

**SIS101 SERVICES INFORMATION SYSTEM CLIENT ENTRY FORM  
DSS-5027**

**Table of County Codes Used for the Services Information System.**

01	Alamance	51	Johnston
02	Alexander	52	Jones
03	Alleghany	53	Lee
04	Anson	54	Lenoir
05	Ashe	55	Lincoln
06	Avery	56	Macon
07	Beaufort	57	Madison
08	Bertie	58	Martin
09	Bladen	59	McDowell
10	Brunswick	60	Mecklenburg
11	Buncombe	61	Mitchell
12	Burke	62	Montgomery
13	Cabarrus	63	Moore
14	Caldwell	64	Nash
15	Camden	65	New Hanover
16	Carteret	66	Northampton
17	Caswell	67	Onslow
18	Catawba	68	Orange
19	Chatham	69	Pamlico
20	Cherokee	70	Pasquotank
21	Chowan	71	Pender
22	Clay	72	Perquimans
23	Cleveland	73	Person
24	Columbus	74	Pitt
25	Craven	75	Polk
26	Cumberland	76	Randolph
27	Currituck	77	Richmond
28	Dare	78	Robeson
29	Davidson	79	Rockingham
30	Davie	80	Rowan
31	Duplin	81	Rutherford
32	Durham	82	Sampson
33	Edgecombe	83	Scotland
34	Forsyth	84	Stanly
35	Franklin	85	Stokes
36	Gaston	86	Surry
37	Gates	87	Swain
38	Graham	88	Transylvania
39	Granville	89	Tyrrell
40	Greene	90	Union
41	Guilford	91	Vance
42	Halifax	92	Wake
43	Harnett	93	Warren
44	Haywood	94	Washington
45	Henderson	95	Watauga
46	Hertford	96	Wayne

47	Hoke	97	Wilkes
48	Hyde	98	Wilson
49	Iredell	99	Yadkin
50	Jackson	00	Yancey

## **SIS101.01 DEFINITIONS OF TABLE VALUES FOR STANDARD FIELDS**

### **SECTION I**

#### **FIELD 13 END REASON**

- 01 Service no longer needed or wanted
- 02 Client not eligible
- 03 Death of client
- 04 Service not available
- 09 Other

#### **FIELD 14 SPECIAL USE**

This field is used to collect information which is needed for a special purpose and will not be used except under special circumstances. Refer to Section II: "Table Values for Reserved Fields" of this Appendix for the individualized instructions regarding the use of this field.

#### **FIELD 18 STATE USE**

- 1 Indigent Recipient**

#### **FIELD 19 SPECIAL AREAS**

- 01 Developmental Disabilities**  
Having a severe, chronic mental or physical disability resulting in substantial limitations in three or more of the following areas of major life activity: self-care, receptive and expressive language, capacity for independent living, learning, mobility, self direction, and economic self-sufficiency and reflecting the person's need for a combination of special inter-disciplinary care or treatment of a lifelong or extended duration, manifested before age 22, unless caused by a head injury.
- 02 Blind or Visually Impaired**  
Having visual impairment that, in the worker's judgment, may significantly affect day-to-day functioning.
- 03 Deaf or Hard of Hearing**  
Having a hearing impairment, whether permanent or fluctuating, that may in the worker's judgment, adversely affect day-to-day functioning; a communication disorder such as stuttering, impaired articulator; or a language impairment that adversely affects functioning.

- 04 Physically Disabled**  
Having a physical condition that may, in the worker's judgment, adversely affects the individual's day-to-day or intermittent functioning.
- 05 Emotionally Disturbed**  
Having mental or emotional problems exhibited in a wide range of important social and personal contexts and causing significant impairment in social, educational, or occupational functioning.
- 06 Learning Disability**  
Having a disorder in one or more of the basic psychological processes involved in understanding or using language, spoken or written, that may manifest itself in an imperfect ability to listen, think, speak, read, write, spell or to use mathematical calculations. An example of a learning disability would be dyslexia.
- 07 Medical Condition**  
Having any apparently disabling physical condition other than those listed above, which has been diagnosed by a licensed physician and that needs medical attention.
- 08 HIV and AIDS**  
Having a syndrome, or a disease complex in which the natural immune system is suppressed so significantly that individuals gradually die from vulnerability to a variety of unusual infections and concerns (opportunistic infections) that would not ordinarily pose a threat to an immunologically healthy person.
- 09 Substance Abuse**  
Using alcohol or other drugs to a degree which creates a risk of harm to self or others, or impairs social, educational or occupational functioning.
- 11 Undisciplined Child**  
A child who is an adjudicated undisciplined child under NCGS 7A-517(28).

