

Long Term Care Database

Reference Guide For Years 2008-2014

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How to obtain more information

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What's new?

Starting April 1, 2007, the following changes were made to the New Brunswick LTC system:

- Move from a cost-based to an hours-based policy with respect to home support services.
- Restoring of the maximum number of hours of home support from 170 to 215 hours per month.
- Increase of the hourly rate for home support services by 3.9 per cent to \$13.13 from \$12.64.
- Increase of the Level 1 rate for subsidized clients in special care homes from \$38.59 to \$42.59 per day on January 1, 2007 and to \$74 per day on April 1, 2007.
- Increase of the Level 2 rate for subsidized clients in special care homes from \$70.59 to \$74 per day.
- Increase of the hours of care in nursing homes to 3.0 per day.
- Change in the Standard Family Contribution policy from a means based test to an income-based test. This means that assets are no longer considered when calculating clients' contribution to the cost of their care.
- Covering for nursing home health care costs; and residents only required to pay a maximum of \$70/day for room and board.
- Repealing of the legislation that allowed nursing homes to charge private pay residents five per cent over the per diem rate.
- Increase of the Comfort and Clothing allowance for nursing home and special care home residents by five per cent.
- Increase in the maximum hours of care per month for home care up to a maximum of 215 hours, and 336 hours for individuals who require additional supports.
- Provision of a \$16 a day supplement to assist special care home operators to continue to care for individuals while they await nursing home placement.

Starting December 2013, Income from Canada Pension Plan, Guaranteed Income Supplement, Old Age Security and Other sources are available as client income sources in the LTC database.



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1. About this guide

This reference guide is intended for users of the Long Term Care Database. This guide provides an overview of the data, the general methodology used in its creation and important technical information. It contains operational procedures as well as table and field descriptions. The development of this document is an ongoing process that will be updated with changes that occur in the Long Term Care data.

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2. Overview

The Long Term Care database is a digital document which contains details on business processes and timestamps of situations, assessments, caseloads, and payments for serving long term care clients in the Province of New Brunswick.

Data Range

Each table in LTC data has a time stamp variable indicating which month the data was originally collected. The LTC database contains information of Long Term Care clients and business processes of the Long Term Care program during six fiscal years (April 1st 2008 until March 31st 2014).

Data Source

New Brunswick Department of Social Development

How to cite this guide

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How to cite this product

New Brunswick Institute for Data, Research and Training. (2016). Long Term Care Database for 2008 to 2014.

Acknowledgements

The Long Term Care Database is used with the permission of the New Brunswick Department of Social Development.



3. About this product

Purpose of the product

The purpose of the Long Term Care (LTC) database is to provide usable and linkable New Brunswick LTC data to researchers for public health and other research as well as for the development of population estimates and projections.

Definitions and concepts

Long-Term Care Services refer to a range of personal support, physical, social and mental health services required by individuals who, because of long term functional limitations, need assistance to function as independently as possible.

'Client' refers to a recipient of long term care.

Content

This version of the Long Term Care database contains thirteen (13) groups of data, shown below:

below.	
Field	Field Name
1	Caseload-Individuals
2	Caseload
3	Situation-Individuals
4	Situation
5	Situation Referrals
6	Assessment by Clients
7	Payment
8	Service Referrals
9	Service Requisitions
10	Service Requisition Other Cost
11	Services
12	Resources
13	Legal Details

General methodology

LTC data extracted from the New Brunswick families ORACLE database and collected from the New Brunswick Department of Social Development monthly spreadsheets are prepared - direct identifiers, such as Medicare numbers, removed or scrambled – for privacy protection. This data, which is linkable to other datasets, is accessible to researchers at NB-IRDT.



Limitations

Seniors who are able to purchase long term care services without financial assistance from government, make their own arrangements with home support agencies and special care home operators, making it difficult to determine how many seniors in the province are actually receiving long-term care services.

Comparison to other products/versions

Not applicable

Using with other products

Not applicable

Reference Date

2008 - 2014 (Fiscal years)



4. Technical specifications

Record layouts and data descriptions

1. Caseload - Individuals

Type ¹	Variable name	Description
С	Region	Case region code
C	Service_Center	Service center code
C	Program	Case program code
C	Target_Group	Target group code
N	Case_ID	Case unique identifier
C	Status	Case status code
С	Status_Reason	Status reason code
N	Effective_Date	Case effective date
N	Individual_ID	Individual unique identifier
C	Involvement	Case members' relationship code
N	Start_Date	Case start date
N	End_Date	Case end date
N	Number_of_Cases_Involving_Individual	Number of individual-associated cases
N	Date_of_Birth	Individual Birth date
N	Age	Individual age
C	Gender	Individual gender code
C	Marital_Status	Individual marital status code
C	Citizenship	Individual citizenship code
С	Language_of_Service	Service provider language code
С	Primary_Language	Individual primary language code
C	Education_Level	Individual education level code
C	Employment_Status	Individual employment status code
С	First_Nations_Status	Individual First Nations status code
C	First_Nation_Community	Individual First Nation community code
C	Residence_Type	Individual residence type code
C	Previous_Institutional_Care	Individual previous care institution code
N	Case_Plan_ID	Unique case plan identifier
N	Plan_Number	Case plan version number
C	Goal_Description	Case plan goal code
С	Case_Plan_Status	Case plan status code
N	Case_Plan_End_Date	Case plan end date
С	Progress_Indicator	Case plan progress code
N	Anticipated_Completion_Date	Case plan anticipated completion date
N	Case_Plan_Effective_Date	Case plan effective date
N	Last_Update_Date	Case plan last update date
N	Last_Review_Date	Case plan last review date



N	Next_Review_Date	Case plan next review date
N	Report Date	Case report writing date

The type 'N' refers to numeric values while 'C' refers to both alphabetic and numeric characters.

Region

Code which indicates the region of the province from which a case originates as shown below:

Code	Region description	
8	Region 1 – Moncton	
12	Region 2 - Saint John	
20	Region 3 – Fredericton	
30	Region 4 – Edmundston	
34	Region 5 – Restigouche	
42	Region 7 – Miramichi	
46	Region 6 – Chaleur	
99	Region 8 - Acadian Peninsula	
PROV	Central Office	
RG10	St. Mary's First Nation ²	
RG11	Centralized Intake ³	
RG12	AHESS ⁴	

The 'St. Mary's First Nation' program is only for child protection.

The region 'Centralized Intake' refers to a pilot project for adult and child protection.

The region 'AHESS' refers to After Hours Emergency Social Services.

Service_Center

Code which indicates which service center a case is associated with as shown below:

Code	Service center description
0	St. Mary's First Nation
1	Centralized Intake
2	AHESS
4801	Moncton
4802	Richibucto
4803	Sackville
4901	Saint John
4902	Sussex
4903	St. Stephen
5601	Bathurst
5901	Fredericton
5902	Woodstock
5903	Perth



6801	Edmundston
6802	Grand Falls
6901	Campbellton
6902	Kedgwick
7692	Central Office
7701	Newcastle
7702	Neguac
7703	Chatham
7801	Caraquet
7802	Shippagan
7803	Tracadie

The corresponding server centers for each region are:

Region name	Service center
AHESS	AHESS
Central Office	Central Office
Centralized Intake	Centralized Intake
Region 1 – Moncton	Moncton
Region 1 – Moncton	Richibucto
Region 1 – Moncton	Sackville
Region 2 - Saint John	Saint John
Region 2 - Saint John	Sussex
Region 2 - Saint John	St. Stephen
Region 3 – Fredericton	Woodstock
Region 3 – Fredericton	Fredericton
Region 3 – Fredericton	Perth
Region 4 – Edmundston	Edmundston
Region 4 – Edmundston	Grand Falls
Region 5 – Restigouche	Kedgwick
Region 5 – Restigouche	Campbellton
Region 6 – Chaleur	Bathurst
Region 7 – Miramichi	Newcastle
Region 7 – Miramichi	Neguac
Region 7 – Miramichi	Chatham
Region 8 - Acadian Peninsula	Caraquet
Region 8 - Acadian Peninsula	Shippagan
Region 8 - Acadian Peninsula	Tracadie
St. Mary's First Nation	St. Mary's First Nation



Program

Code which indicates which program a case is associated with as shown below:

Code	Program description
AIS	Autism Intervention Services
AP	Adult Protection
ASM	Assessment Services
BPS	Birth Parent Services
CBS	Com.Services for Seniors
CBSNC	Serv.Spec.Needs Child.
CC	Child in Care
СР	Child Protection
CSD	Com.Serv.Disabled Adults
DSP	Disability Support Program
ECS	Early Childhood Services
EMO	Emergency Measures Organ
FAM	General Family Services
FES	Family Enhancement Services
INF	General Information
LTC	Long Term Care
NH	Nursing Home
OPS	One Parent Services
RPSS	RPSS – Conversion
SAC	Spe.Serv.Adopted Children
SAR	Star Program
SSE	Support Services to Education
YCJA	Youth Criminal Justice Act
YOA	Young Offenders in Open Custody

Target_Group

This indicates which target group a case is associated with. Individuals involved in a case are classified as belonging to a particular target group. Programs are also associated with target groups.

Code	Description
-65	Adults Under 65
65+	Adults 65 And Over
AFLA	Alternate Family Living
APC	Adoles. Parents and Children
ARF3B	Adult Res. Facility - Level 3B
ARFL1	Adult Res. Facility - Level 1
ARFL2	Adult Res. Facility - Level 2



ARFL3 Adult Res. Facility - Level 3
ARFL4 Adult Res. Facility - Level 4
C Com.Residence. –Grandfather
CMP Child. Maintenance Payments

CMPLX Complex Case

DIS Neg/Abused Adults Under 65

DVAAD DVA Admission
EI Early Intervention
ES Enriched Services
GAR Guardianship

GARCX Guardianship - Complex Case
GRF Grandfather Client Group
HRD High Risk Disabled Adults

HRS High Risk Intakes

IDC Integrated Daycare

IH In Home

IH+EN In Home 65+ / Enhanced IH+H In Home 65+ / High IH+L In Home 65+ / Low IH+M In Home 65+ / Medium

IH-65In Home – 65In Home 65 +LTC Client GroupNHNursing Home

NHP Nursing Home Payments

NOT Not Applicable

NSFN Non-Status First Nations

PGEDU Post Guardianship Educational PGS Post Guardianship Support

PRES Preschool
PSY Psychologist
REG Regular

REGAD Regular Admission
RP Restigouche Project
SAP Special Admission Policy

SOCAD Social Admission
SPC Special CBSD
SW Social Worker
U ARF-Grandfather
UM Unmarried Mothers

VCS Voluntary Care/Sup. Agreement



VRD	Voc.Rehab. For Disabled Person
VSP	Special Voc.Rehab for Disabled
WOJ	Wards - Other Jurisdictions

The corresponding target groups for programs are:

Program	Target Group
Adult Protection	Adults 65 And Over
Adult Protection	Adults Under 65
Adult Protection	Neg/Abused Adults Under 65
Adult Protection	Not Applicable
Assessment Services	Not Applicable
Autism Intervention Services	Preschool
Birth Parent Services	High Risk Intakes
Birth Parent Services	Regular
Child in Care	Child. Maintenance Payments
Child in Care	Guardianship
Child in Care	Guardianship - Complex Case
Child in Care	Non-Status First Nations
Child in Care	Not Applicable
Child in Care	Post Guardianship Educational
Child in Care	Post Guardianship Support
Child in Care	Voluntary Care/Sup. Agreement
Child in Care	Wards - Other Jurisdictions
Child Protection	Complex Case
Child Protection	Non-Status First Nations
Child Protection	Not Applicable
Com.Serv.Disabled Adults	Grandfather Client Group
Com.Serv.Disabled Adults	High Risk Disabled Adults
Com.Serv.Disabled Adults	LTC Client Group
Com.Serv.Disabled Adults	Not Applicable
Com.Serv.Disabled Adults	Regular
Com.Serv.Disabled Adults	Special CBSD
Com.Serv.Disabled Adults	Special Voc.Rehab for Disabled
Com.Serv.Disabled Adults	Voc.Rehab. for Disabled Person
Com.Services for Seniors	Enriched Services
Com.Services for Seniors	Grandfather Client Group
Com.Services for Seniors	LTC Client Group
Com.Services for Seniors	Not Applicable
Com.Services for Seniors	Nursing Home
Com.Services for Seniors	Nursing Home Payments



Com.Services for Seniors Regular

Disability Support ProgramAdult Res. Facility - Level 1Disability Support ProgramAdult Res. Facility - Level 2Disability Support ProgramAdult Res. Facility - Level 3Disability Support ProgramAdult Res. Facility - Level 4Disability Support ProgramAlternate Family Living

Disability Support ProgramComplex CaseDisability Support ProgramIn Home

Disability Support Program Restigouche Project **Early Childhood Services Early Intervention Early Childhood Services Integrated Daycare Early Childhood Services** Not Applicable **Emergency Measures Organ.** Not Applicable **Family Enhancement Services** Not Applicable **General Family Services** Not Applicable **General Information** Not Applicable

Long Term CareAdult Res. Facility - Level 3Long Term CareAdult Res. Facility - Level 3BLong Term CareAdult Res. Facility - Level 4Long Term CareAdult Res. Facility - Level 5

Long Term CareAdults 65 And OverLong Term CareAdults Under 66

Long Term CareAlternate Family LivingLong Term CareARF-GrandfatherLong Term CareARF-Grandfather

Long Term Care Com.Residence. -Grandfather

Long Term Care In Home – 65
Long Term Care In Home 65 +

Long Term CareIn Home 65+ / EnhancedLong Term CareIn Home 65+ / HighLong Term CareIn Home 65+ / LowLong Term CareIn Home 65+ / MediumLong Term CareSpecial Admission Policy

Nursing HomeDVA AdmissionNursing HomeRegular AdmissionNursing HomeSocial Admission

One Parent Services Adoles. Parents and Children

One Parent ServicesNot ApplicableOne Parent ServicesUnmarried MothersRPSS – ConversionNot ApplicableServ.Spec.Needs Child.Complex Case



Serv.Spec.Needs Child.	Not Applicable
Serv.Spec.Needs Child.	Regular
Spe.Serv.Adopted Children	Complex Case
Spe.Serv.Adopted Children	Not Applicable
Star Program	Not Applicable
Support Services to Education	Not Applicable
Support Services to Education	Psychologist Psychologist
Support Services to Education	Social Worker
Young Offenders in Open Custody	Not Applicable
Youth Criminal Justice Act	Not Applicable

Case_ID

This uniquely identifies a case. This code is created by the Department of Social Development through an internal de-identification process.

