can only be one primary case closure reason per client per case	No	Numeric - 10 integers
K 4.1		Investigation completed	No	Numeric - 10 integers
K4.2		Investigation completed and protective services case completed	No	Numeric - 10 integers
K 4.3		Investigation unable to be completed (non-specific)	No	Numeric - 10 integers
K 4.3.1		Investigation unable to be completed due to death of client during investigation	No	Numeric - 10 integers
K.4.3.2		Investigation unable to be completed due to refusal of client	No	Numeric - 10 integers
K 4.4		Protective services case opened but not completed (non-specific)	No	Numeric - 10 integers
K 4.4.1		Protective services case closed due to death of client	No	Numeric - 10 integers
K 4.4.2		Protective services case closed due to client decision to not continue	No	Numeric - 10 integers
K 4.5		Other	No	Numeric - 10 integers
K 4.6		Unknown	No	Numeric - 10 integers
K 4.7	Comment	Provide additional information on how number of clients by case closure reason was determined.	No	Text - 5,000 characters

Table D- 3. Victims

Element No.	Element Name	Element Description/ Categories	Required	Field Entry Format
K 5	Clients found to be victims	Number of victims in which at least one maltreatment disposition was substantiated per investigation. A victim is counted once for each investigation in which a maltreatment was substantiated, no matter how many maltreatments were substantiated.	Yes	Numeric - 10 integers
K 5.1	Comment	Provide additional information on how number of victims was determined.	No	Text - 5,000 characters
K 6	Victims by Age	The victim age is computed by subtracting the person's date of birth from the investigation start date. An estimated age can be used. The victim's age is counted once per each investigation in which the client was found to be a victim. Age could differ between investigations		
K 6.1		18-29 years	No	Numeric - 10 integers
K 6.2		30-39 years	No	Numeric - 10 integers
K 6.3		40-49 years	No	Numeric - 10 integers
K 6.4		50-59 years	No	Numeric - 10 integers
K 6.5		60-69 years	No	Numeric - 10 integers
K6.6		70-74 years	No	Numeric - 10 integers
K 6.7		75-84 years	No	Numeric - 10 integers
K 6.8		85 and older	No	Numeric - 10 integers
K 6.9		Unknown	No	Numeric - 10 integers

Element No.	Element Name	Element Description/ Categories	Required	Field Entry Format
K 6.10	Comment	Provide additional information on how age was computed.	No	Text - 5,000 characters
K 7	Victims by race	A multiracial victim is counted for each race identified. For example, the victim is Asian and White, the victim should be counted in both race categories. If specific races cannot be identified for the multiracial victim, the victim is counted in "Other" category		
K 7.1		American Indian or Alaska Native	No	Numeric - 10 integers
K 7.2		Asian	No	Numeric - 10 integers
K 7.3		Black or African American	No	Numeric - 10 integers
K 7.4		Native Hawaiian or Other Pacific Islander	No	Numeric - 10 integers
K 7.5		White	No	Numeric - 10 integers
K 7.6		Other	No	Numeric - 10 integers
K 7.7		Unknown	No	Numeric - 10 integers
K 7.8	Comment	Provide additional information on how number of victims by race was determined.	No	Text - 5,000 characters
K 8	Victims by ethnicity	Count each victim once per investigation.		
K 8.1		Hispanic, Latino/a, or Spanish	No	Numeric - 10 integers
K 8.2		Not Hispanic, Latino/a, or Spanish	No	Numeric - 10 integers
K 8.3		Unknown	No	Numeric - 10 integers

Element No.	Element Name	Element Description/ Categories	Required	Field Entry Format
K 8.4	Comment	Provide additional information on how number of victims by ethnicity was determined.	No	Text - 5,000 characters
K 9	Victims by gender identity	Count each victim once per investigation.		
K 9.1		Male	No	Numeric - 10 integers
K 9.2		Female	No	Numeric - 10 integers
K 9.3		Transgender	No	Numeric - 10 integers
K 9.4		Unknown	No	Numeric - 10 integers
K 9.5	Comment	Provide additional information on how number of victims by gender was determined.	No	Text - 5,000 characters
K 10	Victims who received one or more benefits	Number of victims who received one or more benefits. A victim is counted once per investigation in which he/she received one or more benefits.	No	Numeric - 10 integers
K 10.1	Comment	Provide additional information on how number of victims by receipt of benefits was determined.	No	Text - 5,000 characters
K 11	Victims with one or more disabilities	Number of victims with one or more disabilities. A victim is counted once per investigation in which he/she was identified as having one or more disabilities.	No	Numeric - 10 integers
K 11.1	Comment	Provide additional information on how number of victims with one or more disabilities was determined.	No	Text - 5,000 characters
K 12	Victims with one or more screened or diagnosed behavioral conditions	Number of victims with one or more screened or diagnosed behavioral conditions. A victim is counted once per investigation in which he/she was screened as having one or more behavioral conditions.	No	Numeric - 10 integers

Element No.	Element Name	Element Description/ Categories	Required	Field Entry Format
K 13	Victims by maltreatment type	A victim is counted each time he/she was substantiated as a victim of a specific maltreatment type. If a person was found to be a victim of neglect in two investigations, the count for neglect would be two for that victim.		
K 13.1		Abandonment	No	Numeric - 10 integers
K 13.2		Emotional abuse	No	Numeric - 10 integers
K 13.3		Exploitation (non-specific)	No	Numeric - 10 integers
K 13.3.1		Financial exploitation	No	Numeric - 10 integers
K 13.3.2		Other exploitation	No	Numeric - 10 integers
K 13.4		Neglect	No	Numeric - 10 integers
K 13.5		Physical abuse	No	Numeric - 10 integers
K 13.6		Sexual abuse	No	Numeric - 10 integers
K 13.7		Suspicious death	No	Numeric - 10 integers
K 13.8		Self-neglect	No	Numeric - 10 integers
K13.9		Other	No	Numeric - 10 integers
K 13.10		Unknown	No	Numeric - 10 integers
K 13.11	Comment	Provide additional information on how number of victims by maltreatment type was determined.		

Element No.	Element Name	Element Description/ Categories	Required	Field Entry Format
K 14	Victims with guardian or conservator at start of investigation	Number of victims with guardian or conservator at start of investigation. A victim is counted once per investigation in which he/she was screened as having one or more guardians or conservators.	No	Numeric - 10 integers
K 14.1	Comment	Provide additional information on how number of victims by one or more guardians or conservators was determined.	No	Text - 5,000 characters
K 15	Victims who received services or were referred for services by APS	A victim is counted once per investigation in which he/she received or was referred for one or more services. If a client received multiple services and also was referred for multiple services in one investigation, he/she is counted only once.	No	Numeric - 10 integers
K 15.1	Comment	Provide additional information on how number of victims by services was determined.	No	Text - 5,000 characters

Table D- 4. Perpetrators

Element No.	Element Name	Element Description/ Categories	Required	Field Entry Format
K 16	Perpetrators by age	The perpetrator age is computed by subtracting the person's date of birth from the investigation start date. An estimated age can be used. Count each perpetrator once per client per investigation. If a person was the perpetrator of two clients in one investigation, the person is counted twice.		
K 16.1		17 and younger	No	Numeric - 10 integers
K 16.2		18-29 years	No	Numeric - 10 integers
K 16.3		30-39 years	No	Numeric - 10 integers
K 16.4		40-49 years	No	Numeric - 10 integers

