



Juvenile Welfare Board

Investing in children. Strengthening our community.

Data Quality Manual

Effective 10/1/2024

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A. Definitions

Absence: a participant who is not present in the scheduled program time at least one half of the program time shall be counted absent from that program. To be counted present for the program on a day in which the program is scheduled, a participant must be in attendance for at least one half of the scheduled program time that day.

Adult: a participant who is eighteen years of age or older or who is receiving the services of an adult, i.e. participants under eighteen years of age and currently pregnant or a teen parent and receiving the services of an adult.

Provider [Referred to as Organization in JWB Flex]: 501©3 organization, government entity, or institute for higher learning that receives funding from JWB.

Attendance: a program specific predefined activity that is collected as the service is received in a group setting and indicates dates of individual participation.

Carry Over: a participant whose episode and service date begins in one JWB fiscal year (10/1—9/30) and continues into the next JWB fiscal year.

Child: a participant who is under the age of eighteen at time of intake or someone who is eighteen or older but receiving school-based services.

Close Date: the last date the participant is enrolled in the program.

Date of Birth: the legal date a participant was born.

Participant Module: The location in which all forms pertaining to a specific participant are maintained and accessed. Each participant entered in JWB Flex will have their own document folder.

Episode: a period of time in which a participant is active in a program and receiving services.

Excused Absence: a participant must be in the program unless the absence has been permitted or excused for one of the reasons listed below.

- Medical – need to note in the file an excused absence, more than 5 days medical note
- Documented extended learning – letter from school with length and days student would be attending the program. Extended learning is considered to be academic related and does not include extracurricular activities.
- Court order
- Bereavement (immediate family member)
- Religious holidays
- Work
- COVID-19

Excused absences do not include school closed days or exclusions from the program due to extracurricular activities.

JWB Flex: JWB’s participant data and grants management platform.

Name of Head of Household: the member of the household who contributes more than half of the household’s income or makes most of the household decisions.

Household: includes all people who occupy a housing unit.

Household ID: Automatically generated ID used to identify the Household or Family to which a participant belongs.

Household Income: refers to the total annual gross income of all members living in the same physical location before taxes.

Site/Location: The physical area where services are provided. Site/Location can include a program site, community site, in-home, at school, or virtual. If a program is based at school, their site location should only be listed as the program site with the associated school name, not “at school”.

Participant: a recipient of program services in a JWB funded program who resides in Pinellas County and to whom one of the following applies: the participant is under the age of 18, or the participant is eighteen or older and receives services in a JWB funded school-based program, or the participant is eighteen or older and is the parent or guardian of a child under the age of eighteen, or regardless of age, the participant is an expectant parent.

Participant ID: Automatically generated ID used to identify the participant

Performance Measure: this is a contractual metric that determines if a program is meeting its intended goals.

Program: A service or a group of services delivered to children and/or families with a set of outputs and outcomes to determine the volume and effectiveness of services.

Program Subtype: JWB identified program classification.

Program-wide service: an activity delivered to a group of participants or individual services reported in aggregate.

Record ID: A unique JWB Flex system generated ID. This unique ID is created for each new data entry form created within the system regardless of what form is being filled out. Record IDs can be found on all Forms, and will be used for Participant ID and Household ID.

Relationship to Head of Household: how a participant is related to the head of household in which they reside whether or not the head of household is receiving services.

Secured File Transfer Protocol (SFTP) Sites: used as repositories for data files when a Provider is excused from entering data into JWB Flex in lieu of a data export from their primary data system.

Service: A program-specific predefined activity that can be selected at either the individual level or the program level. Services can include a face-to-face service or correspondence between a provider and participant through direct phone, voice contact, email, text message, virtual programming, or telehealth but does not include a one-way correspondence from the provider to a participant (voice mail, email, or written contact).

Sex: based on the biological attributes of men and women (chromosomes, anatomy, hormones).

Webauthor: Organization that hosts and manages JWB Flex.

Surveys: program-specific questions that can be set up on the individual or program-wide level. A survey can contain multiple questions and can be Pre- and Post-Test data or multiple survey administration points.

Unexcused Absence: Absences that are not inclusive of the previously defined excused absence. This includes:

- Sports
- Vacations
- Unknown reason for the absence

User Roles/ Access: level created within JWB Flex by Agency Administrator to ensure users have the appropriate level of access to any program that they have been assigned to maintain.

Term: A particular iteration of a Class in time. Terms will identify the physical location, time period (program days calendar), and any particular services offered during that time.

B. Data Quality Manual Purpose

The JWB Data Quality Manual establishes the requirements for participant data collection and dissemination for the purpose of ensuring the consistency and integrity of the data for JWB funded programs being reported to and from the Juvenile Welfare Board (JWB).

JWB Flex provided by Webauthor is the primary participant data collection system used by JWB. However, these requirements apply to all participant data submitted to JWB whether through JWB Flex or through Direct Data Uploads (e.g., SharePoint or Secure File Transfer Protocol (SFTP) server). Providers are expected to abide by all applicable data business requirements unless exceptions have been approved. All data submitted to JWB, regardless of delivery method, is owned by JWB and JWB maintains full discretion as to use of the data. The data business requirements in JWB's Data Quality Manual are governed, managed, and maintained by JWB and are reviewed at least annually.

As previously mentioned, this document governs the data collection of JWB Flex, SharePoint, and Direct Data Uploads. While a lot of the data collected across these systems are the same, there are differences in terminology as well as certain fields. A program's unique data entry requirements are documented in the program's Data Sheet, which is signed by the program and the assigned evaluator. However, to help understand some of the general differences this document will be divided into sections specific to JWB Flex and Direct Data Uploads. Where there are similarities amongst the systems the information will be in combined sections.

C. Data Security

The security of the JWB Information Technology infrastructure is a top priority for JWB. JWB's Security Policies address hardware, software, data confidentiality, and user access. JWB's security is audited annually by an independent IT security firm. Adherence to the JWB Security Policies and procedures enables the secure exchange and safekeeping of sensitive data by our staff, providers, and partners.

1. Participant identifying information must never be transmitted through e-mail to or from JWB.
2. All data transfers are governed by Memorandum of Agreement or the JWB provider agreement. No data will be transferred in or out of JWB without a signed agreement.
3. All data containing sensitive or confidential participant data being transferred to or from JWB must be done using the JWB secured SharePoint, Direct Data Upload Folder, JWB Flex, or other JWB approved method.
4. Identifiable data include, but are not limited to names, addresses, student IDs, and health information.
5. To obtain, change, or terminate access to the approved participant data collection systems, such as JWB Flex, SharePoint, and Direct Data Upload users will complete the appropriate user access forms, which must be approved by the user's supervisor and submitted to the assigned JWB staff member or Agency Administrator. JWB Flex user access forms will be given to the Agency Administrator for access to the Participant module. The Agency Administrator will keep record of those agency users who have access and those who have been terminated in the JWB Flex system. The user access forms should be available upon request during a site visit by a JWB Staff member. Providers must monitor user access on an ongoing basis to confirm that only the appropriate staff have access to JWB's participant data system(s). If changes are necessary, the Agency Administrator will make those changes within the JWB Flex system. JWB Flex Admin will provide a user report to the Agency Administrator as well as the JWB Program Consultants to ensure user access is up to date.
6. All users must have a separate and unique access login and password and must protect it from discovery by others. Accounts and/or passwords may not be shared.

7. If a provider's staff member is involuntarily terminated, placed on involuntary administrative leave, or involuntarily relieved of their position's responsibilities for any reason, provider staff shall immediately notify the JWB Program Consultant, the appropriate JWB Admins, and the Agency Administrator to have the user inactivated immediately. Provider staff must follow up with the appropriate paperwork.
8. If a staff member has resigned and is no longer employed by the provider and/or program, the provider staff must submit a written request to terminate user access on or before their last day of employment.
9. Users must take advantage of security settings available through their operating system to either lock their computers manually or automatically when unattended. All users should follow the provider's technology and/or security policies and procedures. JWB Flex has implemented an automatic system time-out after a certain period of inactivity.

D. System Training

1. All provider staff that have any responsibility (supervisory or direct) for data entry or data quality monitoring will be trained according to JWB contract language. JWB will provide quarterly system training that are open to provider staff.

E. General Business Requirements

1. Providers receiving funds from JWB will enter participant data using the method(s) defined by the agreement between JWB and the provider. Subcontract providers will be required to enter data as specified in the agreement with their lead agency.
2. Providers that are contractually required to upload participant data to a JWB secure portal are required to follow the JWB Data Upload Requirements. Each provider will have a uniquely tailored version of this document specific to their Provider. This document is given to these providers as changes occur and is also available upon request. If field values do not correspond to JWB's suggested list, then a Data Dictionary must be provided.
3. Exceptions to the JWB Data Quality Manual must be documented in the Special Conditions section of the provider agreement.
4. Timeliness of participant data entry is a priority for JWB and is reviewed regularly. The timeliness of data entry must be documented in the Provider Data Management Plan.
5. The provider is obligated to maintain data integrity and accuracy for all data.
6. The source of all participant data required by JWB should be supported and documented in either individual case files or other verifiable source documents or systems. A written Provider Data Management Plan that outlines all procedures related to data collection, entry, security, and quality must be developed and maintained by the provider. One or more provider staff shall be appointed to review data quality on a regular basis as detailed by this plan Appendix 1 contains a planning tool for the Provider to set up their Provider Data Management Plan.
7. The provider is responsible for developing, maintaining, and adhering to confidentiality policies and procedures that govern participant files and records, protection of participants' rights, research involving participants served, privacy afforded to participants (when applicable) and release of participant information as per the JWB agreement language and any other legal requirements. These policies and procedures must be incorporated into the provider's policies to protect participant data and prevent accidental or malicious disclosure of participant information.
8. Providers are responsible for providing JWB a list of sites at the beginning of each Fiscal Year. Sites must align with the approved JWB methodology. Changes to JWB methodology require prior approval.
9. Provider reports and data required to be uploaded to the JWB SharePoint or SFTP server is due no later than the 15th of the month or the FY end due date, unless otherwise specified in the Provider's agreement.