Status

Code which indicates the current status of a case as shown below:

Code	Description
1	Open
2	Closed
3	Pending

Status_Reason

Code which indicates the reason for the current status of a case as shown below

Code	Description
1	Newly Opened
10	Client No Longer Eligible
11	Client Miscarried
100	Referred Out
88C	New Criteria/88
ADO	Adoption Finalized
AGE	No Longer Meets Age Criteria
BD	Baby Died
CRS	Client Refused Services
CRT	Court Decision
DEA	Client Died
DEP	Dept Withdrew Service
DIS	Dept Discontinued Program
ECI	Early Childhood Decision



EMP	Serv. Provider Trans. To EMP
INS	Client Entered Institution
LTC	Meet LTC Criteria
MAR	Client Married-CC Only
MET	Service Needs Met
MIL	Client Joined Military-CC Only
MOV	Client Moved
N	Newly Opened
OTH	Other
PAR	Released to Parent/Guardian
R	Reopened
RSP	Released to Own Responsibility
Т	Transfer from Other Reg. In NB
TNH	Trans Nursing Home Services
TRG	Dept Transf GAR Out of NB
TRN	Dept Transferred to Other Prog
TRO	Dept Transferred to Other Dept
WTH	Client Discharged Self

Effective_Date

Date (YYYY-MM-DD) on which the current status of a case became effective. The minimum value is 2008-04-01 and maximum value 2014-03-31.

Individual_ID

This uniquely identifies the Long Term Care client associated with a case.

Involvement

Code which indicates the relationship of other individuals involved in a case to the head of the case:

Code	Description
01	Head of Case
11	Spouse/Common Law Spouse
21	Child
22	Grandchild
23	Foster Child
31	Sibling
41	Parent
42	Foster Parent



43	Maternal Grandparent(S)
44	Paternal Grandparent(S)
51	Aunt/Uncle
52	Other Relative
61	Legal Guardian
71	Other Non-Relative
81	Unknown
85	Ex-Spouse
98	ECS Child
99	CDC Child

Start Date

Date (YYYY-MM-DD) on which a case started with the Department of Social Development. The minimum value is 2008-04-01 and maximum value 2014-03-31.

End_Date

Date (YYYY-MM-DD) on which a case ended with the Department of Social Development. The minimum value is 2008-04-01 and maximum value 2014-03-31.

Number_of_Cases_Involving_Individual

This is the number of cases associated with a particular individual.

Date of Birth

Date (YYYY-MM-DD) of birth of the individual associated with a case.

Age

Age (NNN) of an individual associated with a case at the reporting year and month. It is calculated using the individual's date of birth.

Gender

Code which indicates the sex of an individual associated with a case.

Code	Description
1	Male
2	Female
3	Unknown
Α	<none></none>

Marital Status

Code which indicates the marital status of an individual associated with a case as shown below:



Code	Description
1	Single
2	Married
3	Common-Law Spouse
4	Separated
5	Divorced
6	Widowed
7	Other
8	Separated
10	Common-Law Spouse
Α	Unknown
Α	Single
В	Married
С	Separated
D	Divorced
E	Widowed
F	Any Marital Status Accepted

Citizenship

Code which indicates the citizenship of an individual associated with a case as shown below:

Code	Description
0	Unknown
Α	Canadian
В	Landed Immigrant
С	Visitor - Student Visa
D	Visitor - Working Visa
E	U.S. Citizen
F	Other

Language_of_Service

Code which indicates what language was used in providing service to an individual, as shown below:

Code	Description
0	Unknown
01	English
02	French
AAAAA	<none></none>



Primary_Language

Code which indicates the primary language of an individual associated with a case, as shown below:

Primary Language	Primary Language Description
0	Unknown
01	English
02	French
1	English
10	Italian
2	French
3	Bilingual
Α	English
AAAAA	<none></none>
В	French
С	German
D	Micmac
DUT	Dutch
E	Maliseet
ENG	English
F	Dutch
FRN	French
G	Any Language Accepted
GER	German
Н	Spanish
ITA	Italian
MAL	Maliseet
MIC	Micmac
OTH	Other
SPA	Spanish

Education_Level

Code which indicates the level of education of an individual associated with a case, as shown below:

Code	Description
0	Unknown
1	Preschool
2	Kindergarten
3	Grade One
4	Grade Two
5	Grade Three



6	Grade Four
7	Grade Five
8	Grade Six
9	Grade Seven
Α	Grade Eight
В	Grade Nine
С	Grade Ten
D	Eleven-Quebec-High School Diploma
E	Grade Twelve (High School Diploma)
ELEM	Elementary School (Gr 1-6)
G	Post-Secondary/Non-University
Н	Some University
1	University with Degree
J	Some Post Graduate
JRHI	Junior High (Gr 7-9)
K	Post Graduate with Degree
NONE	None
OTHR	Other
SNHI	Senior High (Gr 10-12)

Employment_Status

Code which indicates the employment status of an individual associated with a case, as shown below:

Code	Description
0	Unknown
11	Employed Full Time
12	Employed Part Time
13	Employed Seasonal
14	Employed in Job Training
20	Not Applicable
21	Not Employable
22	Not Employed-Looking Full Time
23	Not Employed-Looking Part Time
24	Not Employed-Not Looking
25	Student
26	Retired
Α	Employment Full Time
В	Employment Part Time
С	Seasonal
D	Training/Workshop



E	Not Employable
F	Not Employed-Look. Full Time
G	Not Employed-Look. Part Time
Н	Not Employed-Not Looking
1	Student/Retired
J	No Requirement

First_Nations_Status

Code which indicates the First Nations status of an individual associated with a case, as shown below:

Code	Description
0	Non First Nation
1	First Nation
2	Unknown

First_Nation_Community

Code which indicates the First Nation community an individual belongs to, if individual is First Nations, as follows:

Code	Description	
0	Unknown	
72	Elsipogtog (Big Cove)	
73	Bouctouche	
74	Esgenoopetitj (Burnt Church)	
75	Madawaska Maliseet (St. Basile)	
76	Eel Ground	
77	Eel River Bar (Eel River)	
78	Fort Folly	
79	Indian Island	
80	Kingsclear	
81	Oromocto	
82	Pabineau	
83	Metepenagiag (Red Bank)	
84	St. Mary's	
85	Tobique	
86	Woodstock	
87	General List	
99	Out of Province	



Residence_Type

Code which indicates the type of residence an individual associated with a case resides in, as shown below:

Code	Description
0	Unknown
1	Home
71	Single Family Dwelling
72	Multi-Family Dwelling
73	Apartment/Condominium
74	Room/Boarding House
Α	Other

Previous_Institutional_Care

Code which indicates the institution at which an individual associated with a case previously received care (if they had received institutional care prior to their present case registration with the Department of Social Development), as shown below:

Code	Description
С	Centra-Care Saint John
E	Education
R	Restigouche Hospital Center
W	W. F. Robert's Hospital-School

Case_Plan_ID

This uniquely identifies a case plan.

Plan Number

This is the plan version number for a case plan.

Goal_Description

Code which indicates the goal of a case plan, as shown below:

Code	Description	
AP-A	Restore/Enhance Individual/Family Functioning	
AP-B	Maintain Adequate Functioning	
AP-C	Obtain Alternate Living Arrangements	
AP-D	Obtain Alternate Care	
BPS-A	Help Parent(s) Reach Decision	
BPS-B	Adoption/Long Term Placement	
BPS-C	Assume/Develop Parental Capabilities	
CBS-A	Move to Self Sufficiency	



<u> </u>			
CBS-B	Maintain Home with Long Term Support		
CBS-C	Deter Increase in Dependency		
CBS-D	Nursing Home Placement Long Term		
CBS-E	Nursing Home Payment		
CC-A	Reunite with Natural Family		
СС-В	Adoption		
CC-C	Long Term Foster Care		
CC-D	Independent Living		
CC-E	Support Parent Plan for Child (Cmp)		
CC-F	Support Plan from Other Jurisdictions		
CDC-A	Restore/Enhance Functioning		
CDC-B	Maintain Current Level of Functioning		
CDC-C	Independent Living		
CP-A	Restore/Enhance Family Functioning		
CP-B	Maintain Adequate Family Functioning		
CP-C	Obtain Alternate Permanent Care		
CSD-A	Achieved Employment Readiness		
CSD-B	Secure Employment		
CSD-C	Maintain Employment		
CSD-D	Achieve Adequate Personal/Social Functioning		
CSD-E	Maintain Adequate Personal/Social Functioning		
DSP-A To maintain and/or improve the participant's level of physical soc			
	mental and emotional functioning resulting in maintenance of an optimal		
	level of independence within the community care system.		
DSP-B To enhance the capacity of adults with disabilities and their fa			
	caregivers to function as independently as possible in their own homes		
	for as long as possible		
DSP-C	To encourage self-determination and prevent or delay		
	institutionalization.		
DSP-D	To supplement that which individuals/families can do independently or		
	with the help of other formal/informal support services and volunteer		
	groups.		
ECS-A	Improve Development Outcomes Child		
FAM-A	Resolve Family/Individual Relation.		
FAM-B	Improve Family/Individual Functioning		
FES-A	Restore/Enhance Family Functioning		
FES-B	Maintain Adequate Family Functioning		
FES-C	Obtain Alternate Permanent Care		
LTC-A	Improve Functioning		
LTC-B	Prevent Further Functioning Deterioration		
NH-B	Maintain Current Level of Functioning		



OPS-A	Help Mother Reach Decision	
OPS-B	Adoption/Long Term Placement	
OPS-C	Assume/Develop Parental Capabilities	
SAC-A	Financial Support for Adopted Child	
SAR-A	Maintain in School	
SAR-B	Return to School	
SAR-C	Maintain in Training	
SAR-D	Return to Training	
SAR-E	Secure Employment	
SSE-A	Restore/Enhance School Functioning	
SSE-B	Maintain Current Level of Functioning	
YCJA-A	Provide Placement/Supervision	
YOA-A	Provide Placement/Supervision	

Case_Plan_Status

Code which indicates the current status of the case plan, as shown below:

Code	Description	
1	Abandoned	
2	Case Closed	
9	Achieved	
11	Client Miscarried	
88C	New Criteria/88	
ADO	Adoption Finalized	
AGE	No Longer Meets Age Criteria	
BD	Baby Died	
CRS	Client Refused Services	
CRT	Court Decision	
DEA	Client Died	
DEP	Dept. Withdrew Service	
DIS	Dept. Discontinued Program	
ECI	Early Childhood Decision	
EMP	Serv. Provider Trans. To EMP	
INS	Client Entered Institution	
LTC	Meet LTC Criteria	
MAR	Client Married-CC Only	
MET	Service Needs Met	
MIL	Client Joined Military-CC Only	
MOV	Client Moved	
OTH	Other	
PAR	Released to Parent/Guardian	



RPS	Released to Own Responsibility
Т	Transfer from Other Reg. In NB
TNH	Trans Nursing Home Services
TRG	Dept Transf Gar Out of NB
TRN	Dept Transferred to Other Prog.
TRO	Dept Transferred to Other Dept.
WTH	Client Discharged Self

Case_Plan_End-Date

Date (YYYY-MM-DD) on which a case plan ends.

Progress_Indicator

Code which indicates the progress on a case plan, as shown below:

Code	Description
AAAA	<none></none>
ABAND	Plan Abandoned
ACCOR	Progressing According to Plan
ACHIE	Achieved
AHEAD	Progressing Ahead of Plan
NOPRO	No Progress
SLOWProgressing	Slower Than Plan

Case_Plan_Anticipated_Completion_Date

Date (YYYY-MM-DD) on which a case plan is anticipated to be completed.

Case Plan Effective Date

Date (YYYY-MM-DD) on which the current status of individual case plan became effective. It has a length of 10 characters. Nulls are allowed.

Last_Update_Date

Date (YYYY-MM-DD) on which a case plan was last updated.

Last_Review_Date

Date (YYYY-MM-DD) on which a case plan was last reviewed.

Next Review Date

This is the date on which a case plan will be next reviewed in the format YYYY-MM-DD.



Report_Date

Date (YYYY-MM-DD) on which a monthly report was generated.