- 12 Delinquent Child**  
A child who is an adjudicated delinquent child under NCGS 7A-517(12).
- 13 Homeless Person**  
A person who does not have what society defines as a normal place of his/her own to live.
- 14 Alzheimer's Disease and Related Dementia's**  
Having an organic mental disorder, in which intellectual function is progressively impaired in a previously well adult, usually accompanied by memory loss, disorientation, impaired judgment, and personality change.

**FIELD 20 REASON (For Needing Services) 01**

**Out-of-Home Placement**

A need to move a child from the home of parents or other responsible adult(s); or a need for an adult to leave own home (or home maintained for him/her by caretakers) and be placed in substitute care.

- 02 Prevention of Placement**  
A need for services to keep a child or adult in his/her own home (or home maintained for him/her by caretakers).
- 03 Family Reunification**  
A need for services to improve conditions which led to family separation so that family may be reunited
- 04 Family Disruption**  
A need for services to strengthen and maintain the family.
- 05 Protective Services**  
A need for services as a result of a report of child abuse or neglect or adult abuse, neglect or exploitation. Use this designation even for those cases where the report was not substantiated after assessment.
- 09 Other**  
A need for services for reasons other than those defined above.

**FIELD 21 LEGAL STATUS**

- 01 Minor**  
Any individual under the age of 18, unless emancipated.
- 02 Emancipated Minor**  
A child who has been adjudicated an "emancipated minor", or who is currently married, or who is a member of the armed forces.
- 03 Adult**  
Any individual who is age 18 or over, unless incompetent.

- 04 Incompetent Adult**  
An adult who has been adjudicated incompetent.

**FIELD 22 LIVING ARRANGEMENT**

- 01 Living Alone**  
An independent living arrangement where the individual resides either alone, or with others where the relationship is not characterized by intimacy, continuity or commitment, as in a rooming house or shared housing.
- 02 Living With Family or Other Significant Individual(s)**  
A home occupied by two or more people who are related by blood, marriage, adoption or who have a commitment to care for one another.
- 03 Family Care Home**  
A licensed domiciliary home having a capacity of two to six residents.
- 04 Home for the Aged**  
A licensed domiciliary home has a capacity of seven or more residents.
- 05 Group Home for Developmentally Disabled Adults**  
A licensed DDS group home housing residents with developmental disability, regardless of which local/state agency has licensing monitoring or certification responsibilities.
- 06 Nursing/Combination Home**  
A licensed facility which provides nursing or convalescent care for three or more persons.
- 07 Treatment/Rehabilitation Facility/Home**  
A 24-hour facility/home, which provides treatment or rehabilitation, services for medical, psychosocial, or psychiatric needs (e.g. medical or psychiatric hospital and mental health group home for persons with mental illness). Not included in this definition are nursing homes, maternity homes, and group homes for developmentally disabled adults.
- 08 Maternity Home**  
A 24-hour residential program whose primary purpose is to provide care, support and other services for pregnant females.
- 09 Jail, Lockup, Detention**  
A local jail or a facility administered by the Department of Corrections or Division of Youth Services.
- 10 Battered Women's Shelter**  
A 24-hour residential program whose primary purpose is to offer protection, food, shelter, support and other services to battered women and their children.
- 11 Shelter for the Homeless**  
An overnight shelter for people without homes.