F. Participant Data

1. All participants must be entered into an approved data system, regardless of funding source, and the information collected must be consistent with the Provider Data Management Plan, the JWB Data Quality Manual, the program methodology, the Direct Data Upload Requirements, the JWB Agreement or other JWB approved documents, unless the collection of aggregate data has been approved.
2. Participants should not be entered into any JWB data collection system until they have signed consent for JWB or a data sharing agreement between the Provider and JWB exists, unless otherwise specified in the JWB agreement.
The Provider will maintain in participant files a completed copy of a JWB approved form for authorizing client consent to release information for each participant receiving services. To be considered valid and completed a consent form can be physically signed or electronically signed by a legally binding signature software. As allowed by law and Provider policy, the Provider will add JWB to consent forms.
3. For JWB Flex data entry, there are different demographic fields collected on Adults versus Children. Participants receiving services will need to be identified as a child or an adult on the Participant Profile Form. Participants receiving child services shall be identified as a child. A child record should always remain as a child record, even if the child turns 18 during the program episode. Participants receiving adult services shall be identified as an adult.

G. JWB Flex Specific Fields and Data Entry

Episode

Each episode will have an open date and eventually a close date and a closing reason.

1. Only one episode per participant should be open at any given time. Dates of any additional individual participant episodes should not overlap previously existing episodes for that participant.
2. The episode open date must be the date the participant enrolled in the program. This event is defined by the program and JWB Program Consultant and Evaluator and captured within the program's Data Sheet.
3. The episode close date must be the last date the participant received services in the program. If there is no longer an expectation that services will continue to be provided (e.g., participant stopped showing up) the participant's episode shall be closed and the close date must be the last date of services as defined above and as noted in the case documentation.
4. If a participant's episode has been closed and the participant returns for service, a new episode must be created for the participant in the existing household under the existing participant record.
5. The Provider must develop and adhere to a re-engagement process which specifies the time frame of closure for inactive participants who fail to return for services. This process must be included in the Provider Data Management Plan and outlined in the program's Data Sheet.
6. If a participant and episode record have been created but a service was never rendered, the participant should be archived from JWB Flex. *The Provider will need to reach out to the WB Flex administrator at provider-support@jwbpinellas.org to have a participant archived.*
7. If a program is no longer funded by JWB, all participant episodes must be closed and the close date must reflect either the last date of service or funding end date, whichever occurred first. This shall be done by the Provider before their final reimbursement.

Performance Measurement

1. Performance Measures must be collected as specified in the JWB agreement.
2. Service and form dates must be the date that the service or measurement occurred or the date the information was collected. If the measurement cannot be collected, the reason must be documented in the case file.

3. All required answers must be completed for all forms.
4. If the agreement between the Provider and JWB requires the collection of data for performance measures, (e.g., surveys, assessments), the Provider Data Management Plan should include guidelines for ensuring the proper execution of the measure.

Program Services / Attendance

A service or attendance must be entered for all participants to identify the individual and group or program-wide service for which the participant is engaged. In JWB Flex, services are entered based off each service interaction. This can be done through the specific services and attendance forms. Attendance Timeline

All attendance should be entered as soon as possible. A timeline for data entry should be documented in the Provider's Data Management Plan. Data must be entered within two weeks of service delivery.

Program Site/Location Assignment Guidelines

Program Sites or Locations are based off the services that a participant receives.

Attendance Guidelines

- a. If excused absences are recorded, they must be noted in the participant file. The following absences are considered excused:
 - Medical – need to note in the file an excused absence, more than 5 days medical note
 - Documented extended learning – letter from school with length and days student would be attending the program Extended learning is considered to be academic related and does not include extracurricular activities.
 - Court order
 - Bereavement (immediate family member)
 - Religious holidays
 - COVID-19 exclusions – if the participant is excluded from the program due to having COVID-19 or being defined as a close contact
- b. The following absences are considered unexcused:
 - Sports
 - Vacations
 - Unknown reasons
 - Work
- c. Attendance should only be entered after it has occurred.

H. Guidelines for JWB Flex

General

Surveys

Each survey is selected in conjunction with the program and JWB Evaluator. The questions and procedure for the administration of each survey varies by program. Data collection timeframes and processes, data entry, and data quality checks must be outlined in the Provider Data Management Plan.

Household/Family

A household record consists of all the required household information for those individuals who reside in the same physical household or who are receiving services as a family in a JWB-funded program. A household may contain one or more participants who reside in the same household or who receive services as a family unit even if not residing at the same physical address. Each Household is assigned a unique Record ID.

Participant/Member/Person

Each household is made up of household members. A household member is a recipient of services. Each Participant is assigned a unique ID called the Record ID.

Episode

An episode reflects the period during which service(s) were rendered. Each episode will have an open date and eventually a close date and a closing reason. The episode open date must be the date the participant enrolled in the program. The episode close date must be the last date the participant received services as defined above.

Household / Family Fields

1. Household information **MUST** be created before adding a participant. Every household should have participant(s) linked.
2. Household fields apply to all members of the entire household regardless of whether or not each household member is receiving services in a JWB funded program.
3. Household data is collected on the household of the participant or parent/guardian who signed the consent for services. All household data should consist of the combined information for all members residing in the household, regardless of relationship. This information includes fields such as total number of adults and children in the household and total annual gross income (as defined by the United States Census Bureau) of all members in the household.
4. If participants in a family are receiving services together but they do not live in the same physical location, household data should consist of the combined information for the household in which the child resides. Other family members who live in a different physical location but are receiving services together are added as members of the same household (i.e., they will have the same Household ID), but their information is not counted toward Household Income, Household Arrangement, or Adults and Children in Household. If the child is living in two locations, both 50% of the time, the parent or guardian signing the paperwork will function as their “primary” household for the purposes of collecting household information as outlined in this section.
5. During an active participant episode, household data must be updated as changes occur or at least annually based on participant episode open date. Updates should also be reflected in participant files through notes or other documentation.
6. A participant should never be active in more than one open household within the same program at the same time.
7. Household records should only be deleted in instances where they were entered in error or where active household records have been duplicated, or when no members remain in the household. Providers will need to reach out to flex@jwbpinellas.org with requests to delete households.

8. New household records should never be created for existing participants in existing households unless the household has truly changed. For example, a new household would be created and linked to an existing participant profile in the case of a foster child changing foster care homes. In the case of a child who lived with their father, for example, then moved to live with their mother, a new household would need to be created and linked. In these cases, the participant should be linked with the new household, and the old household association should be removed.

Household ID/Record ID

The household Record ID is the same for all members of the household/family. In JWB Flex this field is automatically populated when the Household is created and can be found in the General Household Information area of the Household form.

Name of Head of Household

The Name of Head of Household field in JWB Flex is one of the items that can be searched on and therefore should be the full name of the Head of Household or the member of the household who contributes more than half of the household's income or makes most of the household decisions. For a child who resides in a foster home, enter the child's name.

Number of Adults

For the number of adults, the total number of adults (18 or older) who reside in the same physical location should be entered. If the adult participant resides in a group home or shelter with no other family members, the number of adults in household should be indicated as "1". In this situation the number of youths in household would be "0". If the adult participant resides in a group home or shelter with other family members, the actual number of adult family members in the temporary housing situation should be entered. If a child or children reside in a foster home, enter the number of adults in that foster home.

Number of Minor Children

For the number of minor children, the total number of children (under 18) who reside in the same physical location should be entered. If the youth participant resides in a group home or shelter with no other family members, the number of children in household should be indicated as "1". In this situation the number of adults in household would be "0". If the participant resides in a group home or shelter with other family members, the actual number of youth family members in the temporary housing situation should be entered. If a child resides in a foster home, then enter the current number of children in the foster home.

Household Income Refused/Unknown (JWB Flex)

If Refused/Unknown is selected, the case file should document why the information was not able to be obtained. If Refused/Unknown is selected in JWB Flex, then the Household Income field will not show. If a child resides in foster care or a group home, then refused/unknown should be selected.

Household Income

Household Income is a required field in JWB Flex unless household income is indicated as refused/unknown. This information is typically used to determine the Federal Poverty Level (FPL). The exact annual gross Household Income amount is required.

Household Arrangement

The intent of collecting household arrangement information is to establish the closest definition that will allow comparison with Census Bureau data. Although it is not possible for every example to be cited, the participant should pick the category that most closely describes the household in which they reside.

Household Arrangement	Definition
Single Parent- Female Head of Household	Mother living with children – no other adult present who also serves as a primary caregiver
Single Parent- Male Head of Household	Father living with children – no other adult present who also serves as a primary caregiver
Dual Parent- Married	Two married parents (birth or adoptive)
Dual Parent- Non-Married Female Head of Household	Mother living with children and another adult who also serves as a primary caregiver
Dual Parent- Non-Married Male Head of Household	Father living with children and another adult who also serves as a primary caregiver
Other-Relative / Kinship Care – Male Head of Household	Single Male relative and children. Example: Uncle & nieces/nephews;
Other-Relative / Kinship Care – Female Head of Household	Single Female relative and children. Example: Aunt & nieces/nephews;
Other-Relative / Kinship Care – Married	Other married relatives. Example: Aunt & Uncle
Other-Relative / Kinship Care – Grandparent(s)	Grandparent(s) or Great Grandparent(s) living with children and serves as the primary caregiver(s)
Other- Non-Relative	Primary is unrelated to others in household. Example: Child living in foster care or other non-relative placement
No dependents – married	Married couple with no children in home. Example: Couple whose children are all in foster care;
No dependents – couple, non-married	Two adults unrelated who share a home
No dependents – single female	Single Female with no children in home
No dependents – single male	Single Male with no children in home

Referred From / How did you hear about this program

This item refers to the household as a whole and is not collected for each individual in the household. The intent of this item is to identify the primary source of referral to this program.