2. Caseload

Type ¹	Variable name	Description
N	Target_Group_Effective_Date	Target group effective date
С	Case_ID	Unique case identifier
С	Individual_ID	Unique individual identifier
N	Open_Date	Case open date
С	Living_Arrangement	Living arrangement code
С	Case_Composition	Case composition code
С	Postal_Code	Individual residential postal code
N	Canada_Pension_Plan	Canada Pension Plan income
N	Guaranteed_Income_Supplement	Guaranteed Income Supplement income
N	Old_Age_Security	Old Age Security income
N	Other	Other sources income
С	Income_Source	Income source code
N	Net_Family_Income	Net family income
N	Financial_Contribution_Start_Date	Financial contribution start date
N	Financial_Contribution_End_Date	Financial contribution end date
N	Financial_Contribution_Reassessment	Financial contribution reassessment due date
	Due_Date	
С	Linked_to_Case	Financial contribution linked to case code
С	Financial_Contribution_Status	Financial contribution status code
С	Financial_Contribution_Status_Reason	Financial contribution status reason code
N	Report_Date	Report generating date

The type 'N' refers to numeric values while 'C' refers to both alphabetic and numeric characters.

Target_Group_Effective_Date

Date (YYYY-MM-DD) on which an individual associated with a case is identified as belonging to a particular target group.

Case_ID

This uniquely identifies a case.

Individual_ID

This uniquely identifies an individual associated with a case.

Open_Date

Date (YYYY-MM-DD) on which a case was opened with the Department of Social Development.



Living_Arrangement

Code which indicates the living arrangement of the head of a case, as shown below:

Code	Description
0	Alone
4	Other
11	Alone
21	Spouse Only
31	Spouse & Child(ren) Only
32	Spouse & Child. &/Or Grandchildren
33	Spouse & Child & Parents
41	Child(ren) Only
42	Child. And/or Grandchild.
43	Child(ren) & Other Relative
44	Child & Other Non-Relative
51	Parent(s) Only
52	Parent(s) And Child(ren)
53	Parent(s) And Sibling(s)
54	Parent & Sibling & Own Child
55	Parent & Sibling & Grandparent
61	Grandparent(s)
62	Grandparent & Sibling.
63	Other Relative
71	Non-Related Person
81	Living in an Approved Facility
82	Appr.Care Prov.&Sibling
99	<none></none>

Case_Composition

Code which indicates the composition of a particular case, as shown below:

Code	Description
0	No Parent-Other
1	One Parent
2	Two Parents

Postal_Code

Postal code of the residence of the head of a case, in free text format.



Canada_Pension_Plan

This is the income from Canada Pension Plan received by the head of a case monthly. This field is available starting December 2013.

Guaranteed_Income_Supplement

This is the income from Guaranteed Income Supplement received by the head of case monthly. This field is available starting 2013.

Old_Age_Security

This is the income from Old Age Security received by the head of case monthly. This field is available starting 2013.

Other

This is income other than Canada Pension Plan, Guaranteed Income Supplement and Old Age Security received by the head of case monthly. This field is available starting 2013.

Income_Source

Code which indicates the source of the client/individual's income.

Code	Description
1	Refused to Give Information
2	Salary
3	Employment Insurance Benefits
4	HRD-NB Benefits
5	Canada Pension Plan
6	Work Health and Safety Commission
7	Veterans' Affairs Pension
8	Other
11	Earned Income
21	Wage Loss Insurance
31	Gov. Pension/Benefits Without GIS
32	Gov. Pension/Benefits with GIS
41	Priv. Pension/Investment/Support Pay.
51	Social Assistance
61	Earned Income& Gov. Pension/Benefits Without GIS With/Out Priv. Pen Or
62	Earned Income and Social Assistance
63	Gov. Pension W/O GIS & Private Pension
64	EI/WCB and Social Assis. With/Out Priv. Pension/Investment/Support Pay
100	No Income
101	US Social Security
102	Compensation



103	Veteran
104	Retirement Pension
105	Insurance Income
106	Long Term Disability
107	RSP/Rental
108	Trust Fund
109	Investment Income

Net_Family_Income

This indicates the overall income received by all members of a family associated with a case. It refers to the total income from all sources, of all family members, whether taxable or non-taxable, net of all statutory and other employer deductions (including CPP, EI, and Income Tax), net of any health insurance premiums, and excluding income exempted under this policy.

Code	Description	
1	Refused to Give Information	
2		
	Salary Figure 1 to 1 t	
3	Employment Insurance Benefits	
4	HRD-NB Benefits	
5	Canada Pension Plan	
6	Work Health and Safety Commission	
7	Veterans' Affairs Pension	
8	Other	
11	Earned Income	
21	Wage Loss Insurance	
31	Gov. Pension/Benefits Without GIS	
32	Gov. Pension/Benefits with GIS	
41	Priv. Pension/Investment/Support Pay.	
51	Social Assistance	
61	Earned Income Gov. Pension/Benefits Without GIS With/Out Priv. Pen Or	
62	Earned Income and Social Assistance	
63	Gov. Pension W/O GIS & Private Pension	
64	EI/WCB and Social Assis. With/Out Priv. Pension/Investment/Support Pay	
100	No Income	
101	US Social Security	
102	Compensation	
103	Veteran	
104	Retirement Pension	
105	Insurance Income	
106	Long Term Disability	
107	RSP/Rental	



108	Trust Fund
109	Investment Income

Financial_Contribution_Start_Date

Date (YYYY-MM-DD) on which an individual started contributing financially to an associated case. Financial contribution is registered against household and can be link to a case. In LTC, client contribution is calculated using family contribution to LTC services.

Financial_Contribution_End_Date

Date (YYYY-MM-DD) on which an individual stopped contributing financially to an associated case.

Financial_Contribution_Reassessment_Due_Date

Date (YYYY-MM-DD) on which an individual's contribution needs to be reassessed. Once LTC is linked to a case, it cannot be updated. A new financial contribution must be completed and relinked.

Linked_to_Case

Code which indicates whether financial contributions are linked to a case, as shown below:

Code	Description	
Υ	the financial contribution is linked to this case	
N	the financial contribution belongs to this case, but has not linked to the	
	case	

Financial_Contribution_Status

Code which indicates the current status of an individual's financial contribution, as shown below:

Code	Description
1	Not Active
2	Active
3	Terminated

Financial_Contribution_Status_Reason

Code which indicates the reason for the current status of an individual's financial contribution.



Code	Description
1	Renewal
2	Completed
3	Client Withdrew
4	None

Report_Date

This is the date on which the monthly report was generated, in the format YYYY-MM-DD.



3. Situation - Individuals

	iation - individuals	
Type ¹	Field Name	Description
С	Region	Situation region code
C	Service_Center	Situation service center code
С	Program	Situation program code
С	Target_Group	Situation target group code
N	Situation_ID	Situation unique identifier
N	Individual_ID	Individual unique identifier
С	Involvement	Situation involvement code
N	Date_of_Birth	Individual birth date
N	Age	Individual age
С	Gender	Individual gender code
С	Marital_Status	Individual marital status code
С	Citizenship	Individual citizenship code
С	Primary_Language	Individual primary language code
С	Language_of_Service	Service provision language code
С	Education_Level	Individual education level code
С	Employment_Status	Individual employment status code
С	First_Nation_Status	Individual First Nations status
С	First_Nation_Community	Individual First Nation community code
С	Residence_Type	Individual residence type code
С	Previous_Institutional_Care	Individual previous care institution code
N	Report_Date	Situation report writing date

The type 'N' refers to numeric values while 'C' refers to both alphabetic and numeric characters.

Region

Code which indicates the region in the province that a situation originates from. Refer to Region field in Caseload-Individual for distinct values of this field.

Service_Center

Code which indicates the service center that is associated with a situation.

Refer to the Service Center field in Caseload-Individual for values for this field, and the corresponding table of regions and service centers.



Program

Code which indicates the program that is associated with a situation. Each situation is classified as belonging to a particular program. Refer to the Program field in Caseload-Individual for distinct values for this field.

Target_Group

Code which indicates the target group that is associated with a situation. Individuals involved in a situation are classified as belonging to particular target groups, each program has its own target groups. Refer to the Target Group field in Caseload-Individual for distinct values for this field.

Situation_ID

This uniquely identifies a situation.

Individual_ID

This uniquely identifies an individual involved in a situation.

Involvement

Code which indicates the relationship of others in a situation to the applicant, as shown below:

Code	Description
01	Applicant / Victim
11	Spouse
12	Non-Legal Spouse
13	Biological Parent
14	Ex-Spouse
21	Child
22	Grandchild
23	Foster Child
31	Sibling
41	Parent
42	Foster Parent
43	Maternal Grandparent
44	Paternal Grandparent
51	Aunt / Uncle
52	Other Relation
61	Legal Guardian
71	Non-Related Person
81	Unknown
AAAA	<none></none>
REFSR	Referral Source



Date_of_Birth

Date (YYYY-MM-DD) of birth of an individual associated with a situation.

Age

Age (NNN) of individual associated with a situation. This is calculated using the individual's date of birth and the time of generating monthly reports.

Gender

Code which indicates the sex of an individual associated with a situation. Refer to the Gender field in Caseload-Individual for values of this field.

Marital Status

Code which indicates the marital status of an individual associated with a situation. Refer to the Marital Status field in Caseload-Individual for values of this field.

Citizenship

Code which indicates the citizenship of an individual associated with a situation. Refer to the citizenship variable in Caseload-Individual for values of this field.

Language_of_Service

Code which indicates the language that the service provider used to provide services to an individual. Refer to the Language of Service Field in Caseload-Individual for values of language of service.

Primary_Language

Code which indicates the primary language of an individual involved in a situation. Refer to the Primary Language field in Caseload-Individual for values of this field.

Education Level

Code which indicates the education level of an individual associated with a situation. Refer to the Education Level field in Caseload-Individual for values of this field.



Employment_Status

Code which indicates the employment status of an individual associated with a situation. Refer to the Employment Status field in Caseload-Individual for values of this field.

First_Nation_Status

Code which indicates the First Nation status of an individual associated with a situation. Refer to the First Nations status field in Caseload-Individual for values of this field.

First_Nation_Community

Code which indicates the First Nation community an individual belongs to if he/she is First Nation. Refer to the First Nation Community field in Caseload-Individual for values of this field.

Residence_Type

Code which indicates the type of residence an individual involved in a situation resides in. Refer to the Residence Type field in Caseload-Individual for values of this field.

Previous Institutional Care

This indicates whether an individual involved in a situation has previously received care from the listed institutions.

Report Date

This is the date on which the monthly report was generated.



4. Situation

4. Situation			
Type ¹	Field name	Description	
N	Situation ID	Situation unique identifier	
N	Individual ID	Individual unique identifier	
С	Involvement	Situation involvement code	
N	Initial Contact Date	Initial contact date	
N	Date Received	Situation received date	
С	Status	Situation status code	
С	Status Reason	Situation status reason code	
N	Effective Date	Situation effective date	
N	Case ID	Case unique identifier	
С	Туре	Situation type code	
С	Urgency Level	Situation urgency level code	
С	Investigation Completed	Investigation completed code	
С	Postal Code	Individual postal code	
N	Number of Referrals	Number of referrals	
N	Referral Source ID	Referral unique identifier	
N	Date	Referral date	
N	Time	Referral time	
С	Category	Referral category code	
С	Referral Type	Referral type code	
С	Method of Contact	Referral method of contact code	
С	After Hours Flag	After Hours flag code	
N	Assessment ID	Situation assessment unique identifier	
С	Tool	Situation assessment tool	
N	Version	Situation assessment tool version	
N	Open Date	Situation assessment open date	
N	Completion Date	Situation assessment completion date	
С	Major Presenting Problems	Major presenting problems code	
N	Report Date	Report generated date	

The type 'N' refers to numeric values while 'C' refers to both alphabetic and numeric characters.

Situation_ID

This uniquely identifies a situation.

Individual_ID

This uniquely identifies an individual involved in a situation.



Involvement

Code which indicates the relationship of others involved in a situation with the applicant. Refer to the Involvement field in Situation-Individual for distinct values of this field.

Initial_Contact_Date

Date (YYYY-MM-DD) on which the Department of Social development was first contacted by an individual(s) concerning a situation.

Date_Received

Date (YYYY-MM-DD) on which the Department of Social Development received a situation report. This is usually same as the initial contact date.

Status

Code which indicates the current status of a situation with the Department of Social Development. Before a situation is closed, a conclusion is required.

Code	Description
AA	<none></none>
CL	Closed
OP	Open

Status Reason

Code which indicates the reason for the current status of a situation.

Code	Description
2	Unable to Locate Client
10	Refer to New Case
15	Referred Elsewhere
31	Information does not Warrant Investigation
34	Client Refused Service
37	Link to Open Case
40	Coordination Difficulties
41	Awaiting Medical Discharge
42	Awaiting Further Assess. By External Assessor
43	Awaiting Further Assess. By Internal Assessor
44	Awaiting Financial Assessment



45	Awaiting Clarification Legal Status/Authority
46	Presented to Panel, Awaiting Decision
47	Awaiting Stabilization
50	Dying Stage
51	Client Died
54	Referred for Income Assistance
55	Ineligible
56	Functional/Limitation Is Less Than 3 Months
58	Needs Cannot Be Met by Community-Based Services
59	No Problems Identified
60	Other
61	Recovery of Functioning Expected
62	Referred Out
63	Referred for Other EMP Services
64	Referred for Other MHS
65	Service Provided at Intake
66	Unsubstantiated Referral
67	Program Not Available
68	Client Withdrew
70	Refer to New & Link to Open Case
71	Cont.Greater Than Serv. Plan. Manage Own
72	Referred to NH by SD
73	Referred to NH by MH
74	Referred to NH by EMP
80	Waitlisted
81	LTC - Delayed – Reasons
90	Assess Fin. Contri. Not Completed
91	Assess Will Not Pay Contri.
92	Not Assess Will Not Comp. Fin. Stat.
93	Referred for Housing
94	Assessed as Private pay in Home
AA	<none></none>
C1	DSP - Does not meet Age Criteria
C2	DSP - Functional limitation is not ongoing
C3	DSP - Needs cannot be met by Community-Based Services
C4	DSP - No Unmet Needs related to Disability Supports
C5	DSP - Palliative Status
C6	DSP - Private Pay In-Home
C7	DSP - Recovery of Functioning Expected
C8	DSP - Referred for LTC Residential Services



С9	DSP - Refused Service
D1	DSP - Will not pay Contribution
D2	DSP - Withdrew Request
D3	Client condition unstable
D4	No Unmet Needs
E1	Client Miscarried
E2	Baby Died
F1	Discontinued
F2	Service Provided at Investigation
F3	Referred to Other Services

Effective_Date

Date (YYYY-MM-DD) on which the current status of a situation became effective.

