

Report 5349 – CAPS Investigation Detail

Last Updated: 8/4/2008

Report Number: 5349
Report Name: CAPS Investigation Detail
Agency: DPHHS
Division Using Report: Child and Family Services
Report Sponsor: **Ryan Tofflemire**
Report Type: RDS

Report Summary:

This report summarizes report/referrals with statistical information regarding the number of allegations reported, allegation findings and actions taken. Totals are provided for the number of children reported, females, males and unknowns. The total number of referrals is also reported.

Report Purpose:

The CAPS Investigation Detail is used to track detailed information about CPS reports of abuse and neglect.

Please Note:

Per CFSD policy effective September 2007, Investigation Length is derived from the report received date of a referral and the investigation end date.

DocuAnalyzer Model Available: No
Screens Used to Generate Report: RRD1, RRD2, PERD, USMD
Frequency: Annually
Run Date: 10th Calendar day of July and 15th Calendar day of October
Reporting Period: Previous fiscal year

Criteria for Extracting Data

It is important to note that the extract programs for this are used by other reports. For this report only the 'CPS' report/referrals will appear.

- The referral must be received within the reporting period

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- The referral must be ‘CPS’
- There must be a person attached to the referral with a client category of ‘CH’ (Child)
- There must be a worker assigned to the report/referral

Report Data Fields

Field Name	Field Length	Notes
REGION	1	This is the region code for the county on the referral on RRD1.
REGION DESCRIPTION	20	This is the region description for the county on the referral on RRD1.
COUNTY	3	This is the county code on the referral on RRD1.
COUNTY DESCRIPTION	28	This is the county description on the referral on RRD1.
WORKER	8	This is the identification number of the worker assigned to the referral on RRD1.
WORKER NAME	30	This is the name of the worker assigned to the referral on RRD1. Name is from USMD.
REPORT NUMBER	7	This is the referral number on RRD1.
CAPS ID	7	This is the CAPS ID of the client on the referral on RRD2.
CLIENT NAME	20	This is the client’s declared first and last name on PERD.
AGE	3	This is the client’s age at the time the report was received. This is calculated using referral report request received date on RRD1 and client’s birth date on PERD. If the birth date is zero or invalid, it will be set to zero with a ‘U’ printed next to it.
R/R DATE	8	This is the referral report request received date on RRD1.
DET-ALG-REL	3	There are three sets of these fields per client line. It will display the determination, allegation and relationship for a client on a referral on RRD2.
ACTIONS TAKEN	3	There are five occurrences of this field per client line. These are the actions taken for the referral as reported on RRD2.
INV END	8	This is the investigation end date for a referral on RRD1.
TOTL DAYS	4	This is a calculated value and is the number of days between the report request received date and investigation end date on RRD1.
CHILDREN REPORTED	5	This is a calculated value and is the number of children on a CPS referral whose role is ‘V’ or ‘B’ on RRD2. This will display for region, county and state.

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FEMALES	5	This is a calculated value and is the number of children reported that have a sex code of F (female) on RRD2.
MALES	5	This is a calculated value and is the number of children reported that have a sex code of M (male) on RRD2.
SEX UNKNOWN	5	This is a calculated value and is the number of children reported that have a sex code of U (unknown/unborn) on RRD2.
TOTAL REFERRALS	5	This is a calculated value and is the total number of referrals per county, region or state on this report.

RDS Report Layout –

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DEPARTMENT OF PUBLIC HEALTH AND HUMAN SERVICES
CHILD AND ADULT PROTECTIVE SERVICES
DETAIL REPORT OF CHILD PROTECTIVE SERVICES INVESTIGATIONS FOR FISCAL YEAR
REPORTING PERIOD: 03/01/2008 TO 03/31/2008

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RUN DATE.. 07/01/08

REGION - 4: SOUTHWESTERN REGION
COUNTY - 025: LEWIS & CLARK
WORKER - C7

REPORT NUMBER	CAPS ID	CLIENT NAME	AGE	R/R DATE	----- ALLEGATIONS -----			ACTIONS TAKEN	INV END	TOTL DAYS
					DET-ALG-REL	DET-ALG-REL	DET-ALG-REL			
1067	1065	CHAMBERLIN, CODY	10	03/01/08	SUB-ABA-ADA			TLC	03/01/08	1
1068	1066	COATS, DUSTY	10	03/01/08	SUB-ABA-ADA			TLC	03/13/08	13
1069	1065	CHAMBERLIN, CODY	10	03/01/08	SUB-ABA-ADA			TLC	03/19/08	19
1070	1066	COATS, DUSTY	10	03/01/08	SUB-ABA-ADA			TLC	03/27/08	27
1071	1065	CHAMBERLIN, CODY	10	03/01/08	SUB-ABA-ADA			TLC	04/03/08	34
1072	1065	CHAMBERLIN, CODY	10	03/01/08	SUB-ABA-ADA			TLC	04/09/08	40
1073	1066	COATS, DUSTY	10	03/01/08	SUB-ABA-ADA			TLC	04/18/08	49
1074	1066	COATS, DUSTY	10	03/01/08	SUB-ABA-ADA			TLC	04/19/08	50
1075	1065	CHAMBERLIN, CODY	10	03/01/08	SUB-ABA-ADA			TLC	04/29/08	60
1076	1066	COATS, DUSTY	10	03/01/08	SUB-ABA-ADA			TLC	04/30/08	61

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REPORTING PERIOD: 03/01/2008 TO 03/31/2008

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STATE TOTALS

CHILDREN REPORTED : 10
FEMALES : 5
MALES : 5
SEX UNKNOWN : 0
TOTAL REFERRALS : 10

TOTAL REPRESENTS THE NUMBER OF REFERRALS AND IS NOT AN UNDUPLICATED CLIENT COUNT.
INVESTIGATION TIMELINES START WITH R/R DATE PER CFSB POLICY EFFECTIVE SEPTEMBER 2007.