Element No.	Element Name	Element Description/ Categories	Required	Field Entry Format
K 16.5		50-59 years	No	Numeric - 10 integers
K 16.6		60-69 years	No	Numeric - 10 integers
K 16.7		70-74 years	No	Numeric - 10 integers
K 16.8		75-84 years	No	Numeric - 10 integers
K 16.9		85 and older	No	Numeric - 10 integers
K 16.10		Unknown	No	Numeric - 10 integers
K 16.11	Comment	Provide additional information on how number of perpetrators by age was determined.	No	Text - 5,000 characters
K 17	Perpetrators by gender identity	Count each perpetrator once per investigation		
K 17.1		Male	No	Numeric - 10 integers
K 17.2		Female	No	Numeric - 10 integers
K 17.3		Transgender	No	Numeric - 10 integers
K 17.4		Unknown	No	Numeric - 10 integers
K 17.5	Comment	Provide additional information on how number of perpetrators by gender was determined.	No	Text - 5,000 characters
K 18	Perpetrators who had a kinship relationship to the victim	Number of perpetrators related to the victim by affinity (blood, adoption, marriage, etc.). Count each perpetrator once per client per investigation. If a person was the perpetrator of two clients in one investigation and is related to one victim and not the second, the perpetrator is counted only once.	No	Numeric - 10 integers

Element No.	Element Name	Element Description/ Categories	Required	Field Entry Format
K 18.1	Comment	Provide additional information on how number of perpetrators by kinship relationship was determined.	No	Text - 5,000 characters
K 19	Perpetrators who had one or more associations to victim	Number of perpetrators with one or more caregiving relationships to the victim. Count each perpetrator once per client per investigation. If a person was the perpetrator of two clients in one investigation and has one or more caregiving relationships to one victim and not the second, the perpetrator is counted only once	No	Numeric - 10 integers
K 19.1	Comment	Provide additional information on how number of perpetrators by association to the victim was determined.	No	Text - 5,000 characters
K 20	Perpetrators for whom one or more legal remedies on behalf of the victim were recommended or sought	Number of perpetrators for whom at least one legal remedy was recommended or sought. Count each perpetrator once per client per investigation. If a person was the perpetrator of two clients in one investigation and had one or more legal remedies recommended or sought related to one victim and none with the second, the perpetrator is counted only once.	No	Numeric - 10 integers
K 20.1	Comment	Provide additional information on how number of perpetrators by legal remedy was determined.	No	Text - 5,000 characters

Key Indicators Component Data Validation

The Key Indicators Component data are entered directly on to an online form in NAMRS. The data are validated when the form is saved. If the data are not required, the fields may remain empty and the rules does not apply.

Error messages are displayed if the following rules are violated:

1. Client who received an investigation *must be greater than or equal to* ($=>$) Investigation closed
2. Clients who received interagency coordination *must be less than or equal to* ($<=$) Clients who received an investigation
3. Clients by case closure reason (total) *must be equal to* ($=$) Clients who received an investigation
4. Clients found to be victims *must be less than or equal to* ($<=$) Clients who received an investigation
5. Victims by age (total) *must be equal to* ($=$) Clients found to be victims
6. Victims by race (total) *must be greater than or equal to* ($=>$) Clients found to be victims
7. Victims by ethnicity (total) *must be equal to* ($=$) Clients found to be victims
8. Victims by gender identity (total) *must be equal to* ($=$) Clients found to be victims
9. Victims who received one or more benefits (total) *must be less than or equal to* ($<=$) Clients found to be victims
10. Victims with one or more disabilities (total) *must be less than or equal to* ($<=$) Clients found to be victims
11. Victims with one or more screened behavioral conditions (total) *must be less than or equal to* ($<=$) Clients found to be victims
12. Victims by maltreatment type (total) *must be greater than or equal to* ($=>$) Clients found to be victims
13. Victims with guardian or conservator at start of investigation *must be less than or equal to* ($<=$) Clients found to be victims
14. Victims who received services or were referred for services by aps *must be less than or equal to* ($<=$) Clients found to be victims

Appendix E: Case Component Data Specifications

The Case Component includes information pertaining to each report that is screened in and investigated by the adult protective services (APS) agency. The Case Component data are extracted into the required Extensible Markup Language (XML) formatted file. The file is uploaded using the NAMRS website. The information is specific to the investigation, including the clients, maltreatments, and perpetrators associated with the specific investigation. A case is comprised of an investigation and any ancillary tasks that APS undertakes on behalf of the client. The Case Component collects data on APS cases that were closed during the reporting period. This component is designed to collect data on an annual basis. The reporting period is the Federal Fiscal Year (FFY), October 1st – September 30th.

The Case Component is comprised of six entities as shown in *Fig 1. Case Component Entity Relationship Diagram* and *Fig 2. Example of Case Component Entities Relationships*. Each entity is comprised of attributes. The six entities for the data submission are:

1. Year/State—each FFY, reporting period, for which data are submitted by the APS agency
2. Investigation—each investigation undertaken by APS with a case closure date during the reporting period
3. Client—each person subject of an investigation and client may have multiple investigation in the reporting period
4. Maltreatment Allegation—each maltreatment associated with each client, requires the attributes of maltreatment type and maltreatment disposition
5. Perpetrator—each person determined to be responsible for one or more maltreatments with a disposition of substantiated
6. Client-Perpetrator Relationship—the relationship between the client, who is the victim of a substantiated maltreatment, and the perpetrator, as explained by one or more of the eight possible attributes.