Case_ID

This uniquely identifies each individual case. After a situation becomes a case, a Case ID is linked to the situation.

Type

Code which indicates the requested type of situation made by applicants or other people on their behalf.

Code	Description
10	Extra Familial
20	Intra Familial
AAAA	<none></none>
EMP	Responsible Partner – EMP
MH	Responsible Partner – MH
SD	Responsible Partner – SD

Urgency_Level

Code which indicates the identified urgency level of a situation.

Code	Description
01	<none></none>
03	High
04	Medium
05	Low



06	Adult Protection 1
07	Adult Protection 2
08	Adult Protection 3
09	Adult Protection 4
11	SDM - Level 1
12	SDM - Level 2
13	SDM - Level 3
14	SDM - Level Not Determined
21	RMS - Priority 1
22	RMS - Priority 2
23	RMS - Priority 3
24	RMS - Priority 4
30	No Urgency

Investigation_Completed

Code which indicates whether or not an investigation was completed regarding an identified situation.

Code	Description	
N	No	
Υ	Yes	

Postal_Code

This is the postal code of the residence of an individual involved in a situation.

Number_of_Referrals

This is the number of referrals requesting service from the Department of Social Development for a particular situation.

Referral_Source_ID

This uniquely identifies the referral source for a situation.

Date

Date (YYYY-MM-DD) on which the department of Social Development received service requests from referrals for a situation.



Time

This is the time (hhmm) when the Department of Social Development received service requests from referrals for a situation.

Category

Code which indicates the category of the referring source.

Code	Description
AA	<none></none>
AN	Anonymous
НН	Household
SF	Self
TP	Third Party

Referral_Type

Code which indicates the referral type. The referral type is a more detailed identification of the type of referring source.

Code	Description
111	Public Health
112	Mental Health
113	Hospital/Institution
114	Physician
115	Health – Other
116	Extra Mural Program
121	Schools
122	Education – Other
131	Police
132	Probation
133	N.B. Courts
134	Other Jurisdiction
135	Lawyers
136	Justice – Other
141	Day Care
142	Homemaker
143	Hum.Res.Devel.Canada
144	Clergy/Religious Agen.
145	Human Resource Develop.
147	Fam. & Comm. Soc.Services
148	Social Agencies



151	Anonymous
161	Relatives
162	Friend
163	Neighbours
164	Community – Other
165	Spouse
166	Child
167	Sibling
168	Parent
170	Request for Service
171	Applicant
172	Spouse Living in Household
173	Child Living in House.
174	Parent Living in Household
175	Sibling Living in Household
176	Other Relative Living in Household
177	Non Relative Living in Household
181	Employer
182	Co-Worker
183	Parole Officer
184	Housing
200	Foster Parent
201	Psychologist
AAAA	<none></none>

Method_of_Contact

This indicates the method which referrals used to contact the Department of Social Development for a situation.

Code	Description
02	Mail/Courier
03	In Person/Walk in
04	Fax
05	E-Mail
06	Worker Contact
AA	<none></none>
TE	Telephone



After_Hours_Flag

Code which indicates whether the referent(s) contacted the Department of Social Department (S. D.) after S.D. working hours.

Code	Description
Υ	Contact time
N	Contact time is during working hours (8.30am-4.30pm)

Assessment_ID

This uniquely identifies the assessment for a situation. Each situation received by the Department of Social Development is assessed.

ToolThis is the tool which was used to assess a situation.

Tool Name	Version/Number
Basic Requirements for DSP	1
Basic Requirements for DSP	2
Basic Requirements for LTC	1
CRA Immediate Safety Assessment	1
CRA Initial Intake/Situation Report – CP	1
CRA Risk Assessment	1
DSP - Abbreviated Application	1
DSP – Application	2
DSP - Determining Eligibility	1
Functioning Level Test	1
Long Term Care Generic Assessment	1
Long Term Care Generic Assessment	2
Long Term Care Generic Assessment	3
Long Term Care Generic Assessment	4
Long Term Care Generic Assessment	5
Long Term Care Generic Assessment	6
Long Term Care Generic Assessment	7
Long Term Care Generic Assessment	8
RMS - CP Situation - Initial Assessment	2
RMS Comprehensive Risk Assessment	2
RMS Comprehensive Risk Assessment	3
RMS Immediate Safety Assessment	2
RMS Verification Decision	1
SDM - Safety Assessment for Substitute Care Providers	1



SDM1 - Intake Assessment	1
SDM2 - Safety Assessment	1
SDM3 - Family Risk Assessment of Abuse/Neglect	1
SDM4 - Family Strengths and Needs Assessment	1
SDM5 - Family Risk Reassessment	1
SDM6 - Reunification Assessment	1
Web DDC Tutorial Tool	1

Version

This is the version of the tool used for assessing a situation.

Open_Date

Date (YYYY-MM-DD) on which a situation file was opened with the Department of Social Development.

Completion_Date

Date (YYYY-MM-DD) on which the assessment was completed.

Major_Presenting_Problems

Code which indicates the major problem identified during the assessment of a situation.

Code	Description
51383	Physical Abuse
51384	Neglect
51386	Self-Care/Neglect
51387	Sexual Abuse
51390	Employment Related Services
51391	Financial Management Difficulty
51395	Cognitive/Decision Impairments
51396	Physical Disability
51397	Personal Emotional Impairments
51398	Home Management
51399	Medical Impairment
51400	Mental Health Problems-Other
51401	Mental Handicap/Intellectual Impairment
51402	Physical Self Care
51403	Insufficient Income



51410	Cognitive Functioning
51417	Communication Disorder
51418	Individual Educational Difficulties
51419	Family Social Functioning
51420	Learning Disability
51421	Conduct Difficulties – School
51423	Conduct Difficulties Social
51424	Emotional Neglect
51425	Physical Abuse – Child
51426	Physical Abuse – Adult
51427	Incest
51428	Substance Abuse/Alcohol
51429	Substance Abuse/Drug
51430	Organic Brain Impairments
51431	Extended/Previous Fam Relation
51432	Fam/Indiv Adjustment Reaction
51433	Interpersonal Rel Prb-Extr-Fam
51434	Conduct Difficulties – Legal
51435	Unemployment
51436	Employment Related Difficulty
51437	Without Accommodation
51438	Inadequate Accommodation
51439	Legal Adjudication Difficulty
51440	No Legal Guard. Other Than Min
51441	Long Term Care
51442	Physical Neglect
51443	Marital Relationship
51444	Parent/Child Relationship
51445	Parent/Adolescent Relationship
51446	Emotional Abuse
51447	Emotional Abuse – Child
51448	Emotional Neglect – Adult
51449	Emotional Neglect – Child
51450	Physical Neglect – Adult
51451	Physical Neglect – Child
51452	Child Beyond Control
52000	Multiple Disabilities

Report_Date

This is the date on which the monthly report was generated.



Updated September 2016



5. Situation-Referrals

Type ¹	Field name	Description
С	Situation_ID	Situation unique identifier
С	Individual_ID	Individual unique identifier
С	Referral_Source_ID	Referral source unique identifier
N	Date_Received	Situation received date
N	Time_Received	Situation received time
С	Category	Situation category code
С	Туре	Situation type code
С	Method_of_Contact	Method of contact
С	After_Hours_Flag	After Hours flag code

The type 'N' refers to numeric values while 'C' refers to both alphabetic and numeric characters.

Situation_ID

This uniquely identifies a situation.

Individual ID

This uniquely identifies an individual involved in a situation.

Referral_Source_ID

This uniquely identifies the source of referral for a situation.

Date_Received

Date (YYYY-MM-DD) on which referral for a situation was received.

Time_Received

Time (hhmm) at which referral for a situation was received.

Category

This indicates the category of the referring source.

Refer to the Category field in Situations for the distinct values of this field.



Referral_Type

Code which indicates the referral type. This is a detailed identification of the type of referral made for a situation. Refer to the referral type variable in Situations for the distinct values of referral types.

Method_of_Contact

This indicates the method used by referents to contact the Department of Social Development for a situation. Refer to the Method of Contact field in Situations for the distinct values of this field.

After_Hours_Flag

This indicates whether the referent(s) contacted the Department of Social Department (S. D.) after S.D. working hours.

Code	Description
Υ	Contact time
N	Contact time is during working hours (8:30am-4:30pm)

Report_Date

This is the date on which the monthly report was generated.



6. Assessment by Clients

Type ¹	Field name	Description
N	Assessment_ID	Assessment unique identifier
N	Individual_ID	Individual unique identifier
C	Tool	Assessment tool
N	Version	Assessment tool version
С	Mode	Assessment mode code
С	Status	Assessment status code
С	Status_Reason	Assessment status reason code
N	Status_Effective_Date	Assessment status effective date
C	State_Information	Assessment state information code
N	Report_Date	Assessment report generated date

The type 'N' refers to numeric values while 'C' refers to both alphabetic and numeric characters.

Assessment_ID

This uniquely identifies the assessment for a situation.

June, July and August 2008 data are not available in this database.

Individual_ID

This uniquely identifies an individual associated with an assessment. June, July and August 2008 data are not available from this database

Too

Code which indicates the tool(s) used in assessing an individual involved in a situation. Refer to the Tool field in Situations for the values of this field.

June, July and August 2008 data are not available from this database.

Version

This is the version of the tool used for assessing a situation.

June, July and August 2008 data are not available from this database



Mode

Code which indicates where and how the assessment was performed.

Code	Description
AAAA	<none></none>
HOME	Client's Home
HOSP	Hospital
OFFC	Office
OTHR	Other
RESF	Residential Facility
TELE	Telephone

June, July and August 2008 data are not available from this database

Status

Code which indicates the current status of the assessment for a situation.

Code	Description
AAAA	<none></none>
CMPL	Closed – Completed
INCM	Closed – Incomplete
OPEN	Open
PEND	Pending
WAIT	Waitlisted

June, July and August 2008 data are not available from this database.

Status_Reason

This indicates the reason for the current status of the assessment for a situation.

Code	Description
02	Unable to Locate Client
03	At Client's Request
19	Client Moved
28	Client Did Not Attend
33	Client Unavailable
AAAA	None
CC	Case Closed
CD	Client Deceased
CO	Completed
CR	Client Refused Assessment
CU	Client Unable to Complete



CW	Client Withdrew
EE	Entered in Error
NF	Lack of Financial Resources
NR	Lack of Staff Resources
NS	No Space Available
RC	Referred to Case
RO	Referred Out
RS	Referred to Intake
WT	Waiting for Information

June, July and August 2008 data are not available from this database.



Status_Effective_Date

Date (YYYY-MM-DD) on which the current status of an assessment became effective.

June, July and August 2008 data are not available from this database.

State_Information

Code which indicates the current state of the assessment of a situation.

Code	Description
10	Active
20	Ready to Send to Remote
40	Pending Approval
LOCK	Locked

June, July and August 2008 data are not available from this database.

Report_Date

Date (YYYY-MM-DD) on which the monthly report was generated.

June, July and August 2008 data are not available from this database.



7. Payments

	7. rayments		
Type ¹	Field name	Description	
N	Case_ID	Case unique identifier	
N	Situation_ID	Situation unique identifier	
N	Individual_ID	Individual unique identifier	
N	Payment_Number	Payment unique identifier	
N	Payment_Date	Payment date	
N	Cheque_ID	Cheque unique identifier	
С	Cheque_Status	Cheque status code	
N	Cheque_Status_Effective_Date	Cheque status effective date	
С	Vendor_ID	Service provider unique identifier	
N	Payee_Individual_ID	Payee unique identifier	
N	Payment/Recovery_Detail_ID	Payment/Recovery detail unique identifier	
С	Payment/Recovery_Detail_Type	Payment/Recovery detail type code	
N	Payment/Recovery_Amount	Payment/recovery detail amount	
С	Cost_Category	Cost category code	
N	Apply_to_Year	Apply-to year	
N	Apply_to Month	Apply-to month	
N	Invoice_ID	Invoice unique identifier	
N	Invoice_Line	Invoice line	
N	Invoice_Number	Invoice number	
C	Electronic_Invoice_Flag	Electronic invoice flag code	
N	Service_ID	Service unique identifier	
С	Service_Type	Service type code	
N	Service_Requisition_ID	Service requisition unique identifier	
N	Commencement_Date	Commencement date	
N	Expected_Termination_Date	Expected termination date	
С	Payment_Frequency	Payment frequency code	
С	Payment_Terms	Payment terms code	
С	Payment_Type	Payment type code	
N	Report_Date	Payment Report date	

The type 'N' refers to numeric values while 'C' refers to both alphabetic and numeric characters.

Case_ID

This uniquely identifies a case. First nation agencies occur in service referrals and service requisitions, but no payment instruction is created.



Situation_ID

This uniquely identifies a situation.

Individual_ID

This uniquely identifies an individual associated with a case or situation.

Payment_Number

This uniquely identifies a payment.

Payment_Date

Date (YYYY-MM-DD) on which a payment was made, or date on which over/under payment occurred.