2-1-1 Tampa Bay Cares: any referral from Pinellas County’s local information and referral service.

Adult and Aging: any Provider providing specialized services to adults and seniors.

Advertising (any media): advertisement in any media (newspaper, radio, television, billboard, leaflet, bulletin, social media, etc.).

Alcohol and/or Substance Abuse Services: any public or private Provider specializing in the treatment of or prevention of alcohol or substance abuse.

Case Management/Navigation: any referral by an entity that provides the advocacy and coordination of services on behalf of an individual person who may be considered a case in different settings such as health care, nursing, rehabilitation, social work, disability insurance, employment, and law.

Child Care: any public or private childcare provider.

Child Protective Investigation (CPI): any Child Protective Investigator officially recognized by the Department of Children and Families (DCF).

Counseling Program: any Provider, public or private, that provides counseling to individuals, families, groups or a privately practicing professional who provides guidance or problem-solving advice. (If the referral is from a mental health center, use “Mental Health Services” below)

Court: referred by any court with jurisdiction over families or juveniles.

Death & Dying Services: programs that provide services to the terminally ill and/or grief services to surviving family members.

Developmental Intervention and Evaluation Services: programs that provide evaluation and treatment for children with suspected or identified developmental delay or neuromuscular impairment or any other Provider specializing in services to people with disabilities.

Domestic Violence Provider: any Provider specializing in providing services to perpetrators or victims of domestic violence (including crisis shelters).

Community Based Care Lead Agency: community-based care services (foster care, adoption) that are contracted for by Department of Children and Families (DCF).

Employment Assistance/Job Training: any Provider, public or private, specializing in vocational training or employment related services for non-handicapped persons such as Florida’s provider for workforce innovation program.

Faith-based Organization: organizations that provide social services, or religious or spiritual activities as part of their affiliation with a religious group, not including faith based parochial schools. NOTE: Referrals from a parochial school should be identified as “Private School”.

Family Support Services: any program, public or private, that assists families in meeting their basic needs in times of crisis, needs or change.

FDLRS-FL Diagnostic and Learning Resources System: provides diagnostic and instructional support services to district exceptional student education programs and families of students with exceptionalities statewide.

FL Dept of Children and Families (DCF): any referral from DCF’s Adult Services, Developmental Disabilities, Economic Services, Family Safety division or Substance Abuse or Mental Health divisions.

FL Dept of Health: referred from the Florida Department of Health / Pinellas County Health Department.

FL Dept of Juvenile Justice: any office or employee of the Florida Department of Juvenile Justice.

Friend/Relative/Legal Guardian: an informal referral by someone who is close to the participant or is an acquaintance, anyone related to the program participant or the participant’s legal guardian.

Family Services Initiative (FSI): Collaborative partners including Personal Enrichment through Mental Health Services, Gulf Coast Jewish Family and Community Services, Juvenile Welfare Board, as well as various service providers and vendors. The system provides direct access for families through wrap around services. FSI provides an array of services, supports, coordination, information, referral and system navigation to assist families in achieving stability.

Hospital: any office or employee of a local area hospital.

Housing Program: any program that provides non-crisis related short or long- term housing services.

Law Enforcement: any provider or duly sworn officer thereof empowered by the state to enforce laws and having the power to arrest (this includes city police agencies or county sheriffs' departments).

Legal Services: any licensed attorney, private law firm, public defender or state attorney.

Medical Services: any public or private health service provider. NOTE: Mental health service providers should be entered as "Mental Health Services".

Mental Health Services: any public or private organizations concerned with meeting the needs of the mentally ill or those vulnerable to mental illness.

Neighborhood Family Center: A place in a neighborhood where families come together to meet each other, have fun together, learn together, and support each other.

Pinellas County Health & Human Services: Any referral by the Dental, Medical, Emergency or General Assistance, Indigent Burial, Mobile Medical Units or Summer Food Programs.

Pinellas County School System: any program offered by the Pinellas County School System or any teacher, counselor, principal, or other employee of the Pinellas County School System.

Private School: any teacher, counselor, principal, dean, or other employee of any private or parochial school not affiliated with the Pinellas County School System.

Recreation Program: any public or private recreation program or center.

Refugee/Immigrant Services: any public or private provider specializing in services to refugees or immigrants.

Self: participant decided to enter the program on his/her own.

Shelter Services: crisis-related temporary safe housing services (for example, runaway or homeless) excluding domestic violence shelters (use Domestic Violence Provider).

Support Group: any program which organizes and provides resources, peer support and guidance to a group of people with common goals or issues.

Vocational Rehabilitation Services: any provider, public or private, that offers training to participants who are mentally or physically disabled so they can do useful work and become more self-sufficient.

Youth Development Program: any program designed to support, guide and challenge young people. They are characterized by providing youth with opportunities for meaningful participation and service to others. These programs provide youth with opportunities to explore and develop values, interact with caring adults, and form considerate relationships with their peers.

Participant Details

1. Household information MUST be created before adding a participant. Every participant should have a linked household.
2. Participant-level fields apply to a specific individual in the household. In the JWB Flex system there is a field on the Participant Details Form where Services Type can be selected for adult or child. There are a few field variations, i.e. School ID and Name that are collected for Children and not for Adults. This should be selected based on the type of services to be received by the participant, example: if a youth is receiving adult services then adult should be selected. If there are program specific questions on service type, contact your evaluator.
3. During an active participant episode, participant data must be updated as changes occur or at least annually based on participant episode open date. Updates should also be reflected in participant files through notes or other documentation.

4. Participant records should only be deleted in instances where they were entered in error, where active participant records have been duplicated, or if a service was never rendered. This function can only be performed by a JWB WB Flex Administrator. *Providers will need to reach out to Flex@jwbpinellas.org with requests to archive participants.*

Participant ID/Record ID

The Record ID is the unique ID for each participant. In JWB Flex this field is automatically populated when the participant is entered into the system.

First Name, Middle Name, Last Name, Last Name Suffix

The participant's full legal name, first and last name at minimum, must be entered. These fields should contain the full legal name of the participant. Avoid abbreviations and nicknames, i.e. enter Robert instead of Bob or Bobby. Do not include last name suffixes such as Jr., Sr., II, III, etc. in the last name field; use the separate Last Name Suffix field for this information.

Date of Birth

The legal date that the participant was born.

Sex

This should be the participant's biological sex assigned at birth.

- Male
- Female

Race/Ethnicity

Select the race(s) the participant identifies from the Census Bureau defined list. This field can be multiselect

American Indian or Alaska Native	For example, Navajo Nation, Blackfeet Tribe of the Blackfeet Indian Reservation of Montana, Native Village of Barrow Inupiat Traditional Government, Nome Eskimo Community, Aztec, Maya, etc.
Asian	For example, Chinese, Asian Indian, Filipino, Vietnamese, Korean Japanese, etc.
Black or African American	For example, African American, Jamaican, Haitian, Nigerian, Ethiopian, Somali, etc.
Hispanic or Latino	For example, Mexican, Puerto Rican, Salvadorian, Cuban, Dominican, Guatemalan, etc.
Middle Eastern or North African	For example, Lebanese, Iranian, Egyptian, Syrian, Iraqi, Israeli
Native Hawaiian or Pacific Islander	For example, Mexican, Puerto Rican, Salvadorian, Cuban, Dominican, Guatemalan, etc.
White	For example, English, German, Irish, Italian, Polish, Scottish, etc.
Some Other Race	For example, a race that does not fit into any categories from above.

Education

The participant's highest level of education should be selected. Options differ if the participant is identified as receiving adult or child services. For adults, education options range from those who did not graduate high school up to a doctorate degree. If a participant is identified as having child services, then they should select the current grade in which the child is enrolled. For summer programming education level should denote the grade the child will be entering for the upcoming school year. If the episode remains open this information should be updated as the child progresses through school. For those participants who are receiving child services, but may not be of school age or enrolled in school, please select from one of the options below:

Age (0-3), attending school, center, or family care home - The participant is age three or under and is enrolled and regularly attending a licensed childcare center.

Age (0-3), *not attending* school, center, or family care home - The participant is age three or under and is not enrolled or attending a licensed childcare center.

Age (4-5), attending school, center, or family care home - The participant is four or five years old and is enrolled and regularly attending a licensed childcare center.

Age (4-5), *not attending* school, center, or family care home - The participant is four or five years old and is not enrolled or attending a licensed childcare center.

School Age, not currently enrolled: Select this if the participant's is of school age, but it not enrolled or attending public or private school.

School Age, grade unknown: Select this if the participant's is of school age, but grade is unknown.

Student ID

The Student ID is the permanently assigned identifying code for a student in the Pinellas County School System. If the Student ID is unavailable or if the participant refuses to provide the ID or if the child is attending private school, the provider must indicate these reasons on demographics details.. Every attempt should be made to collect the Student ID. If the actual Student ID is later obtained the Student ID field must be updated. This field will only be displayed if required for your program.

School Name

The name of the kindergarten through 12th Grade school that the participant attends. If a participant is not in school or attends a school outside of Pinellas County use the N/A or School Not Listed option or other.