Figure 1. Case Component Entity Relationship Diagram

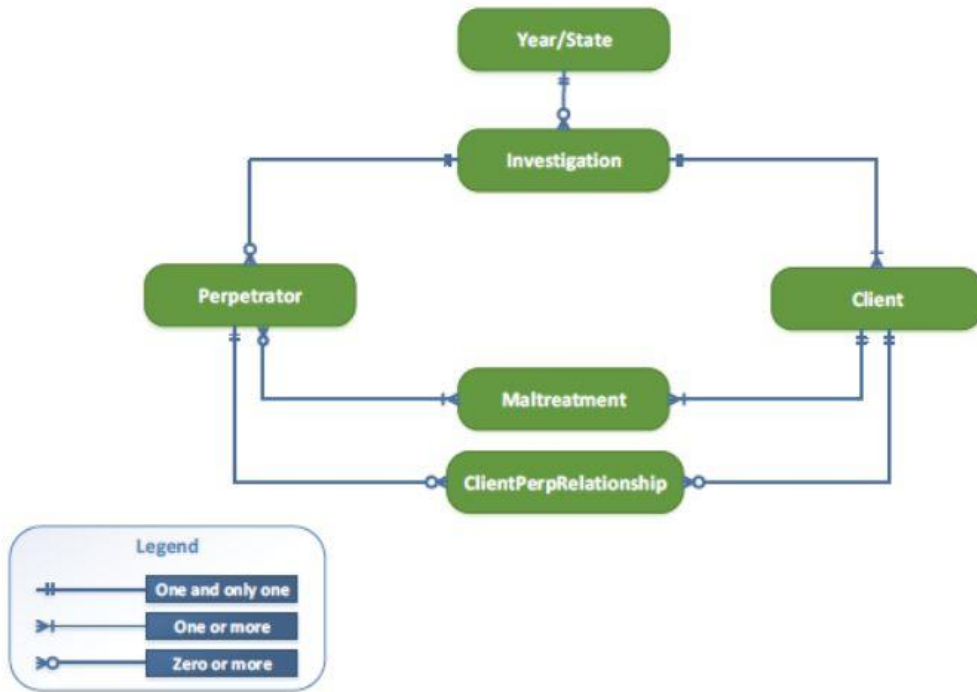
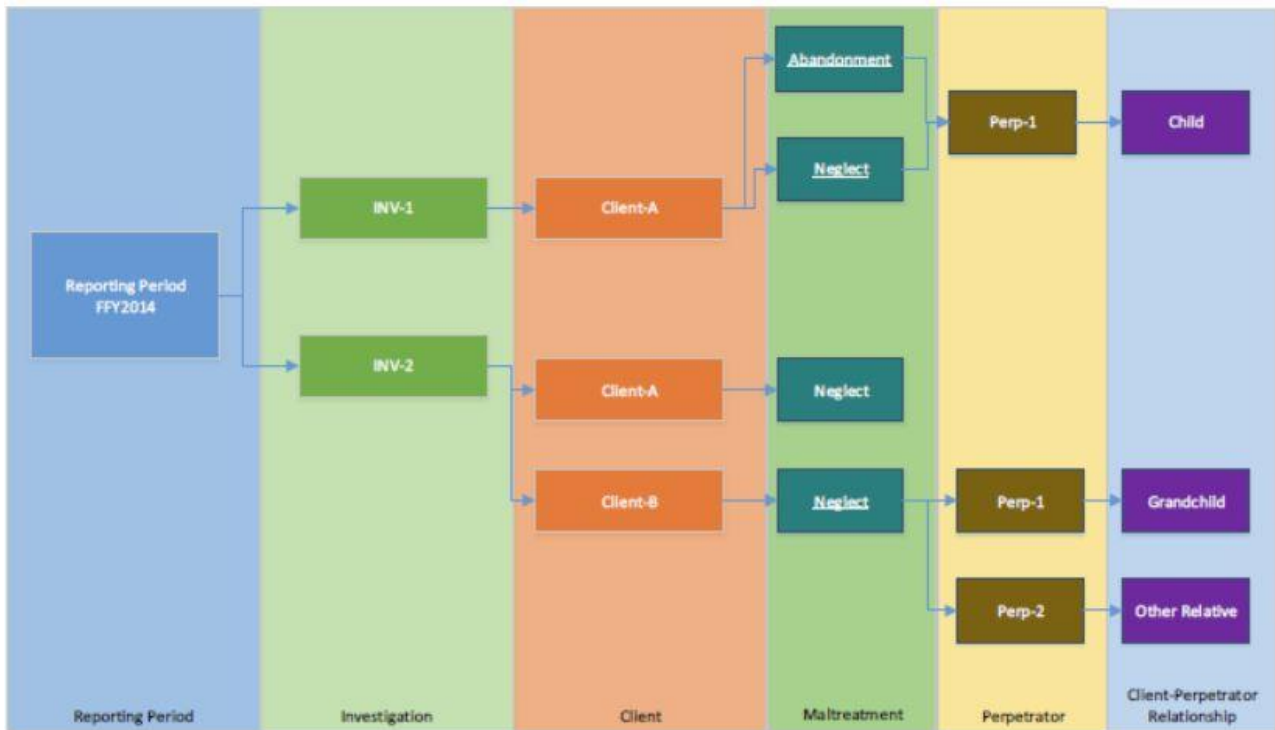


Figure 2. Example of Case Component Entities Relationships



On the following tables, the column “Cardinality” indicates if a data element can have multiple values. For example, a client may have received multiple types of benefits. An example of single cardinality is that there can be only one primary reason for case closure.

Some data elements have a tiered or nested structure of code values. For example, the data element race allows the client to be identified as Asian or as a specific Asian race. In such cases the specifications show the tiered structure by indenting the optional, more specific code values.

- 10 = American Indian or Alaska Native
- 20 = Asian (non-specific)
 - 21 = Asian Indian
 - 22 = Chinese
 - 23 = Filipino
 - 24 = Japanese
 - 25 = Korean
 - 26 = Vietnamese
 - 27 = Other Asian
- 30 = Black or African American
- 40 = Native Hawaiian or Other Pacific Islander (non-specific)
 - 41 = Native Hawaiian
 - 42 = Guamanian or Chamorro
 - 43 = Samoan
 - 44 = Other Pacific Islander
- 50 = White
- 60 = Other

If the state collects specific Asian descent, then the code values of 21-27 can be submitted. If the client is Asian of Filipino and Japanese descent, submit codes 23 and 24. The code value 20=Asian (non-specific) should not be submitted since the specific Asian descent is known.

Some NAMRS Code Values include “none.” The “none” code value should be used to indicate that the information being asked for in the specific data element is known to be “none” vs. “unknown” or “not evaluated.” For example, the Behavioral Health Screenings or Diagnoses data element includes the code value 10=none. If the screening was conducted and the results indicated the client did not have any behavioral health issues, then submit 10=none. If, however, the screening was not conducted and it is not known if the client has any behavioral health issues, then the data element should be submitted as “unknown.” The code value of “none” cannot be used in conjunction with other codes values for the data element.

Definitions of specific data element values can be found in the [NAMRS Definitions of Code Values](#).

Investigation Entity

Each reporting period submission may have multiple investigations.

Table E- 1. Investigation Entity

Element No.	Element Name	Element Description	Required	Cardinality	Type/Format	Code Values/Instructions
Inv1	Investigation ID	The unique identifier used by the state for each investigation. The identifier is assigned to a specific investigation and is only used once. The investigation ID is encrypted by the State for purposes of data submission.	Yes	Single	Encoded ID	See section, ID Hashing Guidelines, for ID encryption or de-identification.
Inv2	Report date	The month, day, and year the agency was notified of the suspected adult maltreatment.	No	Single	Date yyyy-mm-dd	This is the date that a report of suspected maltreatment was made. If an agency combines several reports into one investigation, the Report Date is the date of the earliest report. The determination of combining reports into one investigation is per each agency's policy and procedures.
Inv3	Report source	The role or profession of the person who made the report of the suspected adult maltreatment. Multiple report source code values can be submitted for the investigation.	No	Multiple	Enumeration (code)	1 = substitute decision maker 2 = in-home caregiver 3 = nursing home staff 4 = residential care community staff 5 = education professional 6 = financial professional 7 = law enforcement, judicial, or legal professional 8 = medical or health professional 9 = mental and behavioral health professional 10 = social services professional 11 = other professional 12 = relative 13 = neighbor, friend, other nonrelative, other nonprofessional 14 = self 15 = no role identified
Inv4	State/county FIPS code of investigative agency	The Federal Information Processing Series for state (2 digits) and county code (3 digits) of the APS agency. (Primary agency responsible for the determination of the investigation)	No	Single	FIPS (#####)	Code is the unique identification number assigned to each state and county under the Federal Information Processing Standards (FIPS) guidelines. See http://www.census.gov/geo/www/fips/fips.html . The Investigative Agency number may be a regional office or a local office depending upon the state APS administrative structure.