Cheque_ID

This uniquely identifies a cheque used for payment.

Cheque Status

Code which indicates the current status of a cheque for payment.

Code	Description	
С	CLEAR	
N	NEGO	

Cheque_Status_Effective_Date

Date (YYYY-MM-DD) on which the current status of a cheque became effective.

Vendor ID

This uniquely identifies a service provider who provides service to LTC clients.

Payee Individual ID

This uniquely identifies an individual who received payment from the Department of Social Development.



Payment/Recovery_Detail_ID

This uniquely identifies the payment/recovery details of a payment.

Payment/Recovery_Detail_Type

Code which indicates the category of a payment/recovery detail.

Code	Description
AADJ	Auto Adjustment
MADJ	Manual Adjustment
REG	Regular

Payment/Recovery_Amount

This is the amount of money indicated on a payment detail.

Cost_Category

Code which indicates the category of the cost indicated on a payment detail.

	6 7
Code	Description
ADDLB	Additional Benefit
BASIC	Basic
MILE	Kilometer
ОС	Other Costs
STAT	Stat. Holiday
TAX	Tax

Apply_to_Year

This is the year that payment adjustment is to be made to a payment/cheque, in the format YYYY. Payments can be made in advance to cover some costs of clients before a situation become a case.

Apply_to_Month

This is the month that payment adjustment is to be made to a payment/cheque, in the format MM. Payments can be made in advance to cover some costs of clients before a situation become a case.



Invoice ID

This is a unique identifier used by the Department of Social Development for an invoice issued to a LTC client by a service provider. The Invoice registry is used by service providers to electronically submit invoices for processing in the Department of S. D. It is only used for submitting invoices for goods and services rendered under the Family Services Act.

Invoice_Line

This is the line number of an invoice.

Invoice Number

This is the invoice number that a service provider gives to the Department of Social Development for services provided to a LTC client. Invoice Number from the service provider is in free text format.

Electronic_Invoice_Flag

Code which indicates whether the invoice from a service provider is electronic or not.

Code	Description
N	No
Υ	Yes

Service ID

This uniquely identifies a service received by a LTC client associated with a case or situation.

Service Type

This indicates the type of service provided to a LTC client. Refer to the Service Type field in Services for the distinct values of this field.

Service_Requisition_ID

This is a unique identifier for services provided to a LTC client after payment has been made.

Commencement_Date

This is the date on which service requisition starts, in the format YYYY-MM-DD.



Expected_Termination_Date

This is the date on which service requisition is expected to stop in the format YYYY-MM-DD.

Payment_Frequency

This indicates the frequency type of payment made to a LTC service provider.

Code	Description	
ONETM	One-Time	
RECUR	Recurring	

Payments_Terms

Code which indicates whether payment made to a service provider, to cover the cost of service provided, occurred in advance or at a later time.

Code	Description	
ADV	Advance	
ARR	Arrears	

Payment_Type

Code which indicates the type of payment made to a LTC service provider for service provided.

Code	Description	
DIRCT	Direct	
INVOC	Invoice	

Report_Date

This is the date on which the monthly report was generated, in the format YYYY-MM-DD.



8. Service Referrals

Туре	Field name	Description
N	Case_ID	Case unique identifier
N	Situation_ID	Situation unique identifier
N	Individual_ID	Individual unique identifier
N	Service_Referral_ID	Service referral unique identifier
С	Referral_Type	Referral type
N	Service_ID	Service unique identifier
С	Service_Type	Service type code
С	Status	Referral status code
С	Status_Reason	Referral status reason code
N	Status_Effective_Date	Status effective date
N	Referral_Date	Referral date
N	Required_Start_Date	Required start date
N	Commencement_Date	Commencement date
N	Expected_Termination Date	Expected termination date
N	Report_Date	Report generation date

The type 'N' refers to numeric values while 'C' refers to both alphabetic and numeric characters.

Case_ID

This uniquely identifies a case.

Situation ID

This uniquely identifies a situation.

Individual_ID

This uniquely identifies an individual associated with a case.

Service_Referral_ID

This is a unique identifier for referrals to internal or external service providers for or on behalf of a specific client or group of clients that do not produce a payment.

Referral_Type

Code which indicates the type of referral that is made for a LTC client(s). A referral for internal services means requesting or recording involvement of other professionals within the



Department of Social Development, such as early childhood social workers. External referral means referring LTC clients to professionals outside of S. D.

Code	Description	
EXT	External	
INT	Internal	

Service_ID

This uniquely identifies a service provider.

Service_Type

Code which indicates the type of service being provided for an individual. Refer to the Service Type field in Services for the distinct values of service types.

Status

Code which indicates the current status of service being provided to a LTC client. Before a situation or case can be closed, all service referrals must be terminated or cancelled by the worker.

Code	Description
10	Not Active
30	Active
40	Terminated
50	Cancelled

Status_Reason

Code which indicates the reason for the current status of service being provided a LTC client.

Code	Description
20	Client Requests Termination
30	Department Terminated
40	Service Provider Requested
50	Disrupted Service Delivery
60	Case Closed
70	Trial Discharge Terminated
80	System Terminated
500	Death of Client
501	Early Departure
AAAAA	<none></none>



Status_Effective_Date

This is the date on which the current status of service provided became effective, in the format YYYY-MM-DD.

Referral_Date

Date on which a referral was made for a service to be provided, in the format YYYY-MM-DD.

Required_Start_Date

Date on which service is required to be provided to the client, in the format YYYY-MM-DD.

Commencement_Date

Date on which service starts being provided to the client, in the format YYYY-MM-DD.

Expected_Termination_Date

Predicted date on which service is to stop being provided to the client, in the format YYYY-MM-DD.

Report_Date

Date on which the monthly report was generated, in the format YYYY-MM-DD.



9. Service Requisition-Details

Type ¹	Field name	Description
N	Case ID/Situation ID	Case/Situation unique identifier
C	Case/Situation	Case/Situation code
N	Individual ID	Individual unique identifier
N	Service_Requisition_ID	Service requisition unique identifier
N	Service ID	Service unique identifier
C	Service_ID Service_Type	Service trique identifier Service type code
C		• •
C	Service_Requisition_Reason	Service requisition reason code
C	Status Reason	Service requisition status code
N	Status_Reason	Service requisition status reason code
	Status_Effective_Date	Service requisition Status effective date
N	Commencement_Date	Service requisition commencement date
N	Expected_Termination_Date	Service requisition expected termination date
N	Last_Updated	Service requisition last update
C	Payment_Frequency	Payment frequency code
N	Detail ID	Service requisition detail unique identifier
N	Sequence_Number	Sequence number
N	Start Date	Service requisition start date
N	End Date	Service requisition and date
N	Number_of_Units	Number of service units
C	Unit Type	Service unit type code
C	Per	Unit of service rate code
N	Rate	Service rate
C	Rate_Category	Rate category code
N	User_Entered_Rate	User entered rate
N	Basic_Cost_Amount	Basic cost amount
N	Period_Cost_Amount	Period cost amount
N	Other Costs	Other costs
N	Monthly_Total_Cost_Amount	Monthly total cost amount
N	Period_Monthly_Total_Cost	Period monthly total cost amount
	Amount	,
N	Client_Contribution_Amount	Client contribution amount
N	Department_Cost_Amount	Department cost amount
N	Period_Departmental_Cost_Amount	Period department cost amount
N	Report_Date	Report generation date

The type 'N' refers to numeric values while 'C' refers to both alphabetic and numeric characters.



Case_ID/Situation_ID

This uniquely identifies a case or situation. Some situation programs allow service requisitions such as child protection and adult protection.

Case/Situation

Code which indicates whether it is a case or situation.

Code	Description	
CASE	Case	
SITU	Situation	

Individual ID

This uniquely identifies an individual involved in a case or situation.

Service_Requisition_ID

This is a unique identifier used to register service requisition for or on behalf of a specific client or group of clients that produce a payment including directive, advance, direct arrears and invoice payments.

Service_ID

This uniquely identifies a service provided a LTC client.

Service_Type

Code which indicates the type of service being provided an individual. Refer to the Service Type field in Service table for distinct values of this field.

Service_Requisition_Reason

Code which indicates the detailed service type requested by a LTC client in the Service Requisition.

Code	Description
23	Day Care
23	Other
33	Day Care
33	Medical
33	Other



43	Urgent / emergency
43	Routine / regular
64	Other
64	Prescribed
112	Graduation
112	School services & supplies
112	Licenses & training costs
121	Graduation
121	School services & supplies
121	Licenses & training costs
126	Graduation
126	School services & supplies
126	Licenses & training costs
136	Day Care
136	Other
136	Medical
140	Day Care
140	Medical
140	Other
145	Day Care
145	Medical
145	Other
147	Day Care
147	Medical
147	Other
159	Diabetic supplies
159	Incontinence supplies
159	Infant formulas
159	Allergy supplies
159	TENS machine supplies
159	Dressing supplies
159	Life threatening situation
159	Dietary supplement
159	Over the counter
159	Prescription
159	Multiple
159	Cancer
167	Day Care
167	Medical
167	Other



174	Urgent / emergency
174	Routine / regular
174	YOA
174	YCJA
180	Graduation
180	School services & supplies
180	Licenses & training costs
190	Day Care
190	Medical
190	Other
194	Court
194	Legal
12002	L1
12002	L2
12002	L3
12002	L4
12002	U
12003	L1
12003	L2
12003	L3
12003	L4
12003	S
12003	U
13012	CARE
35095	Lodging
35095	Witness Fees
35916	Other
35916	Legal
35916	Transportation
42001	L1
42001	L2
42001	S
42001	U
42003	С
42003	L1
42003	L2
42003	L3
42003	L4
42003	U
42004	С



42004	L2
42004	L4
80004	Under 18
80004	18 and Over
80005	P D O A Supp
80005	P
80005	P D
80005	PO
80005	PA
80005	D
80005	DO
80005	D Supp
80005	0
80005	O Supp
80005	A
80005	A Supp
80005	Supp
80005	P Supp
80005	PDO
80005	P D O Supp
80005	P O Supp
80005	D O Supp
80005	P D Supp
80005	DOA
80005	P D O A H Supp
80005	D O A H Supp
80005	D O A Supp
80005	DA
80005	O A Supp

Status

Code which indicates the current status of a Service Requisition.

Code	Description
10	Not Active
30	Active
40	Terminated
50	Cancelled



Status_Reason

Code which indicates the reason for the current status of a Service Requisition.

Code	Description	
10	Trial Discharge/Placement Reserved	
20	Client Requests Termination	
30	Department Terminated	
40	Service Provider Requested	
50	Disrupted Service Delivery	
60	Case Closed	
70	Trial Discharge Terminated	
80	System Terminated	
500	Death of Client	
600	Transfer from Other Reg. In NB	
AAAAA	None	

Status_Effective_Date

Date on which the current status of a service requisition became effective, in the format YYYY-MM-DD.

Commencement_Date

Start date on a service requisition, in the format YYYY-MM-DD.

Expected Termination Date

Expected end date on a service requisition, in the format YYYY-MM-DD.

Last Updated

Date on which the status of a service requisition was last updated, in the format YYYY-MM-DD.

Payment_Frequency

Code which indicates the frequency type of payment made to a LTC service provider. Refer to the Payment Frequency field in the Payment table for values of this field.



Detail_ID

This uniquely identifies each item in a service requisition.

Sequence_Number

This is the sequence number.

Start_Date

Date on which requested service for a LTC client starts, in the format YYYY-MM-DD.

End_Date

Date on which requested service for a LTC client ends, in the format YYYY-MM-DD.

Number_of_Units

This is the number of units of service that is provided to a LTC client.

Unit_Type

Code which indicates the type of unit of service that is provided to a LTC client.

Code	Description
AAAA	<none></none>
В	Space
BED	Bed
C	Quarter Hour
D	Hour
E	Half Day
F	Day
G	Week
Н	Month
1	Meal
IP	Item/Package
J	Kilometer
K	Trip
L	Session
LODG	Lodging Unit
M	Visit



Per

Code which indicates the unit of service rate.

Code	Description
DAY	Day
MNTH	Month
WEEK	Week
YEAR	Year

Rate

This is the amount of money charged for specific services provided to LTC clients.

Rate_Category

Code which indicates the type of service for which money is charged the Department of Social Development.

Code	Description
CEIL	Ceiling
FIXED	Fixed
FXSRV	Fixed Service
NOREG	No Reg. Rate
SRVC	Service
STD	Standard

User_Entered_Rate

This is the rate that a LTC client paid for service from a service provider.

Basic_Cost_Amount

This is the cost of a service provided to a LTC client monthly.

Period_Cost_Amount

This is the cost of a service provided to a LTC client in a reported month.

Other_Costs

This refers to other costs besides the basic cost associated with a service requisition.



Monthly_Total_Cost_Amount

This is the monthly cost of a service provided to a LTC client.

Period_Monthly_Total_Cost_Amount

This is the monthly cost for service provided to a LTC client in a reported month.

Client_Contribution_Amount

This is the amount of money that a LTC client paid for a service provided to him/her.

Department_Cost_Amount

This is the amount of money that the Department of Social development paid for a service provided to a LTC client.

Period_Department_Cost_Amount

This is the amount of money that the Department of Social Development paid for a service provided to a LTC client in a reported month.

Report Date

Date on which the monthly report was generated, in the format YYYY-MM-DD.



10. Service Requisition-Other Costs

Type ¹	Field name	Description
N	Individual_ID	Individual unique identifier
N	Service_Requisition_ID	Service requisition unique identifier
N	Service_ID	Service unique identifier
N	Detail_ID	Detail unique identifier
С	Other_Cost_Type	Other cost type code
С	Other_Cost_Reason	Other cost reason code
N	Other_Cost_Amount	Other cost amount
N	Report_Date	Report generated date

The type 'N' refers to numeric values while 'C' refers to both alphabetic and numeric characters.