Social Security Number

This field should only be filled out if you are required to by JWB. This field will only be displayed if required for your program. This will be denoted in your contract.

Current Living Situation

Select from one of the following choices to identify the current housing arrangement in which the participant resides.

Current Living Situation	Definition
Have Physical Address	The address of the location in which the participant resides. This is the defaulted option.
Legally Restricted	An address that is legally protected from being released or required.
Unsheltered	An individual or family with a primary nighttime residence that is a public or private place not designed for or ordinarily used as a regular sleeping accommodation for human beings, including a car, park, abandoned building, bus or train station, airport, or camping ground.
Sheltered	An individual or family currently residing or living in an emergency shelter or hotel/motel paid for by a shelter program.
Safe Haven	A form of supportive housing that serves hard-to-reach homeless persons with severe mental illness who come primarily from the streets and have been unable or unwilling to participate in housing or supportive services.
Institutional Setting	A setting where the individual is under the care of a professional organization or the government (e.g. an inpatient treatment program, a jail, or group home).
Temporary Housing Situation	A short-term housing situation where individuals and families are able to stay for less than 24 months (e.g., transitional housing, couch surfing, self-pay hotel/motel).
Potentially Permanent Housing Situation	A housing situation where the individual or family may be able to stay long-term (e.g., with a significant other or a close family member where adequate space is available).
Residential Housing	Refers to a forma housing or living facility that serves individuals in various stages of life or recovery. Supervision may or may not be provided by licensed care takers. This term encompasses registered housing establishments and a broad spectrum of residential programs.

Participant Address 1, Address 2, City and ZIP Code

This only appears only if “Have physical address” is selected. These fields should contain the physical street address for the primary place of residence of the participant. Address information must be entered for each participant (adults and children). Use standard post office abbreviations for addresses i.e., St for Street, N for North, NW for Northwest etc. and no punctuation. For example: “14155 58th St N”. For apartment, building, suite and lot numbers, please use Address Line 2.

Relationship to Head of Household

Select from one of the following choices to identify how this participant is related to the Head of Household in which they reside whether or not the Head of Household is receiving services. Head of Household is defined as the member of the household who contributes more than half of the household's income or makes most of the household decisions. The Head of Household is determined by the household members, not by program staff. This designation will occur in the linked household field after the household and the participant have been linked.

- Adopted son or daughter
- Biological son or daughter
- Brother or sister
- Father or Mother
- Grandchild
- Great Grandchild
- Housemate or roommate
- Other non-relative
- Other relative
- Parent-in-law
- Roomer or Boarder
- Self
- Son-in-law or daughter-in-law
- Spouse
- Stepson or stepdaughter
- Unmarried partner

Episode

Start Date

This should be the first day a participant is active within the program.

Referred To

The field identifies referrals made for the participant throughout the program. If there were multiple referrals for this participant, select all that are appropriate. If the participant returns for services and has a new episode, do not delete the previous data entered into this field; simply add the additional referrals as they are provided.

JWB strongly encourages Providers to collect and enter Referrals even though this field is not required.

No Referral(s) Made: an assessment of needs was completed, and no referral(s) was required. If this selection is utilized no other referral items should be selected.

2-1-1 Tampa Bay Cares: a referral to Pinellas County's local information and referral service.

Adoptions: any private adoption Provider.

Adult & Aging: any provider providing specialized services to adults and seniors.

Alcohol and/or Substance Abuse Services: any public or private provider specializing in the treatment of or prevention of alcohol or substance abuse.

Basic Needs Services: any program, public or private, that assists families in meeting their basic needs in times of crisis, needs, or change or any program, public or private that provides assistance with household items such as food, clothing, dishes, or other household goods.

Child Care: any public or private childcare provider.

Child Support Enforcement: The Department of Revenue Child Support Enforcement Program.

Counseling Program: any provider, public or private, that provides counseling to individuals, families, groups including programs that provide services to the terminally ill and/or grief services to surviving family members.

Dental Services: any dentist for dental services.

Developmental Evaluation and Intervention Services: evaluation and treatment for children with suspected or identified developmental delay or neuromuscular impairment or any community Provider that deals with developmental disabilities in children (for example, mental or physical handicaps).

Disabilities: agencies specializing in services to people with disabilities defined as temporary or permanent reduction in function, usually a result of a physical or mental condition or infirmity. NOTE: Agencies that specialize in treating developmental disabilities should be entered under “Developmental Evaluation and Intervention Services”.

Domestic Violence Services: any provider specializing in providing services to perpetrators or victims of domestic violence (including crisis sheltering).

Community Based Care Lead Agency: community-based care services (foster care, adoption) that are contracted for by Department of Children and Families(DCF).

Education: any academic program offered by any public or private school (including credit or non-credit courses, adult education, Special Education, and English for Speakers of Other Languages – ESOL).

Employment Assistance/Job Training: any Provider, public or private, specializing in vocational training or employment related services for non-handicapped persons including Florida’s Provider for Workforce Innovation program.

Faith-based Organization: organizations that provide social services, or religious or spiritual activities as part of their affiliation with a religious group, not including faith based parochial schools. NOTE: Referrals to a parochial school should be identified as “Education”.

Family Services Initiative (FSI): The Family Services Initiative consists of Juvenile Welfare Board and collaborative partners (core partners) including the GCJFCS, PEMHS (system navigation), service providers and vendors. Provides direct access for families through wrap around services. FSI provides an array of services, support, coordination, information, referral, and system navigation to assist families in achieving stability.

Family Support Services: any program, public or private, that assists families in meeting their basic needs in times of crisis, needs, or change or a program that provides funds for emergency needs such as rent or utilities.

Financial Management/Debt Counseling/VITA: any program, public or private, that specializes in services that help people manage money, develop budgeting skills, or assist with debt management or tax preparation.

FL Dept of Children & Families (DCF): referred to any division of DCF including the Adult Services, Developmental Disabilities, Economic Services, Family Safety or Substance Abuse or Mental Health divisions.

FL Dept Of Health: any referral to the Florida Department of Health / Pinellas County Health Department.

Florida Abuse Hotline: The Florida Abuse Hotline accepts reports 24 hours a day and 7 days a week of known or suspected child abuse, neglect, or abandonment and reports of known or suspected abuse, neglect, or exploitation of a vulnerable adult. To make a report you can -

Report online at
<https://reportabuse.myflfamilies.com/s/>

Call 1-800-962-2873

Use 711 for Florida Relay Services

Fax your report to 1-800-914-0004

If you suspect or know of a child or vulnerable adult in immediate danger, call 911.

Housing: any program that provides non-crisis related short or long-term housing services.

Juvenile Justice: referred to any court with jurisdiction over juveniles, any Provider that serves youth involved with the justice system or any referral to any office or employee of the Florida Department of Juvenile Justice.

Legal Services: a provider or program that provides legal advice or services or any licensed attorney, private law firm, or public defender.

Medical Services: any clinic, family physician, radiologist, ophthalmologist, optometrist, hospital, emergency room, or any health service provider excluding mental health service providers. Mental health service providers should be entered under “Mental Health Services” below.

Mental Health Services: any public or private organizations concerned with meeting the needs of the mentally ill or those vulnerable to mental illness or a privately practicing professional who provides guidance or problem-solving advice.

Neighborhood Family Center: A place in a neighborhood where families come together to meet each other, have fun together, learn together, and support each other.

Parenting Education: a program that provides information, resources, and or tools to promote change that improves the lives of children by supporting parents and caregivers.

Pinellas County Health & Human Services: Any referral to the County’s Dental Assistance, Emergency Assistance, General Assistance, Indigent Burial, Medical Assistance, Mobile Medical Unit or Summer Food Program.

Recreation Program: any public or private recreation program or center.

Refugee/Immigrant Services: any public or private Provider specializing in services to refugees or immigrants.

Respite Care: a service that provides periodic relief for the family or primary care giver.

Shelter Services: crisis related temporary safe housing services (for example runaway or homeless) excluding domestic violence shelters which should be entered as Domestic Violence Services.

Support Group: a program that organizes and provides resources, peer support, and guidance to a group of people with common goals or issues.

Vocational Rehabilitation Services: any provider public or private that offers training to participants who are mentally or physically disabled so they can do useful work and become more self-sufficient.

Youth Development Program: programs designed to support, guide and challenge young people. They are characterized by providing youth with opportunities for meaningful participation and service to others. These programs provide youth with opportunities to explore and develop values, interact with caring adults, and form considerate relationships with their peers.

Close Date

The last date the participant received services. Service is defined as face-to-face service, direct phone, voice contact, or telehealth but does not include voice mail, email, or written contact.

Closing Reasons

This field captures information regarding why each participant left the program or stopped receiving services.

Completed Program	the participant completed program services as defined in the Program Methodology
Transferred to another provider prior to completion of program	the participant left the program but is receiving similar services from another provider as documented in the case file
Participant withdrew-with notice:	the participant informed the program that he/she no longer wished to, or would no longer be able to, attend activities and ceased participation prior to completion
Participant withdrew- health problems:	the participant was unable to participate further in program activities due to health problems
Participant withdrew- lack of transportation:	the participant was unable to obtain transportation to continue to attend program
Participant withdrew-without notice:	the participant ceased involvement (stopped showing up/dropped out) with the program unexpectedly and without notice
Participant lost eligibility-aged out	the participant turned 18 and was no longer eligible for services offered to children only. Programs for young children will have their own appropriate age limit and can also use this closing reason
Participant lost eligibility - was arrested/incarcerated	the participant was arrested and therefore no longer eligible for services or was the participant was incapable of attending program activities due to incarceration
Participant lost eligibility-moved out of service area	the participant no longer resides in the geographic service area
Participant lost eligibility - violation of program rules	the participant was discharged from the program for not adhering to the program rules
Participant lost eligibility - lack of progress	the participant was not making satisfactory progress towards identified goals established by the program
Participant died	participant deceased
Reunification	when the youth has been returned to the biological home from which he/she was legally or informally removed
Funding Ended / Site Closed	use only as approved
Data Source Changed	use only as approved, when changing from JWB Flex to a Direct Data Upload

I. **Program Wide Services (JWB Flex)**

The Program Wide Data module in JWB Flex captures data that is applicable to the whole group activities and the activities for those programs that serve participants in groups and cannot reasonably collect individual participant data. These programs are asked to identify the program-specific group activity and provide the number of children & adults who participated along with any necessary details.