Element No.	Element Name	Element Description	Required	Cardinality	Type/Format	Code Values/Instructions
Inv5	Investigation start date	The date the investigation is assigned to an investigation worker. If the agency uses another date to indicate the start of an investigation, that date is used.	No	Single	Date yyyy-mm-dd	Each agency's policies and procedures define the date of an investigation. If an agency has both the date the investigation is assigned to an investigation worker and another date that is considered to be the start of the investigation, submit the date assigned to the worker.
Inv6	Investigation disposition date	The date that the agency completed dispositions on the allegations of maltreatment associated with the investigation.	No	Single	Date yyyy-mm-dd	Each agency's policies and procedures define this date. If maltreatment dispositions are associated with different dates, the Investigation Disposition Date should be the latest of these dates.
Inv7	Case closure date	The date that the agency completed all activities related to the investigation of the case.	Yes	Single	Date yyyy-mm-dd	Each agency's policies and procedures define the date of case closure. If the state data does not include the case closure date, the investigation disposition date may be used in this element.

Client Entity

Each investigation may have multiple clients. Each client can be associated with more than one investigation, but a separate client entity is required for each investigation. The determination as to whether an investigation includes multiple clients is left to each agency’s policies and procedures.

Table E- 2. Client Entity

Element No.	Element Name	Element Description	Required	Cardinality	Type/Format	Code Values/Instructions
Cl1	Client ID	The unique identifier used by the state for each client. The identifier is assigned to a specific client and is used to identify the same client across investigations and reporting periods. Data on multiple clients can be submitted for the investigation. The client ID is encrypted by the State for purposes of data submission.	Yes	Single	Encoded ID	See section, ID Hashing Guidelines, for ID encryption or de-identification.
Cl2	Maltreatment setting	The location where the alleged maltreatment occurred.	No	Single	Enumeration (code)	10 = own residence or private residence of relative or caregiver 20 = residential care community (non-specific) 21 = licensed residential care community 22 = unlicensed residential care community 30 = nursing home (non- specific) 31 = licensed nursing home 32 = unlicensed nursing home 40 = adult day services center (non-specific) 41 = licensed adult day services center 42 = unlicensed adult day services center 50 = place of business or other services 60 = other
Cl3	State/county FIPS code of client	The Federal Information Processing Series for state (2 digits) and county code (3 digits) of the client’s residence at the start of the investigation.	No	Single	FIPS (#####)	Code is the unique identification number assigned to each state and county under the Federal Information Processing Standards (FIPS) guidelines. See http://www.census.gov/geo/www/fips/fips.html

Element No.	Element Name	Element Description	Required	Cardinality	Type/Format	Code Values/Instructions
Cl4	Case closure reason	The primary reason why the case was closed.	No	Single	Enumeration (code)	10 = investigation completed 20 = investigation completed, and protective services case completed 30 = investigation unable to be completed (non-specific) 31 = investigation unable to be completed due to death of client during investigation 32 = investigation unable to be completed due to refusal of client 40 = protective services case opened but not completed (non-specific) 41 = protective services case closed due to death of client 42 = protective services case closed due to client decision to not continue 50 = other
Cl5	Age	The age of the client in years (at investigation start date).	No	Single	Enumeration (code)	18,19...74 = actual age 75 = 75 through 84 85 = 85 and older The Client Age is computed by subtracting the client's Date of Birth from the Investigation Start Date. If the age ranges between 18 and 74, the actual age is used. Ages of 75 through 84 inclusive are grouped and coded as 75. Ages of 85 or older are grouped and coded as 85. The reason for the grouping of older ages is to further protect the possible identification of the older cohort population.
Cl6	Gender identity	The actual or perceived gender-related characteristics of the client.	No	Single	Enumeration (code)	1 = male 2 = female 3 = transgender
Cl7	Sexual orientation	The client's enduring pattern of or disposition to experience sexual or romantic desires for, and relationships with, people of one's same sex, the other sex, or both sexes.	No	Single	Enumeration (code)	1 = straight 2 = gay/lesbian 3 = bisexual 4 = questioning 5 = other

Element No.	Element Name	Element Description	Required	Cardinality	Type/Format	Code Values/Instructions
Clt8	Race	The population(s) or group(s) that the client identifies as being a member. A client may have more than one race (multi-racial). For example, a client is Asian and White, the client should be reported with both race values. If specific races cannot be identified for a multiracial client, the client is reported as "Other".	No	Multiple	Enumeration (code)	10 = American Indian or Alaska Native 20 = Asian (non-specific) 21 = Asian Indian 22 = Chinese 23 = Filipino 24 = Japanese 25 = Korean 26 = Vietnamese 27 = Other Asian 30 = Black or African American 40 = Native Hawaiian or Other Pacific Islander (non-specific) 41 = Native Hawaiian 42 = Guamanian or Chamorro 43 = Samoan 44 = other Pacific Islander 50 = White 60 = Other
Clt9	Ethnicity	The affiliation of the client as Hispanic or Latino/a or non-Hispanic or Latino/a. Multiple ethnicity code values can be submitted for the client.	No	Multiple	Enumeration (code)	10 = yes, Hispanic or Latino/a, or Spanish origin (non-specific) 11 = Mexican, Mexican American, Chicano/a 12 = Puerto Rican 13 = Cuban 14 = other Hispanic, Latino/a, or Spanish origin 20 = no, not Hispanic or Latino/a, or Spanish origin
Clt10	Primary language	The primary language or method that the client uses for written and verbal communication.	No	Single	Enumeration (code)	1 = Arabic 2 = Chinese 3 = English 4 = French 5 = German 6 = Korean 7 = Russian 8 = Spanish or Spanish Creole 9 = Tagalog 10 = Vietnamese 11 = sign language 12 = assistive technology 13 = other If a person is fluent in more than one language or method of communication, choose the primary language the person uses with agency staff.

Element No.	Element Name	Element Description	Required	Cardinality	Type/Format	Code Values/Instructions
Cl11	Marital status	The client's status based on state residency laws.	No	Single	Enumeration (code)	1 = never married 2 = married 3 = domestic partner, including civil union 4 = divorced 5 = separated 6 = widowed 7 = other
Cl12	Schooling level	The highest educational degree attained by the client.	No	Single	Enumeration (code)	1 = less than high school 2 = high school diploma or equivalent 3 = associate's degree or bachelor's degree 4 = advanced degree
Cl13	Employment status	The involvement of the client in the labor force.	No	Single	Enumeration (code)	1 = employed 2 = unemployed 3 = not in labor force 4 = other If client is retired but also employed, use code 1. If client is participating in sheltered workshops or work centers for sub- minimum wages, use code value 4.
Cl14	Income level	The level of annual income of the client including all sources of income.	No	Single	Enumeration (code)	1 = less than \$25,000 2 = \$25,000-\$49,999 3 = \$50,000-\$74,999 4 = \$75,000-\$99,999 5 = \$100,000 or more
Cl15	Benefits	The federal and state benefits received by the client during the investigation. Multiple benefit code values can be submitted for the client.	No	Multiple	Enumeration (code)	1 = Medicaid 2 = Medicare 3 = publicly-subsidized housing 4 = Social Security Disability Insurance (SSDI) 5 = Social Security retirement benefits 6 = Supplemental Security Income (SSI) 7 = Temporary Assistance for Needy Families (TANF) 8 = veterans' disabled benefits 9 = Other These are benefits that the client is already receiving during the time period of the investigation. Benefits applied for on behalf of the client but not yet received are not included.
Cl16	Veteran status	The client's status related to the US Armed Forces.	No	Single	Enumeration (code)	1 = veteran 2 = non-veteran U.S. Armed Forces are made up of the five armed service branches: Air Force, Army, Coast Guard, Marine Corps, and Navy.