Individual_ID

This uniquely identifies an individual involved a case or situation.

Service_Requisition_ID

This uniquely identifies service requisition details.

Service_ID

This uniquely identifies services provided to a LTC client.

Detail ID

This uniquely identifies services provided to a LTC client where a cost occurs/occurred.

Other_Cost_Type

Code which indicates other types of costs besides basic costs associated with service requisition details.

Code	Description
01TRN	Transportation
02MLS	Meals



03SUN	Sundry/personal care items	
04AFE	Administration Fees	
05LOG	Lodging	
06MSV	medical services	
07MIT	medical items for ECI	
08REC	Recreational-leisure cultural activities	
09PRK	Parking/Toll fees	
10CNV	RPSS Conversion	

Other_Cost_Reason

Code which indicates the reason for other types of costs associated with service requisition details.

Code	Description
01MED	Medical
02DAY	Daycare
03OTH	Other
99NUN	None

Other_Cost_Amount

This is the amount of the other types of costs associated with service requisition details.

Report_Date

Date on which the monthly report was generated, in the format YYYY-MM-DD.



11. Services

	11. Services			
Type ¹	Field name	Description		
С	Region	Service region code		
N	Service_ID	Service unique identifier		
С	Vendor_ID	Vendor unique identifier		
С	Name	Service provider name		
С	Service_Type	Service type code		
С	Service_Group	Service group code		
N	Resource_ID	Resource unique identifier		
С	Correspondence_Language	Correspondence language code		
С	Service_Language	Service language code		
N	Open_Date	Service open date		
С	Service_Status	Service status		
С	Status_Reason	Service status reason		
N	Status_ Effective_Date	Service status effective date		
N	On_Hold_Expiry_Date	Service on hold expiry date		
N	Next_Review_Date	Service next review date		
N	Rate	Service rate		
С	Unit_Type	Service unit type		
N	Maximum_Units	Maximum service units		
N	Confirmed_Units	Confirmed service units		
N	Available_Units	Available service units		
C	Profit_Type	Service provider profit type		
С	Attendance_Type	Service attendance type code		
C	Unique_Usage	Service unique usage code		
C	Parking_Facilities	Service parking facility code		
С	Parking_Fees	Service parking fee code		
С	Handicap_Access	Service handicap access code		
С	Meals_Provided	Service meal provision code		
С	Transportation_Available	Service transportation availability code		
С	Civic_Postal_Code	Service location postal code		
С	Civic_Country_Code	Service location country code		
С	Mailing_Postal_Code	Service mailing postal code		
С	Mailing_Country_Code	Service mailing country code		
N	Complaints- Most_Recent_Date	Complaints most recent date		
N	Incidents- Most_Recent_Date	Incidents most recent date		
N	Post Placements- Most_Recent Date	Post placements most recent dates		
N	Spot-checks- Most_Recent_Date	Spot checks most recent dates		
С	Approval_Type	Service approval type		
С	Approved_Unit_Type	Service approval unit type		



N	Number_of_Units_Approved	Number of service units approved
С	Classification	Service classification code
N	Initial_Contact_Date	Initial contact date
N	Approval_Date	Approval date
N	Last_Review_Date	Last review date
N	Assessment_Commencement Date	Assessment commencement date
N	Assessment_Completion_Date	Assessment completion date
N	Fire_Inspection_Date	Fire inspection date
N	Health _Inspection_Date	Health inspection date
N	Certificate_Issued_Date	Service certificate issued date
N	Expiry_Date	Service certificate expiry date
N	Contract_ID	Service contract unique identifier
N	Contract_Effective_Date	Service contract effective date
N	Contract_Expiry_Date	Service contract expiry date
С	Contract_Status	Service contract status
N	Report_Date	Report generated date

The type 'N' refers to numeric values while 'C' refers to both alphabetic and numeric characters.

Region

Code which indicates the region of the province that service is provided. Refer to the Region field in Caseload-Individual table for distinct values of this field.

Service_ID

This uniquely identifies each individual service provided to LTC clients

Vendor ID

This uniquely identifies service providers who provide service to LTC clients.

Name

This is the name of the service provider.



Service_Type

Code which indicates the type of service that is provided to a LTC client. Some service type codes are missing.

codes are missing.	Description
Code	Description
Missing code	Complex Case Basic Expenses
Missing code	Inter-country Adoption
BABYS	Babysitting – Private
HOMEV	Homemaker-Visiting-Private
LEISU	Reg. Leisure/Cultural Activities
CLOTH	Clothing
RESPI	Respiratory Therapy
ADDIT	Independent Living - Add. Cost
EDUC	Cost Related to Education/Training
BASIC	Independent Living - Basic Rate
PLACE	Group Home-Child
PLACE	Open Custody Group Home
ADDIC	Addiction-Resid. Treatment
COUNS	Genetic Counselling
COUNS	Retirement Counselling
TRANS	Transport. Standard. Regulation
PLACE	Safety Net
PLACE	Nursing Home
C/A/S	Clothing/Social Act. /Sundry
BASIC	CBSNC Basic Needs
SPSER	Special Service Allowance
SEASN	Seasonal Allowance - old; Arrears Payments
FA	Family Allowance
HCARD	Health Card Benefit
DENT	Dental Service
BASIC	Volunt.Care Supp Basic Needs
LEGAL	Legal Fees
RELEF	Relief Care Home-Child
EMEHO	Emergency Home-Child
PLACE	Foster Home
PLACE	Open Custody Home
PLACE	Provisional Home
PLACE	Therapeutic Home
PLACE	Child Place. Fac. Center
COUNS	Addict.Couns/Therapy-Ind./Group
AMBUL	Ambul/Med Transfer/Amb.Transp Care



TRANS Assistance-Medical Travel
TRANS Assist.-Travel (Non-Medical)
PRESC Assist.-Prescription Drugs

ASSIS Assist-Students-Loans/Grants/Scholarships

BABYS Babysitting Services

BUDG Budget Training/Counselling

TRANS Transportation-Public

MEDIC Clinic-Gen. Health (Not Specialized)
PLACE Adoption Home – Departmental

MEDIC Clinic-Specialized Health

CLOTH Clothing Bank/Collection/Distribution of Household Items

COUNS Crisis Counselling

TRANS Transportation-Day Care

DENT Dental Health Program (Not Clinic)

PLACE Detention/Incarceration

EMPL Empl.Serv.- Spec.Health Groups **PLACE** Associate Home/Altern.Fam.

AFLA – Supplement

Missing code Relief Care/Short Term Placement in Special Care Home

Missing code Housing Rental Fees
Missing code SIN Replacement Card

EQU-H Equip./Health Supply/Assistance
COUNS Family Violence Counselling

COUNS Grief Counsel. Bereavement Support

COUNS

Legal Counselling/Information

COUNS

Marriage Counsel./Enrichment

INTER

Ment. Health Assess/Intervention

COUNS Nutrition Counselling
OCCUP Occupational Therapy

PALLI Palliative Care

AIDE Parent Aide/Resp.Care/Fam.Support Wker

PHYSI Physiotherapy

PSECT Post-Sec/Profl/Tech Training

EDUC Pupil Serv/Guid./Psycho-Educ.Ast./Tutoring/Remedial Prog

UNIV
 TRANS
 COUNS
 COUNS
 COUNS
 University/College
 Transportation-School
 Sex Education/Counselling
 Sexual Perpetrator Counselling

SPEEC Speech Therapy

TAXI Taxi



TELE Telephone Reassurance

TRANS Transport. Health/Spec Group

VISN Vision Testing Program
TRANS Volunteer Transportation
SUNDY Sundry (Personal Items)

MEDIC Medical Items

SUPPL Res-Supplement/Child Subsidy

VISN Vision Care
MEDIC Medical Service

Missing code Volunteers-RecruitRef/Training/Superv-

Missing code Rental Supplement

Missing code Rentalsman/Ombudsman
Missing code Retirement Supplement

Missing code Role Model Services-Volunteer

Missing code School Nursing Program

Missing code Self Help/Support Groups (Excl. Mental Health & Addiction)

Missing code Adult Sitter

Missing code Sheltered Employ./Workshops

Missing code Spec Ed. Serv - Disab/Disturbed/Devel. Delayed

Missing code Supervised Comm. Living

Missing code Survivor's Benefits

Missing code Transitional Services for Offenders-Non Housing

Missing code Upgrading/Repair of Housing

Missing code Vital Statistics

Missing code Water Safety Training

Missing code Water Testing

Missing code Camping-Day Camping

Missing code Spec.Ast.Serv-Disab/Disturb./Devel.Delayed Child

Missing code Attendant Care

Missing code Attendant Care – Private

Missing code Interpreter

Missing code Personal Care

Missing code Trusteeship-Estate

Missing code Appeal Board Decision

Missing code Homemaker-Teaching-Private

Missing code Damage by Ward/Client
Missing code Cost Related to Adoption

Missing code 24/7 Short Term Placement Home

Missing code DFCS Nursing Staff
Missing code Legal Damages



Missing code **CPRF Center-Adult**

Missing code Community Residence Missing code Family Support Center

Missing code Day Care-Centre

Missing code Headstart

Missing code Early Interven.Infant Stimulation

Missing code Adoption Home – Family Missing code Adoption Home - Private Adoption Home - Spousal Missing code

Missing code **CPRF Home-Adult**

Missing code CPRF-Res-Adult-Parent Model Registered Home(CMP/APAC) Missing code Missing code Alternate Fam Living Arrangement Missing code Day Care-Comm. Day Care Home Missing code Day Care-Family Day Care Home Missing code Day Care-Integrated Day Care

Missing code **Addiction Awareness**

Missing code Addiction-Self Help Groups Missing code Adult Placement Info./Support Missing code Aging Adjustment Training Missing code Apprenticeship/Certification

Missing code Arts/Crafts

Missing code Assertiveness Training

Missing code Assist.-Food/Food Bk/Comm. Kitchens/Xmas Boxes

Missing code Assistance for Heating Missing code Assistance to Veterans Athletics/Fitness

Missing code **Basic Income Assistance**

Missing code Breastfeeding Advoc./Support Missing code **Burial Assistance Benefits**

Camping-Disabled/Spec. Groups Missing code

Missing code **Camping-Single Parents**

Missing code Case Aide

Missing code

Child Place. Info/Support Missing code Missing code Citizen/Crime Prevention Missing code Citizenship/Immig/Rights

Missing code **Communication Services for Special Groups**

Missing code **Consumer Protection**

Missing code Courts

Missing code Day Centre-Adult



Missing code Disability Assistance/WorkSafeNB

Missing code Diversion

Missing codeEmerg. Financial. AssistanceMissing codeEmot. Supp. During PregnancyMissing codeEmployment Aware./Soc.Action

Missing code

Missing code Grants/Loans-Shelter Constr/Improvement

Missing code Home Handy Person

Missing code Home Health Care/Supervision

Missing codeHome Security AlertMissing codeHomemaker-TeachingMissing codeDay Centre-Seniors

Missing code Hostels/Emergency Housing

Missing code

Missing code Hous.Assis/Provis.-Natives
Missing code Hous.Aware./Tenants Associations

Missing code Interv./Supp Serv-Spec Health Groups

EDUC Second/Post-Sec Ed-Extension
ACTIV Social Activities-Spec.Groups
COUNS Sexual Victim/Incest Counselling
Missing code Special Investigation Services
COUNS Teen Group Counselling

Missing code Unemployment Benefits

Missing code Victim/Witness Supp/Compensation TRANS Wheelchair Transp/Hydraulic Lift

Missing code Geriatric Assessment

Missing code Birth Certificate

TRANS Transportation-Private **Missing code** Housekeeping – Private

AIDE Parent Aide/Resp Care/Fam Supp Wker-Private

Missing code
BASIC
Subsid. Adopt-Basic Needs
Missing code
CPRF-Res-Adult-Shift Model
Bed Holding Fee for YCJA



Missing code Bed Holding Fee

Missing code Bed Retainer Fee - Group Home

Missing code Post Adoption

Missing code Medicare Replacement Card

Missing code Serving of Document

Missing code Blood Testing

Missing code Bed Retainer Fee - Emergency Home

Missing codeNursing Home - Crisis BedMissing codeFoster Home Regular (RPSS)Missing codeDSP Specialized FacilitationMissing codeDSP Independent FacilitationMissing codeDSP Self Directed Facilitation

Missing code DSP Government Assisted Facilitation

Missing code Witness Fees

Missing code Autism Intervention

Missing code Family Support Worker – old

Missing code Family Support Transportation Worker – old Missing code Family Support Worker Additional Travel – old

Missing code Passport Fees

Missing code Supplement for SCH clients awaiting NH plac.