- 97 Child Placement System (DSS-5094)**  
When the client is a child for whom the DSS has custody or placement authority, the living arrangement will be tracked through the Child Placement and Payment System. This code should remain unchanged in this system for as long as the DSS-5094 record remains open. If the client remains a service client after the DSS-5094 record is closed, this field will have to be updated to reflect the actual living arrangement.
- 98 Other**  
A living arrangement which is known to the agency but does not fit the above definitions.
- 99 Unknown**

**FIELD 23      SEX**

**1          Male**

**2          Female**

**FIELD 24      RACE/ETHNICITY**

**The 6 races are:**

- **American Indian or Alaskan Native**
- **Asian**
- **Black or African American**
- **Native Hawaiian or Other Pacific Islander**
- **White**
- **Unable to Determine**

**Race codes and possible combinations that could be selected are:**

- 01 = White Native (Non Hispanic or Latino)**
- 02 = White (Hispanic or Latino)**
- 03 = Black (Non Hispanic or Latino)**
- 04 = Black (Hispanic or Latino)**
- 05 = American Indian or Alaskan Native (Non Hispanic or Latino)**
- 06 = American Indian or Alaskan Native (Hispanic or Latino)**
- 07 = Asian (Non Hispanic or Latino)**
- 08 = Asian (Hispanic or Latino)**
- 09 = Native Hawaiian or Other Pacific Islander (Non Hispanic or Latino)**
- 10 = Native Hawaiian or Other Pacific Islander (Hispanic or Latino)**
- 11 = Unable to Determine (Non Hispanic or Latino)**
- 12 = Unable to Determine (Hispanic or Latino)**
- 13 = White/Black (Non Hispanic or Latino)**
- 14 = White/Black (Hispanic or Latino)**
- 15 = White/American Indian or Alaskan Native (Non Hispanic or Latino)**
- 16 = White/American Indian or Alaskan Native (Hispanic or Latino)**
- 17 = White/Asian (Non Hispanic or Latino)**
- 18 = White/Asian (Hispanic or Latino)**
- 19 = White/Native Hawaiian or Other Pacific Islander (Non Hispanic or Latino)**
- 20 = White/Native Hawaiian or Other Pacific Islander (Hispanic or Latino)**
- 21 = Black/American Indian or Alaskan Native (Non Hispanic or Latino)**
- 22 = Black/American Indian or Alaskan Native (Hispanic or Latino)**
- 23 = Black/Asian (Non Hispanic or Latino)**
- 24 = Black/Asian (Hispanic or Latino)**
- 25 = Black/Native Hawaiian or Other Pacific Islander (Non Hispanic or Latino)**
- 26 = Black/Native Hawaiian or Other Pacific Islander (Hispanic or Latino)**
- 27 = American Indian or Alaskan Native/Asian (Non Hispanic or Latino)**
- 28 = American Indian or Alaskan Native/Asian (Hispanic or Latino)**
- 29 = American Indian or Alaskan Native/Native Hawaiian or Other Pacific Islander (Non Hispanic or Latino)**