Service ID & Name

This is a program-specific, pre-defined list created by the program's Evaluator which identifies the type of service or activity that should be entered for the program (e.g., Parent/Family Engagement, Support Group, etc.)

Activity Name / Title	The name or title of the program wide service / activity
Begin Date / End Date	The date the service or activity started and ended.
Total # of Adults	The number of adults 18 or older who attended the group service or activity. Do not include the presenter or any program staff.

Total # of Children	The number of youths under the age of 18 who attended the group service activity. Do not include the presenter or any program staff.
Total # of Clients	This field will automatically calculate the Total # of Adults plus the Total # of Children.
Location/Site Name, Address, City, ZIP	Used to identify the location where the service or activity took place. Once you select a Site Name the address should automatically fill in. If a program is based at school, their site location should only be listed as the program site with the associated school name, not "at school".
Presenter/Instructor	The lead group activity facilitator or presenter.
Comments	Optional field to provide any additional details for the group service / activity. Data that should be entered in this field will be determined by the program and JWB Evaluator.

The Section below pertains ONLY to Direct Data Uploads

J. Guidelines For Direct Data Uploads

General

SharePoint

Providers who use this method of sharing data with JWB are required to provide data in a JWB approved format and time frame and should reference their JWB contract.

SFTP Sites (Direct Data Uploads)

Providers that use this method of sharing data with JWB are required to follow the JWB Data Upload Guidelines. This document can be requested from the Provider's Program Consultant, Evaluator, or from JWB's IT department.

Surveys

Each survey is selected in conjunction with the program and JWB Evaluator. The questions and procedure for the administration of each survey varies by program. Data collection timeframes and processes, data entry, and data quality checks must be outlined in the program's Provider Data Management Plan.

Household/Family

A household record consists of all the required household information for those individuals who reside in the same physical household or who are receiving services as a family in a JWB-funded program. A household may contain one or more participants who reside in the same household or who receive services as a family unit even if not residing at the same physical address. Each Household or Family is assigned a unique ID.

Participant/Member/Person

Each household is made up of household members. A household member is a recipient of face-to-face services. Each Participant is assigned a unique ID called the Member ID or Person ID.

K. Demographics

1. Participant-level fields apply to a specific individual in the household.
2. During an active participant episode, participant data must be updated as changes occur or at least annually based on participant episode open date. Updates should also be reflected in participant files through notes or other documentation.
3. Participant records should only be deleted in instances where they were entered in error, where active participant records have been duplicated, or if a service was never rendered.

Household / Family Fields

1. Household fields apply to all members of the entire household regardless of whether or not each household member is receiving services in a JWB funded program.

2. Household data is collected on the household of the participant or parent/guardian who signed the consent for services. All household data should consist of the combined information for all members residing in the household, regardless of relationship. This information includes fields such as total number of adults and children in the household and total annual gross income (as defined by the United States Census Bureau) of all members in the household.
3. If participants in a family are receiving services together but they do not live in the same physical location, household data should consist of the combined information for the household in which the child resides. Other family members who live in a different physical location but are receiving services together are added as members of the same household (i.e., they will have the same Household ID), but their information is not counted toward Household Income, Household Arrangement, or Adults and Children in Household. If the child is living in two locations, both 50% of the time, the parent or guardian signing the paperwork will function as their “primary” household for the purposes of collecting household information as outlined in this section.
4. During an active participant episode, household data must be updated as changes occur or at least annually based on participant episode open date. Updates should also be reflected in participant files through notes or other documentation.
5. A participant should never be active in more than one open household within the same program at the same time.
6. Household records should only be deleted in instances where they were entered in error or where active household records have been duplicated, or when no members remain in the household.
7. New household records should never be created for existing participants in existing households unless the household has truly changed such as in the case of a foster child changing foster care homes or in the case of a child who lived with their father, for example, then moved to live with their mother. In these cases, do not change the current household information as it would affect the remaining household members. Instead, a new household should be created if that household does not already exist. The new Household ID can then be updated on the Child’s demographic page to associate that child with the new household. Lastly, if the old Household has no members attached, that Household should be deleted.

ProviderID	A JWB provided ID that indicates the agency the upload pertains to. This field is required in the Demographics, Episodes, Services, Measures and Aggregate files.
HouseholdID	This ID should be used for all participants that reside in the same physical household or who are receiving services as a family unit in a JWB Funded Program.
HouseholdIncome	This exact annual gross Household income should be provided. Programs that collect income ranges will upload the middle of the range. If household income data is not available (refused/unknown), “Unknown” should be uploaded. This information is typically used to determine the Federal Poverty Level (FPL).

HouseholdArrangement	Specify the household arrangement for the family using JWB’s preferred pick list below. If JWB’s preferred responses are not able to be used, please provide a crosswalk with your selections.
AdultsInHousehold	The number of adults eighteen or older who reside in the home, regardless of JWB program participation. If the adult participant resides in a group home or shelter with no other family members, the number of adults in household should be indicated as “1”. In this situation the number of youths in household would be “0”. If the adult participant resides in a group home or shelter with other family members, the actual number of adult family members in the temporary housing situation should be entered. If a child or children reside in a foster home, enter the number of adults in that foster home.
ChildrenInHousehold	The number of youth seventeen or younger who reside in the home, regardless of JWB program participant. If the youth participant resides in a group home or shelter with no other family members, the number of children in household should be indicated as “1”. In this situation the number of adults in household would be “0”. If the participant resides in a group home or shelter with other family members, the actual number of youth family members in the temporary housing situation should be entered. If a child resides in a foster home, then enter the total current number of children residing within the foster home.
PersonID	Unique ID for each individual person served by a JWB funded provider. This ID does not change regardless of how many times they have been served or which program(s) they were served in.
DOB	The legal date a participant was born.
First Name, Middle Name, Last Name, Last Name Suffix	Participant’s full legal name. Suffixes such as Jr., Sr., II, III, etc. should be reflected in the LastNameSuffix field.
Sex	Participant’s biological sex assigned at birth.

Race	Specify the participant's race using JWB's preferred pick list below. If JWB's preferred responses are not able to be used, please provide a crosswalk with your selections. Multiple responses can be provided.
Education	For adults this should be the highest level of education achieved. For school age children this should be their current grade. For summer programming this field should display the participant's grade in the upcoming school year. If a participant's episode remains open the child's grade should be updated as the child progresses through school. Children that are not of school age or enrolled in school must also have an education indicated. JWB's preferred pick list is below. If JWB's preferred responses are not able to be used, please provide a crosswalk with your selections.
SSN	If social security number is unknown or the participant did not authorize release, enter nine nines: 999999999.
Address, Address2, City, Zip	These fields are used for the participant's physical address. If a participant is homeless (e.g., street homeless, couch-surfing, etc.), place a 0 in the field. If a participant lives in shelter, place a 1 in the field. If a participant has an address that is legally restricted, place a 2 in the field. If indicating a 0,1 or 2 all address fields should match.
RelationshipToHeadOfHousehold	Specify the participant's relationship to the head of household using JWB's preferred pick list below. If JWB's preferred responses are not able to be used, please provide a crosswalk with your selections.
StudentID	The student ID should be 10 digits, If the student's school ID is legitimately less than 10 digits due to the participant transferring from another school district then add a zero to the front of the ID to get to 10 digits. Uncollectible IDs should be 10 9's, Private School Students should be 10 7's.
SchoolName	Should be entered for all Pinellas County Students in public or private school. The School Name should not be abbreviated. This field could also be utilized to indicate a participant's early learning center.

Current Living Situation	Specify the participant's relationship to the head of household using JWB's preferred pick list below. If JWB's preferred responses are not able to be used, please provide a crosswalk with your selections.
Misc1	This field allows for programs to upload mutually agreed upon data with JWB that is not collected in the above fields.
Misc2	This field allows for programs to upload mutually agreed upon data with JWB that is not collected in the above fields.
ReportEndDate	This date will specify the last date of the month for which the data is being uploaded. Example: If the data in the file is from August, then the Report End Date would be 08/31/20XX

Demographic Picklist

Household Arrangement

The intent of collecting household arrangement information is to establish the closest definition that will comparison with the Census Bureau data. Although it is not possible for every example to be cited, the participant should pick the category that most closely describes the household in which they reside:

Household Arrangement	Definition
Single Parent- Female Head of Household	Mother living with children – no other adult present who also serves as a primary caregiver
Single Parent- Male Head of Household	Father living with children – no other adult present who also serves as a primary caregiver
Dual Parent- Married	Two married parents (birth or adoptive)
Dual Parent- Non-Married Female Head of Household	Mother living with children and another adult present who also serves as a primary caregiver
Dual Parent- Non-Married Male Head of Household	Father living with children and another adult present who also serves as a primary caregiver
Other-Relative / Kinship Care – Male Head of Household	Single Male relative and children. Example: Uncle & nieces/nephews
Other-Relative / Kinship Care – Female Head of Household	Single Female relative and children. Example: Aunt & nieces/nephews
Other-Relative / Kinship Care – Married	Other married relatives. Example: Aunt & Uncle
Other-Relative / Kinship Care – Grandparent(s)	Grandparent(s) or Great Grandparent(s) living with children and serve as the primary caregiver(s)
Other-Non-Relative	Primary is unrelated to others in household. Example: Child living in foster care or other non-relative placement

No dependents – married	Married couple with no children in home. Example: Couple whose children are all in foster care;
No dependents – couple, non-married	Two adults unrelated who share a home
No dependents – single female	Single Female with no children in home
No dependents – single male	Single Male with no children in home

Race

Select the race and ethnicity of how the participant identifies from the Census Bureau defined list.