Element No.	Element Name	Element Description	Required	Cardinality	Type/Format	Code Values/Instructions
Cl17	Disabilities	The client's physical, emotional, and mental health issues that result in limitation in activities and restrictions to fully participate at school, work, or in the community. Multiple disability code values can be submitted for the client.	No	Multiple	Enumeration (code)	1 = ambulatory difficulty 2 = cognitive difficulty 3 = communication difficulty 4 = hearing difficulty 5 = independent living difficulty 6 = self-care difficulty 7 = vision difficulty 8 = other 9 = none Specific diseases and medical diagnoses are not listed as code values. However, an example would be if a client has had a CVA (stroke) and have ambulatory difficulty and communication difficulty, choose code values 1 and 3.
Cl18	ADL score	The client's score on the Katz Index of Independence in Activities of Daily Living (ADL).	No	Single	Numeric (6 integers)	Permissible values are 0-6
Cl19	IADL score	The client's score on the Lawton Instrumental Activities of Daily Living (IADL).	No	Single	Numeric (6 integers)	Permissible values are 0-8
Cl20	Behavioral health screenings or diagnoses	The results of assessments on the client, conducted by the APS agency. Multiple behavioral health code values can be submitted for the client.	No	Multiple	Enumeration (code)	1 = alcohol use disorder 2 = anxiety 3 = bipolar disorder 4 = dementia 5 = depression 6 = schizophrenia and other psychotic disorders 7 = substance use disorder 8 = traumatic brain injury 9 = other 10 = none APS staff may perform assessments or screenings which indicate that a client may need referral to a health care professional. These assessments/screenings may be indicated by choosing the appropriate code values. In addition, APS staff may have access to medical records indicating a client's diagnoses and if so choose appropriate code values.

Element No.	Element Name	Element Description	Required	Cardinality	Type/Format	Code Values/Instructions
Clt21	Living setting at start	The primary residential environment of the client at the start of investigation.	No	Single	Enumeration (code)	10 = own residence or residence of relative or caregiver 20 = residential care community (non-specific) 21 = licensed residential care community 22 = non-licensed residential care community 30 = nursing home (non-specific) 31 = licensed nursing home 32 = non-licensed nursing home 40 = other
Clt22	Living setting at close	The primary residential environment of the client at the time of case closure.	No	Single	Enumeration (code)	10 = own residence or residence of relative or caregiver 20 = residential care community (non-specific) 21 = licensed residential care community 22 = non-licensed residential care community 30 = nursing home (non-specific) 31 = licensed nursing home 32 = non-licensed nursing home 40 = other
Clt23	Substitute decision makers at start	The authorizations that are in effect related to health, personal, or financial decision making for the client at the start of the investigation. Multiple substitute decision maker code values can be submitted for the client.	No	Multiple	Enumeration (code)	10 = health care proxy in effect 20 = financial proxy in effect 30 = guardianship or conservatorship (non-specific) 31 = guardianship or conservatorship of person 32 = guardianship or conservatorship of property 40 = representative payee 50 = none
Clt24	Substitute decision makers at close	The authorizations that are in effect related to health, personal, or financial decision making for the client at time of case closure. Multiple substitute decision maker code values can be submitted for the client.	No	Multiple	Enumeration (code)	10 = health care proxy in effect 20 = financial proxy in effect 30 = guardianship or conservatorship (non-specific) 31 = guardianship or conservatorship of person 32 = guardianship or conservatorship of property 40 = representative payee 50 = none

Element No.	Element Name	Element Description	Required	Cardinality	Type/Format	Code Values/Instructions
Clt25	Services at start	The services known to the agency that the client was already receiving at the start of the investigation. Multiple service code values can be submitted for the client.	No	Multiple	Enumeration (code)	1 = care/case management services 2 = caregiver support services 3 = community day services 4 = education, employment, and training services 5 = emergency assistance and material aid services 6 = financial planning services 7 = housing and relocation services 8 = in-home assistance services 9 = legal services 10 = medical and dental services 11 = medical rehabilitation services 12 = mental health services 13 = nutrition 14 = public assistance benefits 15 = substance use services 16 = transportation 17 = victim services 18 = other services 19 = none
Clt26	Services APS	The services that the agency provided on behalf of the client during the investigation or while the agency kept an open case. Multiple service code values can be submitted for the client.	No	Multiple	Enumeration (code)	1 = care/case management services 2 = caregiver support services 3 = community day services 4 = education, employment, and training services 5 = emergency assistance and material aid services 6 = financial planning services 7 = housing and relocation services 8 = in-home assistance services 9 = legal services 10 = medical and dental services 11 = medical rehabilitation services 12 = mental health services 13 = nutrition 14 = public assistance benefits 15 = substance use services 16 = transportation 17 = victim services 18 = other services 19 = none Services provided by the agency may be provided by APS staff or budgeted funds for contractors to deliver client services.

Element No.	Element Name	Element Description	Required	Cardinality	Type/Format	Code Values/Instructions
Clt27	Services referred	The services for which the agency referred the client. Multiple services code values can be submitted for the client.	No	Multiple	Enumeration (code)	1 = care/case management services 2 = caregiver support services 3 = community day services 4 = education, employment, and training services 5 = emergency assistance and material aid services 6 = financial planning services 7 = housing and relocation services 8 = in-home assistance services 9 = legal services 10 = medical and dental services 11 = medical rehabilitation services 12 = mental health services 13 = nutrition 14 = public assistance benefits 15 = substance use services 16 = transportation 17 = victim services 18 = other services 19 = none
Clt28	Services at close	The services known to the agency that the client was receiving at the time of case closure. Multiple services code values can be submitted for the client.	No	Multiple	Enumeration (code)	1 = care/case management services 2 = caregiver support services 3 = community day services 4 = education, employment, and training services 5 = emergency assistance and material aid services 6 = financial planning services 7 = housing and relocation services 8 = in-home assistance services 9 = legal services 10 = medical and dental services 11 = medical rehabilitation services 12 = mental health services 13 = nutrition 14 = public assistance benefits 15 = substance use services 16 = transportation 17 = victim services 18 = other services 19 = none

Element No.	Element Name	Element Description	Required	Cardinality	Type/Format	Code Values/Instructions
Clt29	Interagency coordination	The agencies to which the client was referred. Multiple interagency coordination code values can be submitted for the client.	No	Multiple	Enumeration (code)	1 = law enforcement or prosecutorial offices 2 = Protection and Advocacy or Client Advocacy Program (CAP) 3 = state licensing agency 4 = State Medicaid Fraud Control Unit (MFCU) 5 = Long Term Care Ombudsman Program 6 = other 7 = none
Clt30	Previous report	The indication that the agency has information that the client was the subject of a previous report.	No	Single	Enumeration (code)	1 = yes 2 = no

Maltreatment Allegation Entity

Each client may have multiple maltreatment allegation entities within an investigation. Each maltreatment allegation entity must be composed of a maltreatment type and maltreatment disposition. NAMRS only allows each maltreatment type once per client per investigation and only one disposition per maltreatment type. For example, within an investigation, a client can have only one maltreatment allegation entity with neglect as the maltreatment type. A client can have multiple maltreatment allegation entities within the investigation, but the maltreatment type must be different for each one. A client can have more maltreatment allegation entities with the same maltreatment type in other investigations.