- 30 = American Indian or Alaskan Native/Native Hawaiian or Other Pacific Islander (Hispanic or Latino)**
- 31 = Asian/Native Hawaiian or Other Pacific Islander (Non Hispanic or Latino)**
- 32 = Asian/Native Hawaiian or Other Pacific Islander (Hispanic or Latino)**
- 33 = White/Black/American Indian or Alaskan Native (Non Hispanic or Latino)**
- 34 = White/Black/American Indian or Alaskan Native (Hispanic or Latino)**
- 35 = White/Black/Asian (Non Hispanic or Latino)**
- 36 = White/Black/Asian (Hispanic or Latino)**
- 37 = White/Black/Native Hawaiian or Other Pacific Islander (Non Hispanic or Latino)**
- 38 = White/Black/Native Hawaiian or Other Pacific Islander (Hispanic or Latino)**
- 39 = White/American Indian or Alaskan Native/Asian (Non Hispanic or Latino)**
- 40 = White/American Indian or Alaskan Native/Asian (Hispanic or Latino)**
- 41 = White/American Indian or Alaska. Native/Native Hawaiian or Other Pac. Islander (Non Hispanic or Latino)**
- 42 = White/American Indian or Alaskan. Native/Native Hawaiian or Other Pac. Islander (Hispanic or Latino)**
- 43 = White/Asian/Native Hawaiian or Other Pacific Islander (Non Hispanic or Latino)**
- 44 = White/Asian/Native Hawaiian or Other Pacific Islander (Hispanic or Latino)**
- 45 = Black/American Ind. or Alaskan/Asian (Non Hispanic or Latino)**
- 46 = Black/American Ind. or Alaskan/Asian (Hispanic or Latino)**
- 47 = Black/American Ind. or Alaskan/Native/Hawaiian (Non Hispanic or Latino)**
- 48 = Black/American Ind. or Alaskan Native/Hawaiian (Hispanic or Latino)**
- 49 = Black/Asian/Native Hawaiian or Other Pacific Islander (Non Hispanic or Latino)**
- 50 = Black/Asian/Native Hawaiian or Other Pacific Islander (Hispanic or Latino)**
- 51 = American Indian/Asian/Native Hawaiian (Non Hispanic or Latino)**
- 52 = American Indian/Asian/Native Hawaiian (Hispanic or Latino)**
- 53 = White/Black/American Indian/Asian (Non Hispanic or Latino)**
- 54 = White/Black/American Indian/Asian (Hispanic or Latino)**
- 55 = White/Black/American Indian/Native Hawaiian (Non Hispanic or Latino)**
- 56 = White/Black/American Indian/Native Hawaiian (Hispanic or Latino)**
- 57 = White/Black/Asian/Native Hawaiian (Non Hispanic or Latino)**
- 58 = White/Black/Asian/Native Hawaiian (Hispanic or Latino)**
- 59 = White/American Indian/Asian/Native Hawaiian (Non Hispanic or Latino)**
- 60 = White/American Indian/Asian/Native Hawaiian (Hispanic or Latino)**
- 61 = Black/American Indian/Asian/Native Hawaiian (Non Hispanic or Latino)**
- 62 = Black/American Indian/Asian/Native Hawaiian (Hispanic or Latino)**
- 63 = White/Black/American Indian/Asian/Native Hawaiian (Non Hispanic or Latino)**
- 64 = White/Black/American Indian/Asian/Native Hawaiian (Hispanic or Latino)**
- 65 = Unable to Determine (Abandoned) = UDA**
- 66 = Unable to Determine (Declined) = UDD**

**FIELD 25 IN SCHOOL**

- P** Yes – individual is enrolled in a *public* school
- R** Yes – individual is enrolled in a *private* school
- H** Yes – individual is enrolled in *home* school
- N** No – individual is *not enrolled* in school

**FIELD 26 HIGHEST GRADE**

- P** Preschool
- 00** No grade completed.
- 01 - 20** Enter the highest grade attained whether the individual is currently enrolled or no longer in school. Entry is required if the age of the individual is between 4 and 21 years of age (inclusive), based on the date of birth entered in Field 4.
- 98** GED status
- 99** Unknown Not allowed if individual is between 4 and 21 years of age (inclusive).

**FIELD 27 LANGUAGE PREFERENCE**

<b>EN</b>	<b>English</b>	<b>KO</b>	<b>Korean</b>
<b>SP</b>	<b>Spanish</b>	<b>LA</b>	<b>Laotian</b>
<b>AR</b>	<b>Arabic</b>	<b>MI</b>	<b>Miao</b>
<b>CA</b>	<b>Cambodian</b>	<b>MK</b>	<b>Mon-Khmer</b>
<b>CH</b>	<b>Chinese</b>	<b>PE</b>	<b>Persian</b>
<b>FR</b>	<b>French</b>	<b>PO</b>	<b>Polish</b>
<b>FC</b>	<b>French Creole</b>	<b>PG</b>	<b>Portuguese</b>
<b>GE</b>	<b>German</b>	<b>PC</b>	<b>Portuguese Creole</b>
<b>GR</b>	<b>Greek</b>	<b>RU</b>	<b>Russian</b>
<b>GU</b>	<b>Gujarati</b>	<b>SC</b>	<b>Serbo-Croatian</b>
<b>HI</b>	<b>Hindi</b>	<b>TA</b>	<b>Tagalog</b>
<b>HM</b>	<b>Hmong</b>	<b>TH</b>	<b>Thai</b>
<b>HU</b>	<b>Hungarian</b>	<b>UR</b>	<b>Urdu</b>
<b>IT</b>	<b>Italian</b>	<b>VI</b>	<b>Vietnamese</b>
<b>JA</b>	<b>Japanese</b>	<b>OT</b>	<b>Other</b>

**FIELD 28 SPECIAL EDUCATION STATUS**

- Y** Yes - the youth is receiving special education at no cost to the parent.
- N** No - the youth is not receiving special education.