American Indian or Alaska Native :

For example, Navajo Nation, Blackfeet Tribe of the Blackfeet Indian Reservation of Montana, Native Village of Barrow Inupiat Traditional Government, Nome Eskimo Community, Aztec, Maya, etc.

Asian:

For example, Chinese, Asian Indian, Filipino, Vietnamese, Korean Japanese, etc.

Black or African American:

For example, African American, Jamaican, Haitian, Nigerian, Ethiopian, Somali, etc.

Hispanic or Latino :

For example, Mexican, Puerto Rican, Salvadorian, Cuban, Dominican, Guatemalan, etc.

Middle Eastern or Northern African:

For example, Lebanese. Iranian, Egyptian, Syrian, Iraqi, Israeli

Native Hawaiian or Pacific Islander :

For example, Native Hawaiian, Samoan, Chamorro, Tengan. Fijian, Marshallese, etc.

White :

For example, English, German, Irish, Italian, Polish, Scottish, etc.

Some Other Race:

A race that does not fit into any of the options provided above

Education

For summer programming the response reflects the grade the child will be entering for the upcoming school year. If the episode remains open this information should be updated as the child progresses through school.

age (0-3), attending school, center, or family care home - The participant is age three or under and is enrolled and regularly attending a licensed childcare center.

age (0-3), not attending school, center, or family care home - The participant is age three or under and is not enrolled or attending a licensed childcare center.

age (4-5), attending school, center, or family care home - The participant is four or five years old and is enrolled and regularly attending a licensed childcare center.

age (4-5), not attending school, center, or family care home - The participant is four or five years old and is not enrolled or attending a licensed childcare center.

School-aged Participants

Kindergarten	Fifth Grade	Tenth Grade
First Grade	Sixth Grade	Eleventh Grade
Second Grade	Seventh Grade	Twelfth Grade
Third Grade	Eighth Grade	GED or High School Equivalent
Fourth Grade	Ninth Grade	School Age, Not Currently Enrolled

Adult Participants

High School Graduate	Vocational/Trade School	Master’s Degree
Did not graduate High School	Some College	Doctorate Degree
Regular High School Diploma	Associate’s degree	Professional Degree
GED or High School Equivalent	Bachelor’s Degree	

Relationship to Head of Household

Select from one of the following choices to identify how this participant is related to the Head of Household in which they reside regardless of if the Head of Household is receiving services. Head of Household is defined as the member of the household who contributes more than half of the household’s income or makes most of the household decisions. The Head of Household is determined by the household members, not by program staff.

Adopted son or daughter
Biological son or daughter

Housemate or roommate
Other non-relative

Spouse
Stepson or Stepdaughter

Brother or Sister

Other relative

**Unmarried partner
Self**

Father or Mother

Parent-in-law

Grandchild

Roomer or Boarder

Great- Grandchild

Son-in-law or daughter-in-law

Current Living Situation

Term	Definition
Have Physical Address	The address of the location in which the participant resides.
Legally Restricted	An address that is legally protected from being released or required.
Unsheltered	An individual or family with a primary nighttime residence that is a public or private place not designed for or ordinarily used as a regular sleeping accommodation for human beings, including a car, park, abandoned building, bus or train station, airport, or camping ground.
Sheltered	An individual or family currently residing or living in an emergency shelter or hotel/motel paid for by a shelter program.
Safe Haven	A form of supportive housing that serves hard-to-reach homeless persons with severe mental illness who come primarily from the streets and have been unable or unwilling to participate in housing or supportive services.
Institutional Setting	A setting where the individual is under the care of a professional organization or the government (e.g. an inpatient treatment program, a jail, or group home).
Temporary Housing Situation	A short-term housing situation where individuals and families are able to stay for less than 24 months (e.g. transitional housing, couch surfing).
Potentially Permanent Housing Situation	A housing situation where the individual or family may be able to stay long-term (e.g. with a significant other or a close family member where adequate space is available).
Residential Housing	Refers to a form of housing or living facility that serves individuals in various stages of life or recovery. Supervision may or may not be provided by licensed caretakers. This term encompasses registered housing establishments and a broad spectrum of residential programs.

L. Episodes

Episode

1. An episode of service reflects the period of time during which face-to-face service(s) were rendered. Each episode will have an open date and eventually a close date and a closing reason. The episode open date must be the date the participant enrolled in the program. If there are no services for 30 calendar days, then the episode needs to be closed by the provider. The episode close date must be the last date the participant received face-to-face services or direct phone or voice contact, but does not include voice mail, email or written contact.
2. Each episode will have an open date and eventually a close date and a closing reason.
3. Only one episode per participant and program should be open at any given time. Dates of any additional individual participant episodes should not overlap previously existing episodes for that participant. Each episode is specific to a program. If a file contains data for multiple programs, a participant can have one episode per program. The participant's information will appear only once in the demographic file.
4. The episode open date must be the first date that the participant received services. in the program.
5. A participant is required to have at least one individual service within each episode.
6. The episode close date must be the last date the participant received services in the program. If a participant does not receive services for 30 days s the participant's episode shall be closed. The episode close date will reflect the last day of service.
7. If a participant's episode has been closed and the participant returns for service, a new episode must be created for the participant. The initial PersonID and HouseholdID must continue be used.
8. If a participant and episode record have been created but a service was never rendered, the participant should be removed from the data uploads Providers must have a timeframe defined in their Provider Data Management Plan that outlines their procedure for timely removal.
9. If a program is no longer funded by JWB, all participant episodes must be closed and the close date must reflect either the last date of service or funding end date, whichever occurred first. This shall be done by the Provider before their final reimbursement.

Program Site Assignment

- a. All participants are required to have a site assignment.
- b. The participant's site will be indicated in the episode file.
- c. A Site ID identifies the location where the participant received services.
- d. Site IDs are provided by JWB.

ProviderID	A JWB provided ID that indicates the agency the upload pertains to. This field is required in the Demographics, Episodes, Services, Measures and Aggregate files.
ProgramID	A JWB provided ID that indicates the program the data pertains to. Multiple program IDs can be present in a file. This field is present and required in the Episodes, Services and Measures file.
SubProgramID	This is usually a provider defined ID provided to JWB to determine potential provider subprograms within a JWB funded

EpisodeUniqueIdentifier	A Record ID that is specific to a unique episode instance for each person in a specific program. For example, the record ID could be a unique instance of program ID, person ID, episode ID, and open date. It's important to note that identifiers should not be reassigned to any other services instance. A unique episode instance of program ID, personID, Episode ID, and Opendate. It's important to note that identifiers should not be reassigned to any other episode. No spaces, quotation marks or pipes can be used in this field.
PersonID	Unique ID for each individual person served by a JWB funded provider. This ID does not change regardless of how many times they have been served or which program(s) they were served in.
ReferredFrom	This field is used to determine whether or not the JWB participant was referred to the JWB funded program from another agency, program, etc.
ReferredTo	This field is used to determine whether or not the JWB participant was referred to another program from another agency, program, etc.
SiteID	The physical locations where a participant receives services.
EpisodeOpenDate	The calendar date of when a participant's episode begins or starts.
EpisodeCloseDate	The calendar date of when a participant's episode ends or stops.
EpisodeClosingReason	* Required if episode is closed. Should be left empty until the episode is closed. Please refer to the picklist below to see JWB list of options
Misc1	This field allows for programs to upload mutually agreed upon data with JWB that is not collected in the above fields.
Misc2	This field allows for programs to upload mutually agreed upon data with JWB that is not collected in the above fields.
ReportEndDate	This date will specify the last date of the month for which the data is being uploaded. Example: If the data in the file is from August, then the Report End Date would be 08/31/20XX

Episode Picklist

Referred From

This item refers to the household as a whole and is not collected for each individual in the household. The intent of this item is to identify the primary source of referral to this program.

2-1-1 Tampa Bay Cares: any referral from Pinellas County's local information and referral service.

Adult and Aging: any Provider providing specialized services to adults and seniors.

Advertising (any media): advertisement in any media (newspaper, radio, television, billboard, leaflet, bulletin, social media, etc.).

Alcohol and/or Substance Abuse Services: any public or private Provider specializing in the treatment of or prevention of alcohol or substance abuse.

Case Management/Navigation: any referral by an entity that provides the advocacy and coordination of services on behalf of an individual person who may be considered a case in different settings such as health care, nursing, rehabilitation, social work, disability insurance, employment, and law.

Child Care: any public or private childcare provider.

Child Protective Investigation (CPI): any Child Protective Investigator officially recognized by the Pinellas County Sheriff's Department.

Counseling Program: any Provider, public or private, that provides counseling to individuals, families, groups or a privately practicing professional who provides guidance or problem-solving advice. (If the referral is from a mental health center, use "Mental Health Services" below)

Court: referred by any court with jurisdiction over families or juveniles.

Death & Dying Services: programs that provide services to the terminally ill and/or grief services to surviving family members.

Developmental Intervention and Evaluation Services: programs that provide evaluation and treatment for children with suspected or identified developmental delay or neuromuscular impairment or any other Provider specializing in services to people with disabilities.