Some state systems allow multiple maltreatment types that are the same or similar for a client within an investigation. For example, a state may track more specific types of neglect such as, inadequate care and unsanitary conditions. Only one maltreatment allegation entity with neglect as the maltreatment type should be submitted for the client within the investigation. Follow the order of dispositions to decide which to submit if the dispositions are different: 1-Substantiated, 2- Inconclusive, 3-Unsubstantiated, and 4=Other. For example, Substantiated would trump Inconclusive as the disposition.

Table E- 3. Maltreatment Allegation Entity

Element No.	Element Name	Element Description	Required	Cardinality	Type/Format	Code Values/ Instructions
Mal1	Maltreatment type	The alleged maltreatment that is investigated.	Yes	Single (per entity)	Enumeration (code)	10 = abandonment 20 = emotional abuse 30 = exploitation (non- specific) 31= financial exploitation 32= other exploitation 40 = neglect 50 = physical abuse 60 = sexual abuse 70 = suspicious death 80 = self-neglect 90 = other
Mal2	Maltreatment disposition	The disposition of the alleged maltreatment.	Yes	Single (per entity)	Enumeration (code)	1 = substantiated 2 = inconclusive 3 = unsubstantiated 4 = other

Perpetrator Entity

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

Table E- 4. Perpetrator Entity

Element No.	Element Name	Element Description	Required	Cardinality	Type/Format	Code Values
Per1	Perpetrator ID	The unique identifier used by the state for the person who is found to be responsible for substantiated maltreatment(s). The identifier is assigned to a specific perpetrator and is used to identify the same perpetrator across investigations and reporting periods. The perpetrator ID is encrypted by the state for purposes of data submission.	Yes	Single	Encoded ID	See section, ID Hashing Guidelines, for ID encryption or de-identification.
Per2	Age	The age of the perpetrator in years (at investigation start date).	No	Single	Enumeration (code)	17 = 17 and younger 18,19...74 = actual age 75 = 75 through 84 85 = 85 and older The Perpetrator Age is computed by subtracting the perpetrator date of birth from the Investigation Start Date. If the age ranges between 18 and 74, the actual age is used. Age of 75 through 84 inclusive are grouped and coded as 75. Ages of 85 or older are grouped and coded as 85.
Per3	Gender identity	The actual or perceived gender- related characteristics of the perpetrator.	No	Single	Enumeration (code)	1 = male 2 = female 3 = transgender

Element No.	Element Name	Element Description	Required	Cardinality	Type/Format	Code Values
Per4	Race	The population(s) or group(s) that the perpetrator identifies as being a member. A perpetrator may have more than one race (multi-racial). For example, a perpetrator is Asian and White, the perpetrator should be reported with both race values. If specific races cannot be identified for a multiracial perpetrator, the perpetrator is reported as "Other".	No	Multiple	Enumeration (code)	10 = American Indian or Alaska Native 20 = Asian (non-specific) 21 = Asian Indian 22 = Chinese 23 = Filipino 24 = Japanese 25 = Korean 26 = Vietnamese 27 = Other Asian 30 = Black or African American 40 = Native Hawaiian or Other Pacific Islander (non-specific) 41 = Native Hawaiian 42 = Guamanian or Chamorro 43 = Samoan 44 = other Pacific Islander 50 = White 60 = Other
Per5	Ethnicity	The affiliation of the perpetrator as Hispanic or Latino/a or non-Hispanic or Latino/a. Multiple ethnicity code values can be submitted for the perpetrator.	No	Multiple	Enumeration (code)	10 = yes, Hispanic or Latino/a, or Spanish origin (non-specific) 11 = Mexican, Mexican American, Chicano/a 12 = Puerto Rican 13 = Cuban 14 = other Hispanic, Latino/a, or Spanish origin 20 = no, not Hispanic or Latino/a, or Spanish origin
Per6	Disabilities	The perpetrator's physical, emotional, and mental health issues that result in limitation in activities and restrictions to fully participate at school, work, or in the community. Multiple disability code values can be submitted for the perpetrator.	No	Multiple	Enumeration (code)	1 = ambulatory difficulty 2 = cognitive difficulty 3 = communication difficulty 4 = hearing difficulty 5 = independent living difficulty 6 = self-care difficulty 7 = vision difficulty 8 = other 9 = none Specific diseases and medical diagnoses are not listed as code values. However, an example is if a perpetrator has had a TBI (brain injury) and has hearing difficulty choose code 4.

Element No.	Element Name	Element Description	Required	Cardinality	Type/Format	Code Values
Per7	Behavioral health screenings or diagnoses	The results of assessments on the perpetrator, conducted by the APS agency. Multiple behavioral health code values can be submitted for the perpetrator.	No	Multiple	Enumeration (code)	1 = alcohol use disorder 2 = anxiety 3 = bipolar disorder 4 = dementia 5 = depression 6 = schizophrenia and other psychotic disorders 7 = substance use disorder 8 = traumatic brain injury 9 = other 10 = none APS staff may perform assessments or screenings which indicate that a perpetrator may need referral to a health care professional. These assessments/screenings may be indicated by choosing the appropriate code values. In addition, APS staff may have access to medical records indicating a perpetrator's diagnoses and if so choose appropriate code values.

Client Perpetrator Relationship Entity

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

Table E- 5. Client Perpetrator Relationship Entity

Element No.	Element Name	Element Description	Required	Cardinality	Type/Format	Code Values
CPR1	Cohabitation at start	The indication if the perpetrator and client are cohabitating at the start of the investigation.	No	Single	Enumeration (code)	1 = yes 2 = no
CPR2	Cohabitation at close	The indication if the perpetrator and client are cohabitating at the time of case closure.	No	Single	Enumeration (code)	1 = yes 2 = no
CPR3	Kinship relationship	The indication if the perpetrator is related to the client by affinity (blood, adoption, marriage, etc.).	No	Single	Enumeration (code)	10 = yes (non-specific) 11 = spouse 12 = domestic partner, including civil union 13 = parent 14 = child 15 = sibling 16 = grandparent 17 = grandchild 18 = other relative 20 = none
CPR4	Perpetrator association at start	The indication if the perpetrator has a caregiving relationship to the client at the start of the investigation.	No	Single	Enumeration (code)	10 = nursing home staff 20 = residential care community staff 30 = relative caregiver (non-specific) 31 = paid relative caregiver 32 = unpaid relative caregiver 40 = nonrelative caregiver (non-specific) 41 = paid nonrelative caregiver 42 = unpaid nonrelative caregiver 50 = other relationship 60 = none If the perpetrator has multiple associations to the client, choose primary association.