**FIELD 29 RACE DECLINED**

- Y** Yes - the youth or parent has declined to identify a race; 'Y' is valid only when the Race Code in Field 24 is '11', '12' or '66'.
- N** No - the youth or parent has not declined to identify a race; 'N' is valid with any Race Code in Field 24 (including '11' or '12').

## **SIS101.02 DEFINITIONS OF TABLE VALUES FOR RESERVED FIELDS**

### **SECTION II**

#### **Table A Home and Community Care Block Grant**

NOTE: Complete both fields 7 and 14 for HCCBG. It is essential that the Home and Community Care Block Grant codes be keyed into the system by the 10th of each month or the last working day prior to the 10th when the 10th falls on a weekend or holiday. Payment may be denied by the Division of Aging if this deadline is not met.

#### **FIELD 7 OTHER**

All five spaces must be completed or the client will not be registered and payment from the Division of Aging will not be made except as noted for the Fifth Space, which is required only for clients receiving Preparation and Delivery of Meals. The Division of Aging policy regarding the definitions and use of these codes is to be followed. This can be found in the Home and Community Care Block Grant Procedures Manual for Community Service Providers, Sections 3 and 4.

##### **First Space**

Enter **A** in the first space of the Other field to identify that the data to follow applies to the Home and Community Care Block Grant (HCCBG) administered by the Division of Aging.

##### **Second Space - Is client oriented?**

- 1 No**  
Referral source or agency's professional assessment indicates client has a problem with or has suffered a significant decline in short term memory, thinking, or decision making.
- 2 Yes**  
Referral source or agency's professional assessment indicate no indication of a significant memory problem.

##### **Third Space - Number of IADL impairments client experiences.**

- 0** None
- 1** One impairment
- 2** Two impairments
- 3** Three or more impairments

##### **Fourth Space - Number of ADL impairments client experiences.**

- 0** None
- 1** One impairment
- 2** Two impairments
- 3** Three or more impairments

**Fifth Space - Is client at nutritional risk?**

Note: Entry required only for clients receiving Preparation and Delivery of Meals

- 1 No nutritional risk
- 2 Moderate nutritional risk
- 3 High nutritional risk

**FIELD 14 SPECIAL USE**

**First Space** - Enter **A** in the first space of the Special Use field to identify that the data to follow applies to the Home and Community Care Block Grant (HCCBG) administered by the Division of Aging.

For each service to be provided under the Home and Community Care Block Grant, complete the next five spaces of this field to answer the following questions. All five spaces must be completed or the client will not be registered and payment from the Division of Aging will not be made except as noted for the Sixth Space, which is required only for clients receiving Preparation and Delivery of Meals. The Division of Aging policy regarding the definitions and use of these codes is to be followed. This can be found in the Home and Community Care Block Grant Procedures Manual for Community Service Providers, Sections 3 and 4.

**Second Space - What is the functional status of the individual?**

Note: DSS-5027 entry will be rejected if the functional status is coded "1 Well" and the client is being registered for In-Home Aide Services, Adult Day Care or Adult Day Health unless the client is the caregiver as indicated in the Fourth Space, below.

- 1 Well
- 2 At Risk
- 3 High Risk

**Third Space - Is the service being provided to relieve the caregiver?**

(When the answer is Yes and the service being provided is In Home Aide Services, the system will automatically convert to the DOA Respite code for the same level of In Home Aide Services).

- 1 Yes
- 2 No

**Fourth Space - Is the client the caregiver?**

- 1 Yes
- 2 No

**Fifth Space - Is the client economically needy?**

- 1 Yes
- 2 No

**Sixth Space - Are Nutrition Services (as defined by the Division of Aging) being provided under the Division of Aging definition of Special Eligibility Criteria?**

Note: Entry required only for clients receiving Preparation and Delivery of Meals. DSS-5027 entry will be rejected if incorrect age entry is made here for clients being registered for Preparation and Delivery of Meals.

- 1 Yes (Client is age 59 or under)
- 2 No (Client is age 60 or older)