Missing code Short Term Emergency Placement Beds in Special Care Homes

Missing code Housing Cooperative
Missing code Income Tax Advice (Free)

Missing code Inspect/Approv-Buildings/Facilities

Missing code Interest Subsidy

Missing code Foot Care

Missing code

Missing code Job Skills Training

Missing code Legal Aid

Missing code Library Serv.-Disab/Elderly
Missing code Life Skills-Resid. Care

Missing code Life Skills/Self Care-Day Program

Missing code Literacy Instruction

Missing code Meals On Wheels/Wheels to Meals
Missing code MH/Handic. Aware./Advocacy

Missing code MH Self Help/Supp Gr(Excl. Addiction)



Missing code Nursing Home/Relief Care Bed-Seniors/Adults

Missing code Occupational Safety

Missing code OAS/General Income Supplement

Missing code Out of Prov. Place.-Adult

Missing code Out of Prov Place.-Unmarried Mothers-Adult

Missing code Parenting/Fam. Life Training

Missing code Pest Control

Missing code Postnat Train/Care-Newborn

Missing code Prenatal Training

Missing code Private School-Elem/Second
Missing code Psycho-Social Assessment
Missing code Psycho-Social Aware./Support

Missing code Litigation Guardian
Missing code Academic Testing

Missing codeAddition.Benefits/Spec.ItemsMissing codeAdult Res.Fac-Emer/Trans.HouseMissing codeAssistance for Day Care ServicesMissing codeAssist.-Natives On ReservesMissing codeBoys/Girls Clubs/Youth Groups

Missing code Camping-Children/Youth
Missing code Care Level Assessment

Missing code Child Subsidy

PLACE Closed Cust. Home/Secure Shelter

Missing code Communicable Diseases-Prevention/Control

CULT Cultural Transition Adjust/Activity

Missing code Day Care Awareness/Support

Missing code Education Awareness/Support

Missing code Employment Assessment

COUNS Employment Counselling/Emp. Rehabilitative Counselling

Missing code Employment Standards Reg.
COUNS Family/Individual Counselling
Missing code Friendly Visiting (Volunteer)

EDUCA General Education Diploma (Ged)/Upgrading (Btsd)

Missing code Health Awareness/Research

Missing code Homemaker-Visiting

Missing code
Missing code
Housing Assistance/Provision for Disabled
Hous.Assis/Provis-Low Income Groups
Missing code
Housing Assist-Offenders/Halfway House

Missing code Hotels/Motels

Missing code Info/Soc Action/Advo. Not Elsewhere Classified



Missing code	Relief Care Private – Child
Missing code	Electronic Equipment and Accessories
NCARD	Nursing Home Health Card
Missing code	Family Support Worker
Missing code	Family Support Transportation Worker
Missing code	Family Support Worker Additional Travel
Missing code	Job Expos/On Job Training
Missing code	RESP Contribution
Missing code	Interim Kinship Services
Missing code	Seasonal Allowance
Missing code	Medical Reports for Public Trustee
SCBH	Specialized Care Bed Home
Missing code	Home Support Initial Assessment

Service_Group

Code which indicates the type of services provided to LTC clients. Service group codes are missing.

Code	Description
Missing code	Adoption Services
Missing code	Adult Residential Services
Missing code	Child Residential Services
Missing code	Community Based Services
Missing code	Day Care Services

Resource_ID

This uniquely identifies a resource that a service provider belongs to. A resource could be a company or individuals that provide various services to SD clients.

Correspondence_Language

Code which indicates the language of correspondence with which service was provided to the LTC client.

Code	Description	
1	English	
2	French	
3	Bilingual	



Service_Language

Code which indicates the language in which service was provided to a LTC client.

Code	Description	
1	English	
2	French	
3	Bilingual	

Open_Date

Date on which service provision was started for a LTC client, in the format YYYY-MM-DD.

Service_Status

Code which indicates the current status of the service that is provided to a LTC client. A service cannot be closed if it has active incidents or complains, vendor requests, service requisitions, or payment instructions. If a service is closed, the system closes all approvals, contracts, service tasks, resource tasks.

Code	Description
10	Not Active
20	Open
30	On Hold
40	Closed
CLOSD	Closed
HOLD	On Hold
NOTAC	Not Active
OPEN	Open

Service_Reason

Code which indicates the reason for the current status of the service provided to a LTC client.

Code	Description
Α	New Service
A1	Does not qualify
A2	Does not meet non-negotiable criteria
A3	On Hold Status Terminated
A4	Approval Denied
AA	<none></none>
В	Reopened/Transferred in
C	Reinstated as A Result of an Appeal
D	Allowed to Operate Pending Appeal



E	Restricted Admission Pending Appeal
F	Placement Adjustment Period
G	Provider Moved Out of Region
Н	Withdrawn/Discontinued
1	Provider Illness or Death
J	Provider Change in Finances
K	Failure to Meet Build Standards
L	Failure to Meet Fire Safety Standards
M	Failure to Meet Food Prep Standards
N	Failure to Meet Medication Standards
0	Failure to Meet Staff Requirements
P	Failure to Meet Other Health Standards
PUR	Provider Under Review
Q	Failure to Meet Other Oper. Standards
R	Abuse/Neglect of Client
S	Did Not Cooperate with Dept
Т	Confirmation of Complaint
TRN	Transfer from Other Reg. In NB
U	Failure to Meet Record Keeping Standards
X	Misuse of Funds
Υ	Adoption Finalized

Service_Effective_Date

Date on which a service provided to a LTC client became effective, in the format YYYY-MM-DD.

On_Hold_Expiry_Date

Date on which a service provided to a LTC client expired or became on hold, in the format YYYY-MM-DD.

Next_Review_Date

Date on which the status of services will be reviewed, in the format YYYY-MM-DD.

Rate

This the amount of money charged for a service.



Unit_Type

Code which indicates the service unit type.

Code	Description
AAAA	<none></none>
В	Space
BED	Bed
С	Quarter Hour
D	Hour
E	Half Day
F	Day
G	Week
Н	Month
I	Meal
IP	Item/Package
J	Kilometer
K	Trip
L	Session
LODG	Lodging Unit
M	Visit

Maximum_Units

This is the maximum number of service units.

Confirmed_Units

This is the number of service units confirmed by the Department of Social Development.

Available_Units

This is the number of available service units.

Profit_Type

Code which indicates the profit type of the service provider.

Code	Description
Α	Profit
В	Non-Profit
С	Non Incorporated



Attendance_Type

Code which indicates the attendance type of a service.

Code	Description	
Α	Part Time	
В	Full Time	
C	Both Full Time and Part Time	
D	After School	
E	Not Applicable	
F	Part Time and After School	
G	Full Time and After School	
Н	All of The Above	

Unique_Usage

Code which indicates whether a certain type of service may be provided to LTC clients from a service provider.

Code	Description	
N	No	
Υ	Yes	

Parking_Facilities

Code which indicates whether a service provider has parking spaces for clients in the facility.

Code	Description	
N	No	
Υ	Yes	

Parking Fees

Code which indicates whether a service provider charges parking fee when clients park in their facility.

Code	Description	
N	No	
Υ	Yes	

Handicap Access

Code which indicates whether a service provider has handicap access in their facility.

Code	Description
N	No



Υ	Yes		

Meals_Provided

Code which indicates whether a service provider provides meals for clients.

Code	Description	
N	No	
Υ	Yes	

Transportation_Available

Code which indicates whether transportation to the service provider is available for clients.

Code	Description
N	No
Υ	Yes

Civic_Postal_Code

This is the postal code of the location of a service provider, in free text form.

Civic_Country_Code

This is the country code of a service provider, in free text form.

Mailing_Postal_Code

This is the mailing postal code of the service provider's location, in free text form.

Mailing_Country_Code

This is the mailing country code of the service provider's location in free text form.

Complaints

This is the number of complaints received from LTC clients on a service provider.



Most_Recent_Date_for_Complaints

This is the most recent date on which the Department of Social Development received a client complaint on a service provider, in the format YYYY-MM-DD.

Incidents

This is the number of incidents reported for a service from the service provider.

Most Recent Date for Incidents

This is the most recent date on which the service provider reported an incident, in the format YYYY-MM-DD.

Post_Placement

This is the number of post placement services provided by the Department of Social Development.

Most_Recent_Date_for_Post_Placement

This is the most recent date on which a post placement service was reported, in the format YYYY-MM-DD.

Spotchecks

This is the number of spot-checks reported for a service provider.

Most_Recent_Date_for_Spotchecks

This is the most recent date when a spot check was reported, in the format YYYY-MM-DD.

Approval_Type

Code which indicates the approval type that is given for a service by the Department of Social Development.

Code	Description		
10	Interim		
50	Regular		



Approved_Unit_Type

This is the service unit type approved by the Department of Social Development. Refer to the Unit Type field in the Service table for values of this field.

Number_of_Units_Approved

This is the number of service units approved by the Department of Social Development for a LTC client.

Classification

Code which indicates the approved level of services provided to LTC clients.

Code	Description
10	Level 1
20	Level 2
30	Level 3
40	Level 4
55	Level 1&2
60	Level 2&3
65	Level 3&4
70	<none></none>

Initial Contact Date

This is the date of first contact between the service provider (providing an approved service) and the LTC client, in the format YYYY-MM-DD.

Approval_Date

This is the date on which a service provider receives approval from the Department of Social Development to provide service to LTC clients, in the format YYYY-MM-DD.

Last Review Date

This is the date on which the Department of Social Development reviewed the qualification of a service provider for providing a certain service, in the format YYYY-MM-DD.



Assessment_Commencement_Date

This is the date on which the Department of Social Development started assessing the qualification of a service provider for providing a certain service, in the format YYYY-MM-DD.

Assessment_Completion_Date

This is the date on which the Department of Social Development finished assessing the qualification of a service provider for a certain service, in the format YYYY-MM-DD.

Fire_Inspection_Date

This is the date on which the Department of Social Development carried out a fire inspection on a facility where a service provider plans to provide service to LTC clients, in the format YYYY-MM-DD.

Health_Inspection_Date

This is the date on which the Department of Social Development carried out a health inspection on a facility where a service provider plans to provide service to LTC clients, in the format YYYY-MM-DD.

Certificate_Issued_Date

This is the date on which the Department of Social Development issued a certificate to a service provider for the qualification of providing service to LTC clients, in the format YYYY-MM-DD.

Expiry Date

This is the expiry date of a certificate issued by the Department of Social Development to a service provider for a certain service, in the format YYYY-MM-DD.

Contract_ID

This uniquely identifies a contract signed between the Department of Social Development and service providers to provide a specific service to LTC clients.

Contract_Effective_Date

This is the effective date of a contract between the Department of Social Development and service providers, in the format YYYY-MM-DD.



Contract_Expiry_Date

This is the expiry date of a contract between the Department of Social Development and a LTC service provider, in the format YYYY-MM-DD.

Contract_Status

Code which indicates the current status of a contract between the Department of Social Development and a LTC service provider.

Code	Description
10	Open
20	On Hold
30	Terminated

Report_Date

This is the date on which the monthly report was generated, in the format YYYY-MM-DD.



12. Resources

Type ¹	Field name	Description
С	Region	Resource region code
N	Resource_ID	Resource unique identifier
С	Resource_Name	Resource name
С	Alternate_Resource_Name	Alternate resource name
С	Correspondence_Language	Corresponding language code
N	Registration_Date	Service provider registration date
С	Status	Service provider status code
N	Status_Effective_Date	Status effective date
N	Adoption_Services	Number of adoption services
N	Adult_Residential_Services	Number of adult residential services
N	Child_Residential_Services	Number of child residential services
N	Community_Based_Services	Number of community based services
N	Day_Care_Services	Number of day care services
С	Civic_ Postal_Code	Civic postal code
С	Civic_Country_Code	Civic country code
С	Mailing_Postal_Code	Mailing postal code
С	Mailing_Country_Code	Mailing country code
N	Report_Date	Report generated date

The type 'N' refers to numeric values while 'C' refers to both alphabetic and numeric characters.

Region

Code which indicates the resource region. Refer to the Region field in the Caseload-Individual table for distinct values of this field.

Resource_ID

This uniquely identifies service providers which provide services to LTC clients.

Resource_Name

This is the name of service provider in free text form.

Alternate_Resource_Name

This is the alternate service provider name in free text form.



Correspondence_Language

Code which indicates the language of correspondence with a LTC client.

Code	Description	
1	English	
2	French	
3	Bilingual	

Registration_Date

This is the date on which a service provider registered with the Department of Social Development to provide service to LTC clients, in the format YYYY-MM-DD.

Status

Code which indicates the current status of a service provider.

Code	Description	
Α	Open	
В	Closed	
С	On Hold	

Status_Effective_Date

This is the effective date of the status of a service provider, in the format YYYY-MM-DD.

Adoption_Services

This is the number of adoption services provided by a service provider.

Adult_Residential_Services

This is the number of adult residential services provided by a service provider.

Child_Residential_Services

This is the number of child residential services provided by a service provider.

Community_Based_Services

This is the number of community based services provided by a service provider.



Day_Care_Services

This is the number of day care services provided by a service provider.

Civic_Postal_Code

This is the postal code of the location of a service provider, in free text form.

Civic_Country_Code

This is the country code of the location of a service provider.

Mailing_Postal_Code

This is the mailing postal code of the location of a service provider, in free text form.

Mailing_Country_Code

This is the mailing country code of the location of a service provider.

Report_Date

This is the date on which the monthly report was generated, in the format YYYY-MM-DD.



13. Legal Details

Type ¹	Field name	Description
N	Case_ID	Case unique identifier
N	Individual_ID	Individual unique identifier
N	Legal_Detail_ID	Legal detail unique identifier
С	Legal_Detail_Type	Legal detail type
С	Act	Legal issue Act code
С	Section	Legal issue Section code
С	Status	Legal issue status code
N	Effective_Date	Effective date
N	Expiry_Date	Expiry date
С	Expiry_Reason	Expiry reason code
N	Original_Expiry_Date	Original expiry date
С	Province	Province
N	Report_Date	Report generation date

The type 'N' refers to numeric values while 'C' refers to both alphabetic and numeric characters.

Case_ID

This uniquely identifies a case.

Individual_ID

This uniquely identifies an individual involved in each case.

Legal_Detail_ID

This uniquely identifies legal details associated with a case, under the Family Service Act (FSA).

Legal_Detail_Type

Code which indicates the type of legal details involved in cases.