Element No.	Element Name	Element Description	Required	Cardinality	Type/Format	Code Values
CPR5	Perpetrator association at close	The indication whether the perpetrator has a caregiving relationship to the client at time of case closure.	No	Single	Enumeration (code)	10 = nursing home staff 20 = residential care community staff 30 = relative caregiver (non-specific) 31 = paid relative caregiver 32 = unpaid relative caregiver 40 = nonrelative caregiver (non-specific) 41 = paid nonrelative caregiver 42 = unpaid nonrelative caregiver 50 = other relationship 60 = none If the perpetrator has multiple associations to the client, choose primary association.
CPR6	Perpetrator substitute decision maker at start	Authorizations that the perpetrator has in relation to the client, and that are in effect, related to health, personal or financial decision making at the start of the investigation. Multiple substitute decision maker code values can be submitted for the client perpetrator relationship.	No	Multiple	Enumeration (code)	10 = health care proxy in effect 20 = financial proxy in effect 30 = guardianship or conservatorship (non-specific) 31 = guardianship or conservatorship of person 32 = guardianship or conservatorship of property 40 = representative payee 50 = none
CPR7	Perpetrator substitute decision maker at close	Authorizations that the perpetrator has in relation to the client, and that are in effect, related to health, personal or financial decision making at the time of case closure. Multiple substitute decision maker code values can be submitted for the client perpetrator relationship.	No	Multiple	Enumeration (code)	10 = health care proxy in effect 20 = financial proxy in effect 30 = guardianship or conservatorship (non-specific) 31 = guardianship or conservatorship of person 32 = guardianship or conservatorship of property 40 = representative payee 50 = none
CPR8	Perpetrator legal remedy Recommendation	The legal remedies that were recommended or sought by the APS agency regarding the status of the perpetrator. Multiple legal remedy recommendation code values can be submitted for the client perpetrator relationship.	No	Multiple	Enumeration (code)	1 = Removal of guardianship rights 2 = Restraining order on perpetrator regarding the client 3 = Eviction of perpetrator 4 = Restitution by perpetrator 5 = Other legal remedy 6 = None

ID Hashing Guidelines

NAMRS requires states to de-identify all the state system IDs that will be reported in the case component (Investigation ID, Client ID, Perpetrator ID). Selecting the methodology for de-identifying the IDs is up to state discretion. However, the IDs reported to NAMRS should be alphanumeric.

One effective way to do this is by using a hashing methodology. The ID Hashing Guidelines are:

- Each ID must be unique
- The method selected must give the same result every time the procedure is executed. In other words, a client ID must always yield the same hashed ID after processing.
- The hashed ID should only contain alphanumeric characters. No special characters are allowed.
- The state agency must maintain any algorithms, pass phrases, and keys used to hash the IDs.

A hashing algorithm is a one-way map function that maps any particular string to a fixed-length series of bytes. To do this, first decide on a password or passphrase. This is simply a string that will remain the same forever. The password can be the same for all the ID fields, or they can be different. The password for a particular field should always remain the same forever. When using a password or passphrase as input to a hashing algorithm, it is commonly called a “salt”.

Then for each ID field, do the following:

1. Prepend the salt to the ID. (This is the “salted input”)
2. Hash the salted input using the MD5 hashing algorithm. Regardless of the length of the input, MD5 will always produce 32 bytes of output.
3. Finally, convert the 32-byte result to a 32-character (hexadecimal) string that can easily be inserted into the XML file.

Example:

For MS SQL Server, use the following SQL to obtain the hashed ID:

```
DECLARE @clearTextId VARCHAR(100) = '123-45-6789'  
DECLARE @salt VARCHAR(100) = 'This is my complicated passphrase'
```

```
SELECT @clearTextId AS ClearText  
      ,@salt AS Salt  
      ,CONVERT(VARCHAR(32), HASHBYTES('MD5', @salt + @clearTextId),2) AS  
      HashedText
```

Appendix F: Case Component Validation Rules

XSD Validation Rules

The data for the Case Component is submitted in Extensible Markup Language(XML) format. A state user extracts the data from the state information system into the required XML format. The extracted file can be validated for XML structure and data element characteristics requirements using the XML Schema Document (XSD) file available on the NAMRS website: <https://namrs.net/XMLSchemas/NamrsCaseComponent.xsd>. The state user can perform the validation using their preferred XML validation software. XmlValidator (Sourceforge) is an open source XML validation software. XML Spy is a commercially available XML validator and editor. The XML file without any errors would be ready to be uploaded to NAMRS.

Table F- 1. XSD Validation Rules

Entity	Rule	Error Message
File Info	The Year in the file info must match the selected submission year.	The Fiscal Year in the <fileInfo> does not match the Fiscal Year selected when the file was uploaded.
File Info	The State in the file info must match the selected submission state.	The State in the <fileInfo> does not match the State selected when the file was uploaded.
All Data Elements with Code Values	All enumeration fields must have a valid NAMRS code or unknown tag.	The <elementname> element is invalid - The value <invalid code> is invalid according to its datatype 'Int' - The Enumeration constraint failed.
Investigation	Unknown tag must not be used in conjunction with valid codes for enumeration fields.	The element <element> has invalid child element <invalid element>.
Investigation	All Investigations must have a unique Investigation Id.	There is a duplicate key sequence <Investigation Id> for the 'uniqueInvestigationId' key or unique identity constraint.
Client	A Client must be related to an Investigation.	The element 'investigation' has incomplete content. List of possible elements expected: 'clients'.
Client	A Client must have a unique Client Id within the same Investigation.	There is a duplicate key sequence <Client ID> for the 'investigationClients' key or unique identity constraint.
Maltreatment	The same Maltreatment Type must not be repeated for a Client within the same Investigation.	There is a duplicate key sequence <Client ID, Maltreatment code> for the 'uniqueClientMaltreatments' key or unique identity constraint.
Maltreatment	All Maltreatments must be related to a Client.	The key sequence <client ID in maltreatment> in 'investigationClients' Keyref fails to refer to some key.
Perpetrator	A Perpetrator must be related to an Investigation.	The element 'investigations' has invalid child element 'perpetrators'. List of possible elements expected: 'investigation'.
Perpetrator	A Perpetrator must have a unique Perpetrator Id within the same Investigation.	There is a duplicate key sequence <Perp Id> for the 'investigationPerpetrators' key or unique identity constraint.
Relationship	A Client Perpetrator Relationship must be related to a Perpetrator and a Client.	The required attribute 'clientId' is missing. The required attribute 'perpetratorId' is missing.
Relationship	The same perpetrator and same client must not have more than one Client Perpetrator	There is a duplicate key sequence <Client ID, Perp ID> for the 'uniqueRelationship' key or unique identity constraint.

Data Validation Rules

When the XML file is uploaded to the NAMRS Website, the file is validated against the XSD. If the file passes without any errors, the data within the file is validated against data rules. A report of errors will be available should any of the rules are violated.