Domestic Violence Provider: any Provider specializing in providing services to perpetrators or victims of domestic violence (including crisis shelters).

Community Based Care Lead Agency: community-based care services (foster care, adoption) that are contracted for by DCF.

Employment Assistance/Job Training: any Provider, public or private, specializing in vocational training or employment related services for non-handicapped persons such as Florida's Provider for Workforce Innovation program.

Faith-based Organization: organizations that provide social services, or religious or spiritual activities as part of their affiliation with a religious group, not including faith based parochial schools. NOTE: Referrals from a parochial school should be identified as "Private School".

Family Support Services: any program, public or private, that assists families in meeting their basic needs in times of crisis, needs or change.

FDLRS-FL Diagnostic and Learning Resources System: provides diagnostic and instructional support services to district exceptional student education programs and families of students with exceptionalities statewide.

FL Dept of Children and Families (DCF): any referral from DCF's Adult Services, Developmental Disabilities, Economic Services, Family Safety division or Substance Abuse or Mental Health divisions.

FL Dept of Health: referred from the Florida Department of Health / Pinellas County Health Department.

FL Dept of Juvenile Justice: any office or employee of the Florida Department of Juvenile Justice.

Friend/Relative/Legal Guardian: an informal referral by someone who is close to the participant or is an acquaintance, anyone related to the program participant or the participant's legal guardian.

Family Services Initiative (FSI): Collaborative partners including Personal Enrichment through Mental Health Services, Gulf Coast Jewish Family and Community Services, Juvenile Welfare Board, as well as various service providers and vendors. The system provides direct access for families through wrap around services. FSI provides an array of services, support, coordination, information, referral and system navigation to assist families in achieving stability.

Hospital: any office or employee of a local area hospital.

Housing Program: any program that provides non-crisis related short or long- term housing services.

Law Enforcement: any Provider or duly sworn officer thereof empowered by the state to enforce laws and having the power to arrest (this includes city police agencies or county sheriffs' departments).

Legal Services: any licensed attorney, private law firm, public defender or state attorney.

Medical Services: any public or private health service provider. NOTE: Mental health service providers should be entered as "Mental Health Services".

Mental Health Services: any public or private organizations concerned with meeting the needs of the mentally ill or those vulnerable to mental illness.

Neighborhood Family Center: A place in a neighborhood where families come together to meet each other, have fun together, learn together, and support each other.

Pinellas County Health & Human Services: Any referral by the Dental, Medical, Emergency or General Assistance, Indigent Burial, Mobile Medical Units or Summer Food Programs.

Pinellas County School System: any program offered by the Pinellas County School System or any teacher, counselor, principal, or other employee of the Pinellas County School System.

Private School: any teacher, counselor, principal, dean, or other employee of any private or parochial school not affiliated with the Pinellas County School System.

Recreation Program: any public or private recreation program or center.

Refugee/Immigrant Services: any public or private Provider specializing in services to refugees or immigrants.

Self: participant decided to enter the program on his/her own.

Shelter Services: crisis-related temporary safe housing services (for example, runaway or homeless) excluding domestic violence shelters (use Domestic Violence Provider).

Support Group: any program which organizes and provides resources, peer support and guidance to a group of people with common goals or issues.

Vocational Rehabilitation Services: any Provider, public or private, that offers training to participants who are mentally or physically disabled so they can do useful work and become more self-sufficient.

Youth Development Program: any program designed to support, guide and challenge young people. They are characterized by providing youth with opportunities for meaningful participation and service to others. These programs provide youth with opportunities to explore and develop values, interact with caring adults, and form considerate relationships with their peers.

Referred To

The field identifies referrals made for the participant throughout the program. If there were multiple referrals for this participant, select all that are appropriate. If the participant returns for services and has a new episode, do not delete the previous data entered into this field; simply add the additional referrals as they are provided.

JWB strongly encourages Providers to collect and enter Referrals even though this field is not required.

No Referral(s) Made: an assessment of needs was completed, and no referral(s) was required. If this selection is utilized no other referral items should be selected.

2-1-1 Tampa Bay Cares: a referral to Pinellas County's local information and referral service.

Adoptions: any private adoption Provider.

Adult & Aging: any Provider providing specialized services to adults and seniors.

Alcohol and/or Substance Abuse Services: any public or private Provider specializing in the treatment of or prevention of alcohol or substance abuse.

Basic Needs Services: any program, public or private, that assists families in meeting their basic needs in times of crisis, needs, or change or any program, public or private that provides assistance with household items such as food, clothing, dishes or other household goods.

Child Care: any public or private childcare provider.

Child Support Enforcement: The Department of Revenue Child Support Enforcement Program.

Counseling Program: any Provider, public or private, that provides counseling to individuals, families, groups including programs that provide services to the terminally ill and/or grief services to surviving family members.

Dental Services: any dentist for dental services.

Developmental Evaluation and Intervention Services: evaluation and treatment for children with suspected or identified developmental delay or neuromuscular impairment or any community Provider that deals with developmental disabilities in children (for example, mental or physical handicaps).

Disabilities: agencies specializing in services to people with disabilities defined as temporary or permanent reduction in function, usually a result of a physical or mental condition or infirmity. NOTE: Agencies that specialize in treating developmental disabilities should be entered under "Developmental Evaluation and Intervention Services".

Domestic Violence Services: any Provider specializing in providing services to perpetrators or victims of domestic violence (including crisis sheltering).

Community Based Care Lead Agency: community-based care services (foster care, adoption) that are contracted for by DCF.

Education: any academic program offered by any public or private school (including credit or non-credit courses, adult education, Special Education, and English for Speakers of Other Languages – ESOL).

Employment Assistance/Job Training: any Provider, public or private, specializing in vocational training or employment related services for non-handicapped persons including Florida's Provider for Workforce Innovation program.

Faith-based Organization: organizations that provide social services, or religious or spiritual activities as part of their affiliation with a religious group, not including faith based parochial schools. NOTE: Referrals to a parochial school should be identified as “Education”.

Family Services Initiative (FSI): The Family Services Initiative consists of Juvenile Welfare Board and collaborative partners (core partners) including GCJFCS, PEMHS (system navigation), service providers and vendors. Provides direct access for families through wrap around services. FSI provides an array of services, supports, coordination, information, referral and system navigation to assist families in achieving stability.

Family Support Services: any program, public or private, that assists families in meeting their basic needs in times of crisis, needs, or change or a program that provides funds for emergency needs such as rent or utilities.

Financial Management/Debt Counseling/VITA: any program, public or private, that specializes in services that help people manage money, develop budgeting skills, or assist with debt management or tax preparation.

FL Dept of Children & Families (DCF): referred to any division of DCF including the Adult Services, Developmental Disabilities, Economic Services, Family Safety or Substance Abuse or Mental Health divisions.

FL Dept Of Health: any referral to the Florida Department of Health / Pinellas County Health Department.

Florida Abuse Hotline: The Florida Abuse Hotline accepts reports 24 hours a day and 7 days a week of known or suspected child abuse, neglect, or abandonment and reports of known or suspected abuse, neglect, or exploitation of a vulnerable adult. To make a report you can -

- Report online at <https://reportabuse.myflfamilies.com/s/>
- Call 1-800-962-2873
- Use 711 for Florida Relay Services

- Fax your report to 1-800-914-0004

If you suspect or know of a child or vulnerable adult in immediate danger, call 911.

Housing: any program that provides non-crisis related short or long- term housing services.

Juvenile Justice: referred to any court with jurisdiction over juveniles, any Provider that serves youth involved with the justice system or any referral to any office or employee of the Florida Department of Juvenile Justice.

Legal Services: an Provider or program that provides legal advice or services or any licensed attorney, private law firm, or public defender.

Medical Services: any clinic, family physician, radiologist, ophthalmologist, optometrist, hospital, emergency room, or any health service provider excluding mental health service providers. Mental health service providers should be entered under “Mental Health Services” below.

Mental Health Services: any public or private organizations concerned with meeting the needs of the mentally ill or those vulnerable to mental illness or a privately practicing professional who provides guidance or problem-solving advice.

Neighborhood Family Center: A place in a neighborhood where families come together to meet each other, have fun together, learn together, and support each other.

Parenting Education: a program that provides information, resources, and or tools to promote change that improves the lives of children by supporting parents and caregivers.

Pinellas County Health & Human Services: Any referral to the County’s Dental Assistance, Emergency Assistance, General Assistance, Indigent Burial, Medical Assistance, Mobile Medical Unit or Summer Food Program.

Recreation Program: any public or private recreation program or center.

Refugee/Immigrant Services: any public or private Provider specializing in services to refugees or immigrants.

Respite Care: a service that provides periodic relief for the family or primary care giver.

Shelter Services: crisis related temporary safe housing services (for example runaway or homeless) excluding domestic violence shelters which should be entered as Domestic Violence Services.

Support Group: a program that organizes and provides resources, peer support, and guidance to a group of people with common goals or issues.

Vocational Rehabilitation Services: any Provider public or private that offers training to participants who are mentally or physically disabled so they can do useful work and become more self-sufficient.

Youth Development Program: programs designed to support, guide and challenge young people. They are characterized by providing youth with opportunities for meaningful participation and service to others. These programs provide youth with opportunities to explore and develop values, interact with caring adults, and form considerate relationships with their peers.

* Definition taken wholly or in part from The Social Work Dictionary, Sixth Edition, Robert L. Barker, NASW Press, Washington, D.C., 2014.

Episode Closing Reason

This field captures information regarding why each participant left the program or stopped receiving services.

Completed Program: the participant completed program services as defined in the Program Methodology.

Transferred to another provider prior to completion of program: the participant left the program but is receiving similar services from another provider as documented in the case file.