Detail Status	Description
ACCESS	Access order granted by the court
ADACT	Adoption under (former CWA-NB)
ADOPT	Adoption order
CA	Custody agreement (FSA)
CA-EXT	Custody agreement – extension



CC-YCJA Closed custody (YCJA)
CC-YOA Closed custody (YOA)

CMPA Child maint. payment agreement
CMPA-EXT Child maint. payment agreement - ext.

CO Custody order

CO-EXT Custody order – extension
CO-TER Custody order – termination

CO-VAR
CO-YOA
CO-YOA
CROWN
CROWN
DECL-O
DET-YCJA
DET-YOA
Custody order - var.
Open custody (YOA)
Crown wardship
Declaratory order
Detention (YCJA)
Detention (YOA)

FOST Foster parent agreement
GA Guardianship agreement

GA-EXT Guardianship agreement - ext. (former CWA - NB)

GO Guardianship order

GO-EXT Guardianship order - ext. (former CWA - NB)

GO-PW Guard. - formerly permanent ward
GO-TER Guardianship order - termination
GO-VAR Guardianship Order - Variation
HOSP Hospitalization order – adult

HOSP-MH Hospitalization status - adult (Mental Health Act)

INT-CO Custody order – interim

INT-HOS Hospitalization order - adult - interim

INT-PC-AD Protective care (adult) interim
INT-PC-C Protective care - child - interim

INT-PI-A Protective intervention order - adult - interim
INT-PI-C Protective intervention order - child - interim

INT-POS Place of safety – Interim

INT-SUP-AD Supervision order - adult - interim Supervision order - child - interim

INT-TREAT Order for medical, dental, surgical treatment - interim
INT-TRU-AD Supervision and trusteeship order - adult - interim

NWC Non ward care

NWC-CWA Non ward care (former CWA-NB)

OC-YCJA Open custody (YCJA)

O-INV Order to investigate – child

O-REC-C Production of records or documents - order

O-REM-C Removal of child order

PAYM Payment towards cost of care



PC Protective care (child)
PC-AD Protective care (adult)

PGA Post guardianship agreement

PGA-EXT Post guardianship agreement - extension
PI-A Protective intervention order - adult

PI-AD-TRM Protective intervention order - adult - term.

PI-C Protective intervention order - child

PI-CH-TRM Protective intervention order - child- term.
PI-EXA Protective intervention order - adult - ext.
PI-EXC Protective intervention order - child - ext.
PI-VAA Protective intervention order - adult - var.
PI-VAC Protective intervention order - child - var.

POS-EXT Place of safety order - ext.
POS-TRM Place of safety order - term.
POS-VAR Place of safety order - var.

PROB-YCJA Probation (YCJA)
PROB-YOA Probation (YOA)

PW Permanent wardship - out of NB

PW-CWA Permanent wardship (former CWA - NB)

RCA Relief care agreement

SACA Service agreement adopted child
SACA-EXT Service agreement adopted child - ext.

SUP-ADSupervision order – adultSUP-AD-EXTSupervision order - adult - ext.SUP-AD-TRMSupervision order - adult - term.SUP-AD-VARSupervision order - adult - var.SUP-CSupervision order - child

SUP-C-EXTSupervision order - child - ext.SUP-C-TRMSupervision order - child - term.SUP-C-VARSupervision order - child - var.TG-CRTTrustee-guardian assigned by CourtTRAN-CAgree. for transfer of child from NB

TREAT Order for medical, dental, surgical treatment
TREAT-EXT Order for medical, dental, surgical treatment - ext
TRU-AD-EXT Supervision and trusteeship order - adult - ext.
TRU-AD-TRM Supervision and trusteeship order - adult - term.
TRU-AD-VAR Supervision and trusteeship order - adult - var.

TRUST-AD Supervision and trusteeship order - adult

TW Temporary wardship - out of NB
TW-CWA Temporary wardship (former CWA)



VCSA	Voluntary care agreement
VCSA-EXT	Voluntary care agreement - ext.
VIC-PI-C	Victim of protective intervention order - child
W-ENTRY-A	Warrant for entry – adult
W-REM-A	Warrant for removal - adult

Act

Code which indicates the Act that applies to the legal issue.

Code	Description	
AA	Adoption Act	
AAAA	<none></none>	
CW	Former Nb Child Welfare Act	
cwo	Child Welfare Act-Jur Out Nb	
FISA	FISA	
FSA	Family Services Act	
MHA	MHA	
SWA	Social Welfare Act Nb	
YOA	Young Offenders Act	

Section

Code which indicates the section in the Act that applies to the legal issue.

Code	Description	
100	16	
101	20	
102	3(1)	
103	31(2.3)	
104	31(2.6)	
105	32(01)	
106	33(01)	
107	37(01)	
108	39(01) A	
109	39(01) B	
110	39(01) C	
111	39(07)	
112	40(02)	
113	42(01)	
114	44(01) A	
115	44(01) B	



116		
118	116	47
119	117	48(03)
120	118	49(05)
121 54(01) 122 54(02) 123 55(01) 124 55(02) 125 56(01) 126 56(05) 127 57(01) 128 57(02) 129 58(01) 130 58(04) 131 60(02) 132 72 150 55(02) or 60(02) 151 46(01) 152 44(01) 153 22 154 62(02) 155 40(01) 40(02) 156 36(01) 157 36(01) 39(01) 158 39(01) 200 56(4) or 60(2) 201 39(1) or 40(2) 202 51(7) a 203 55(5) 204 57(2) or 60(2) 205 37(1.1) 206 53(1b) or 60(2) 207 49(5) or 3(1)(d) 208 35(3) 209 39(1) or 40(1) 210 37(1.1) 211 36(1) or 39(1) c 212 56(3) 213 75	119	51(07)
121 54(01) 122 54(02) 123 55(01) 124 55(02) 125 56(01) 126 56(05) 127 57(01) 128 57(02) 129 58(01) 130 58(04) 131 60(02) 132 72 150 55(02) or 60(02) 151 46(01) 152 44(01) 153 22 154 62(02) 155 40(01) 40(02) 156 36(01) 157 36(01) 39(01) 158 39(01) 200 56(4) or 60(2) 201 39(1) or 40(2) 202 51(7) a 203 55(5) 204 57(2) or 60(2) 205 37(1.1) 206 53(1b) or 60(2) 207 49(5) or 3(1)(d) 208 35(3) 209 39(1) or 40(1) 210 37(1.1) 211 36(1) or 39(1) c 212 56(3) 213 75	120	51.1(05) B
122	121	
123	122	
124 55(02) 125 56(01) 126 56(05) 127 57(01) 128 57(02) 129 58(01) 130 58(04) 131 60(02) 132 72 150 55(02) or 60(02) 151 46(01) 152 44(01) 153 22 154 62(02) 155 40(01) 40(02) 156 36(01) 157 36(01) 39(01) 158 39(01) 200 56(4) or 60(2) 201 39(1) or 40(2) 202 51(7) a 203 55(5) 204 57(2) or 60(2) 205 37(1.1) 206 53(1b) or 60(2) 207 49(5) or 3(1)(d) 208 35(3) 209 39(1) or 40(1) 211 36(1) or 39(1) c 212 56(3) 213 75	123	
125	124	
126	125	
128	126	56(05)
129	127	57(01)
130	128	57(02)
131 60(02) 132 72 150 55(02) or 60(02) 151 46(01) 152 44(01) 153 22 154 62(02) 155 40(01) 40(02) 156 36(01) 157 36(01) 39(01) 158 39(01) 200 56(4) or 60(2) 201 39(1) or 40(2) 202 51(7) a 203 55(5) 204 57(2) or 60(2) 205 37(1.1) 206 53(1b) or 60(2) 207 49(5) or 3(1)(d) 208 35(3) 209 39(1) or 40(1) 210 37(1.1) 211 36(1) or 39(1) c 212 56(3) 213 75	129	58(01)
132 72 150 55(02) or 60(02) 151 46(01) 152 44(01) 153 22 154 62(02) 155 40(01) 40(02) 156 36(01) 157 36(01) 39(01) 158 39(01) 200 56(4) or 60(2) 201 39(1) or 40(2) 202 51(7) a 203 55(5) 204 57(2) or 60(2) 205 37(1.1) 206 53(1b) or 60(2) 207 49(5) or 3(1)(d) 208 35(3) 209 39(1) or 40(1) 210 37(1.1) 211 36(1) or 39(1) c 212 56(3) 213 75	130	58(04)
150	131	60(02)
151	132	72
152	150	55(02) or 60(02)
153 22 154 62(02) 155 40(01) 40(02) 156 36(01) 157 36(01) 39(01) 158 39(01) 200 56(4) or 60(2) 201 39(1) or 40(2) 202 51(7) a 203 55(5) 204 57(2) or 60(2) 205 37(1.1) 206 53(1b) or 60(2) 207 49(5) or 3(1)(d) 208 35(3) 209 39(1) or 40(1) 210 37(1.1) 211 36(1) or 39(1) c 212 56(3) 213 75	151	46(01)
154 62(02) 155 40(01) 40(02) 156 36(01) 157 36(01) 39(01) 158 39(01) 200 56(4) or 60(2) 201 39(1) or 40(2) 202 51(7) a 203 55(5) 204 57(2) or 60(2) 205 37(1.1) 206 53(1b) or 60(2) 207 49(5) or 3(1)(d) 208 35(3) 209 39(1) or 40(1) 210 37(1.1) 211 36(1) or 39(1) c 212 56(3) 213 75	152	44(01)
155	153	22
156	154	62(02)
157	155	40(01) 40(02)
158 39(01) 200 56(4) or 60(2) 201 39(1) or 40(2) 202 51(7) a 203 55(5) 204 57(2) or 60(2) 205 37(1.1) 206 53(1b) or 60(2) 207 49(5) or 3(1)(d) 208 35(3) 209 39(1) or 40(1) 210 37(1.1) 211 36(1) or 39(1) c 212 56(3) 213 75	156	36(01)
200 56(4) or 60(2) 201 39(1) or 40(2) 202 51(7) a 203 55(5) 204 57(2) or 60(2) 205 37(1.1) 206 53(1b) or 60(2) 207 49(5) or 3(1)(d) 208 35(3) 209 39(1) or 40(1) 210 37(1.1) 211 36(1) or 39(1) c 212 56(3) 213 75	157	36(01) 39(01)
201 39(1) or 40(2) 202 51(7) a 203 55(5) 204 57(2) or 60(2) 205 37(1.1) 206 53(1b) or 60(2) 207 49(5) or 3(1)(d) 208 35(3) 209 39(1) or 40(1) 210 37(1.1) 211 36(1) or 39(1) c 212 56(3) 213 75	158	39(01)
202 51(7) a 203 55(5) 204 57(2) or 60(2) 205 37(1.1) 206 53(1b) or 60(2) 207 49(5) or 3(1)(d) 208 35(3) 209 39(1) or 40(1) 210 37(1.1) 211 36(1) or 39(1) c 212 56(3) 213 75	200	56(4) or 60(2)
203 55(5) 204 57(2) or 60(2) 205 37(1.1) 206 53(1b) or 60(2) 207 49(5) or 3(1)(d) 208 35(3) 209 39(1) or 40(1) 210 37(1.1) 211 36(1) or 39(1) c 212 56(3) 213 75	201	39(1) or 40(2)
204 57(2) or 60(2) 205 37(1.1) 206 53(1b) or 60(2) 207 49(5) or 3(1)(d) 208 35(3) 209 39(1) or 40(1) 210 37(1.1) 211 36(1) or 39(1) c 212 56(3) 213 75	202	51(7) a
205 37(1.1) 206 53(1b) or 60(2) 207 49(5) or 3(1)(d) 208 35(3) 209 39(1) or 40(1) 210 37(1.1) 211 36(1) or 39(1) c 212 56(3) 213 75	203	55(5)
206 53(1b) or 60(2) 207 49(5) or 3(1)(d) 208 35(3) 209 39(1) or 40(1) 210 37(1.1) 211 36(1) or 39(1) c 212 56(3) 213 75	204	57(2) or 60(2)
207 49(5) or 3(1)(d) 208 35(3) 209 39(1) or 40(1) 210 37(1.1) 211 36(1) or 39(1) c 212 56(3) 213 75	205	
208 35(3) 209 39(1) or 40(1) 210 37(1.1) 211 36(1) or 39(1) c 212 56(3) 213 75	206	53(1b) or 60(2)
209 39(1) or 40(1) 210 37(1.1) 211 36(1) or 39(1) c 212 56(3) 213 75	207	49(5) or 3(1)(d)
210 37(1.1) 211 36(1) or 39(1) c 212 56(3) 213 75		
211 36(1) or 39(1) c 212 56(3) 213 75		
212 56(3) 213 75		
213 75	211	
	212	56(3)
300 61(1)		
	300	61(1)



AAAAA	<none></none>		

Status

Code which indicates the current status of a legal issue in a case.

Code	Description	
ACTV	Active	
EXPRD	Expired	

Effective_Date

This is the date on which the current status of a legal detail became effective, in the format YYYY-MM-DD.

Expiry_Date

This is the date on which the current status of a legal detail expired, in the format YYYY-MM-DD.

Expiry_Reason

Code which indicates the reason for the 'expired' status of the legal detail.

Code	Description
	Description
10	Deceased
11	Departmental Decision
12	Expired
13	Judicial Decision
14	Other
15	Agreement Revoked
16	Pending

Original_Expiry_Date

This is the original expiry date of the legal detail, in the format YYYY-MM-DD.

Province

This is the province associated with the legal detail.



Report_Date

This is the date on which the monthly report was generated, in the format YYYY-MM-DD.