Table F- 2. Data Validation Rules

#	Rule	Path	Locator IDs	Error Message
N1010	A Client must have at least one Maltreatment.	caseComponent/investigation/clients/client	investigationId, clientId	This <client> element was removed. If there was a linked <relationship> element (relationship with perpetrator), it was removed as well.
N1020	If a Maltreatment refers to a Perpetrator, the Maltreatment must be Substantiated.	caseComponent/investigation/maltreatments/maltreatment/perpetratorRefs	investigationId, clientId, maltxTypeVal	This <perpetratorRefs> element was removed from the <maltreatment> element.
N1040	If the Report Date and Investigation Start Date are both not empty, then the Report Date must be less than or equal to the Investigation Start Date.	caseComponent/investigation	investigationId	This <reportDate> element was removed.
N1050	If the Report Date and Investigation Disposition Date are both not empty, then the Report Date must be less than or equal to the Investigation Disposition Date.	caseComponent/investigation	investigationId	This <reportDate> element was removed.
N1060	If the Report Date is not empty, then the Report Date must be less than or equal to the Case Closure Date.	caseComponent/investigation	investigationId	This <reportDate> element was removed.
N1070	If the Investigation Start Date and Investigation Disposition Date are not empty, then the Investigation Start Date must be less than or equal to the Investigation Disposition Date.	caseComponent/investigation	investigationId	This <investStartDate> element was removed.
N1080	If the Investigation Start Date is not empty, then the Investigation Start Date must be less than or equal to the Case Closure Date.	caseComponent/investigation	investigationId	This <investStartDate> element was removed.
N1090	If the Investigation Disposition Date is not empty, then the Investigation Disposition Date must be less than or equal to the Case Closure Date.	caseComponent/investigation	investigationId	This <dispDate> element was removed.
N1110	The race code value of 20 must not be used in conjunction with code values 21 through 27. The code value of 40 must not be used in conjunction with code values 41 through 44.	caseComponent/investigation/clients/client/race	investigationId, clientId	The <race> element was removed from this <client>.

#	Rule	Path	Locator IDs	Error Message
N1120	The ethnicity code value of 10 must not be used in conjunction with code values 11 through 14. The code value of 20 must not be used in conjunction with other code values.	caseComponent/investigation/clients/client/ethnicity	investigationId, clientId	The <ethnicity> element was removed from this <client>.
N1130	The disability code value of 8 must not be used in conjunction with other code values.	caseComponent/investigation/clients/client/disabilities	investigationId, clientId	The <disabilities> element was removed from this <client>.
N1140	The behavior health screening code value of 10 must not be used in conjunction with other code values.	caseComponent/investigation/clients/client/behaviorHealthScrns	investigationId, clientId	The <behaviorHealthScrns> element was removed from this <client>.
N1150	The behavior health diagnosis code value of 10 must not be used in conjunction with other code values.	caseComponent/investigation/clients/client/behaviorHealthDiags	investigationId, clientId	The <behaviorHealthDiags> element was removed from this <client>.
N1160	The substitute decision maker code value of 30 must not be used in conjunction with code values 31 and 32. The code value of 50 must not be used in conjunction with other code values.	caseComponent/investigation/clients/client/subDecMkrsStart	investigationId, clientId	The <subDecMkrsStart> element was removed from this <client>.
N1170	The substitute decision maker code value of 30 must not be used in conjunction with code values 31 and 32. The code value of 50 must not be used in conjunction with other code values.	caseComponent/investigation/clients/client/subDecMkrsClose	investigationId, clientId	The <subDecMkrsClose> element was removed from this <client>.
N1180	The service code value of 19 must not be used in conjunction with other code values.	caseComponent/investigation/clients/client/servicesStart	investigationId, clientId	The <servicesStart> element was removed from this <client>.
N1190	The service code value of 19 must not be used in conjunction with other code values.	caseComponent/investigation/clients/client/servicesAps	investigationId, clientId	The <servicesAps> element was removed from this <client>.
N1200	The service code value of 19 must not be used in conjunction with other code values.	caseComponent/investigation/clients/client/servicesReferred	investigationId, clientId	The <servicesReferred> element was removed from this <client>.
N1210	The service code value of 19 must not be used in conjunction with other code values.	caseComponent/investigation/clients/client/servicesClose	investigationId, clientId	The <servicesClose> element was removed from this <client>.
N1220	The interagency code value of 7 must not be used in conjunction with other code values.	caseComponent/investigation/clients/client/int erAgency	investigationId, clientId	The <interAgency> element was removed from this <client>.
N1230	The race code value of 20 must not be used in conjunction with code values 21 through 27. The code value of 40 must not be used in conjunction with code values 41 through 44.	caseComponent/investigation/perpetrators/perpetrator/race	investigationId, perpetratorId	The <race> element was removed from this <perpetrator>.
N1240	The ethnicity code value of 10 must not be used in conjunction with code values 11 through 14. The code value of 20 must not be used in conjunction with other code values.	caseComponent/investigation/perpetrators/perpetrator/ethnicity	investigationId, perpetratorId	The <ethnicity> element was removed from this <perpetrator>.
N1250	The disability code value of 8 must not be used in conjunction with other code values.	caseComponent/investigation/perpetrators/perpetrator/disabilities	investigationId, perpetratorId	The <disabilities> element was removed from this <perpetrator>.

#	Rule	Path	Locator IDs	Error Message
N1260	The behavior health screening code value of 10 must not be used in conjunction with other code values.	caseComponent/investigation/perpetrators/perpetrator/behaviorHealthScrns	investigationId, perpetratorId	The <behaviorHealthScrns> element was removed from this <perpetrator>.
N1270	The behavior health diagnosis code value of 10 must not be used in conjunction with other code values.	caseComponent/investigation/perpetrators/perpetrator/behaviorHealthDiags	investigationId, perpetratorId	The <behaviorHealthDiags> element was removed from this <perpetrator>.
N1310	The substitute decision maker code value of 30 must not be used in conjunction with code values 31 and 32. The code value of 50 must not be used in conjunction with other code values.	caseComponent/investigation/relationships/relationship/perpSubDecMkrsStart	investigationId, clientId, perpetratorId	The <perpSubDecMkrsStart> element was removed from this <relationship>.
N1320	The substitute decision maker code value of 30 must not be used in conjunction with code values 31 and 32. The code value of 50 must not be used in conjunction with other code values.	caseComponent/investigation/relationships/relationship/perpSubDecMkrsClose	investigationId, clientId, perpetratorId	The <perpSubDecMkrsClose> element was removed from this <relationship>.
N1330	The legal remedy code value of 6 must not be used in conjunction with other code values.	caseComponent/investigation/relationships/relationship/perpLegalRem	investigationId, clientId, perpetratorId	The <perpLegalRem> element was removed from this <relationship>.
N2010	A Perpetrator must be related to at least one Substantiated Maltreatment.	caseComponent/investigation/perpetrators/perpetrator	investigationId, perpetratorId	The <perpetrator> element was removed. If there was a linked <relationship> element (relationship with client), it was removed as well.
N2020	Each Relationship must have at least one non-unknown attribute specified.	caseComponent/investigation/relationships/relationship	investigationId, clientId, perpetratorId	The <relationship> element was removed.
N2030	An Investigation must be related to at least one Client.	caseComponent/investigation	investigationId	The <investigation> element was removed.
N2040	The Case Closure Date must be within the Reporting Period.	caseComponent/investigation	investigationId	The <investigation> element was removed.