Participant withdrew - with notice: the participant informed the program that he/she no longer wished to, or would no longer be able to, attend activities and ceased participation prior to completion.

Participant withdrew - health problems: the participant was unable to participate further in program activities due to health problems.

Participant withdrew - lack of transportation: the participant was unable to obtain transportation to continue to attend program.

Participant withdrew - without notice: the participant ceased involvement (stopped showing up/dropped out) with the program unexpectedly and without notice.

Participant lost eligibility - aged out: the participant turned 18 and was no longer eligible for services offered to children only. Programs for young children will have their own appropriate age limit and can also use this closing reason.

Participant lost eligibility - was arrested/incarcerated: the participant was arrested and therefore no longer eligible for services or was the participant was incapable of attending program activities due to incarceration.

Participant lost eligibility - moved out of service area: the participant no longer resides in the geographic service area.

Participant lost eligibility - violation of program rules: the participant was discharged from the program for not adhering to the program rules.

Participant lost eligibility - lack of progress: the participant was not making satisfactory progress towards identified goals established by the program.

Participant died: participant deceased.

Reunification: when the youth has been returned to the biological home from which he/she was legally or informally removed.

Funding Ended / Site Closed: use only as approved by JWB.

Program Funding Transferred: use only as approved by JWB.

Program Data transferred to Data Warehouse: use only as approved by JWB.

M. Services

Services

1. A service must be entered for all participants to identify the individual and group or program-wide service for which the participant is engaged. Providers who upload data to JWB through SharePoint, Direct Data Uploads, or other secure portal must follow the JWB Data Upload Guidelines for services and/or attendance data.
2. All individual services are to be captured in the Services file.

Service Entry Timeline

All services as should be included as soon as possible. A timeline for data entry should be documented in the Provider's Provider Data Management Plan. JWB recommends that data should be entered within two weeks.

Attendance Guidelines

- a. Excused absences must be identified differently in the upload provided. Use of this must first be approved by the JWB Program Evaluator.
- b. All excused absences must be noted in the participant file. The following absences are considered excused:
 - Medical – need to note in the file an excused absence, more than 5 days medical note
 - Documented extended learning – letter from school with length and days student would be attending the program
 - Court order
 - Bereavement (immediate family member)
 - Religious holidays
- c. The following absences are considered unexcused:
 - Sports
 - Vacations

ProviderID	A JWB provided ID that indicates the agency the upload pertains to. This field is required in the Demographics, Episodes, Services, Measures and Aggregate files.
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ProgramID	A JWB provided ID that indicates the program the data pertains to. Multiple program IDs can be present in a file. This field is present and required in the Episodes, Services and Measures file.
SubProgramID	This is usually a provider defined ID provided to JWB to determine potential provider subprograms within a JWB funded
ServiceUniqueIdentifier	<p>Importance of Service Unique Identifier in JWB System:</p> <ul style="list-style-type: none"> • Purpose: To determine whether a Service record is new or previously existing in the system. • Process: If the Service already exists, the system checks for changes and updates the record while archiving the previous version to track the history of changes. • Consequences of Inconsistency: Without a consistent unique identifier, new Services may be unnecessarily generated, changes may not be recorded, incorrect values may be written, and performance measures may be adversely affected. This can also cause internal delays and waste of time for JWB technical staff.
PersonID	Unique ID for each individual person served by a JWB funded provider. This ID does not change regardless of how many times they have been served or which program(s) they were served in.
Service	The name or title of the service provided to participants of the JWB funded program. Service Definitions are agreed upon with JWB
Units	This field represents the number of units provided for the service. Unit definition should be documented and agreed upon by JWB
ServiceDate	This is the date that the service was received. In cases where a service date range is used then this must be the first date the service was received.
ServiceEndDate	If services are provided in one day, the ServiceEndDate must be the same as the ServiceDate. In cases where the service is a range of dates, this field is populated to collect overall service length. If a date range is used, this field should remain empty until the last date of service.
Location	Documents where a program's services are provided. For example, location can be a site name or number. If services are delivered at school, location can be the school name. Home can be entered for services delivered at the participant's home.

Misc1	This field allows for programs to upload mutually agreed upon data with JWB that is not collected in the above fields.
Misc2	This field allows for programs to upload mutually agreed upon data with JWB that is not collected in the above fields.
ReportEndDate	This date will specify the last date of the month for which the data is being uploaded. Example: If the data in the file is from August, then the Report End Date would be 08/31/20XX

N. Measures

Performance Measurement

1. Performance Measures must be collected as specified in the JWB agreement.
2. Measure dates must be the date that the measurement occurred or the date the information was collected. If the measurement cannot be collected, the reason must be documented in the case file.
3. All required answers must be completed for all milestones and surveys.
4. If the agreement between the Provider and JWB requires the collection of data for performance measures, (e.g., surveys, assessments), the Provider Data Management Plan should include guidelines for ensuring the proper execution of the measure.

ProviderID	A JWB provided ID that indicates the agency the upload pertains to. This field is required in the Demographics, Episodes, Services, Measures and Aggregate files.
ProgramID	A JWB provided ID that indicates the program the data pertains to. Multiple program IDs can be present in a file. This field is present and required in the Episodes, Services and Measures file.
SubProgramID	This is usually a provider defined ID provided to JWB to determine potential provider subprograms within a JWB funded

MeasureUniqueIdentifier	<p>A Record ID that is specific to a unique measure instance. For example, the record ID could be a unique instance of program ID, person ID, measure ID, measure title, date of measure, item number, and response. It's important to note that identifiers should not be reassigned to any other measure instance. No spaces, quotation marks or pipes can be used in this field. Each individual line does not require a unique identifier, but the actual measure administered/ taken must be represented by a unique identifier. For a given measure, each question should have a unique identifier that also conveys the ordinal position of the question within the measure. If you need to concatenate to create a unique identifier a colon must be used.</p> <ul style="list-style-type: none"> • Purpose: To ensure that each Measure, as well as its associated Questions and Responses, are uniquely identified and tracked in the system. This is important for maintaining the integrity and accuracy of the data. • Process: Each Measure and Question should have a unique identifier that allows the system to track changes and updates. The order of the Questions should also be tracked to ensure that the data is accurately recorded and reported. • Consequences of Inconsistency: Without consistent unique identifiers for Measures and Questions, there is a risk of data being recorded incorrectly, changes not being tracked, and performance measures being adversely affected. This can also cause internal delays and waste of time for JWB technical staff.
PersonID	Unique ID for each individual person served by a JWB funded provider. This ID does not change regardless of how many times they have been served or which program(s) they were served in.
MeasureID	A unique number used to identify the specific measure.
MeasureTitle	Name of Instrument used for Measurement. For example, ASQ, ASQ-SE, GAS, CGAS, GAF, ABC Skills Test, XYZ Observation Tool, etc.
DateOfMeasure	Date of Measurement (Administration Point Date), not the data entry date.
ItemNumber	Question #
ItemResponse	Answer. If the participant left a item number blank, then ItemResponse should be "No Response".

UncollectedReason	Reason the Measure was not collected. If this field is populated only one row is necessary for the person's Measure/DateOfMeasure combination.
Misc1	This field allows for programs to upload mutually agreed upon data with JWB that is not collected in the above fields.
Misc2	This field allows for programs to upload mutually agreed upon data with JWB that is not collected in the above fields.
ReportEndDate	This date will specify the last date of the month for which the data is being uploaded. Example: If the data in the file is from August, then the Report End Date would be 08/31/20XX

O. Aggregate Data

Aggregate Data is used for group or program-wide service(s) that are not tied to an individual's data. Aggregate data is only required if applicable and documented between JWB and the Provider. There should be a separate record for each group or program-wide service(s).

P. Appendix 1

Planning Tool for Data Management Plan

PROVIDER NAME: _____

PROGRAM NAME: _____

A written Provider Data Management Plan outlines all procedures related to data collection, entry, and quality control. The plan must be developed and maintained by the provider and include at a minimum the information below.

ACCESS TO DATA SYSTEMS

Please describe the:

- a. Process for authorizing new user access
 - i. Providers will need to submit forms. For JWB Flex access, Providers must fill out and submit the access form to their Agency Admin. For Direct Data Uploads, Providers seeking access must reach out to Michael Havelka (mhavelka@jwbpinellas.org).
- b. Process for monitoring access on an ongoing basis
 - i. Providers must monitor user access on an ongoing basis to confirm that only the appropriate staff have access to JWB's participant data system(s). If changes are necessary, provider staff will complete and forward the appropriate access request form to the JWB Program Consultant and the appropriate help desk. User access will be monitored by JWB Program Consultants annually.
- c. Process for terminating access of departing staff
 - i. If a provider's staff member is involuntarily terminated, placed on involuntary administrative leave, or involuntarily relieved of their position's responsibilities for any reason, provider staff shall immediately notify the JWB Program Consultant and the appropriate JWB Admins and the Agency Admin to have the user inactivated immediately. Provider staff must follow-up with the appropriate paperwork.
 - ii. If a staff member has resigned and is no longer employed by the provider and/or program, the provider staff must submit a written request to terminate user access on or before their last day of employment.

DATA SECURITY

Please describe the:

1. Information Technology or Security policies to protect participant data and prevent accidental or malicious disclosure of participant information, including but not limited to:
 - a. Privacy and confidentiality policies for provider staff

- b. Procedures that govern participant files and records, such as ensuring all users must have a separate and unique access login and password and know they must protect it from discovery by others, keeping participant files kept in a secure location, handing printed reports containing confidential information, locking computer systems, etc.
- c. Trainings to protect participant identifying information (e.g. Name, Address, Social Security Numbers, Student IDs, etc.)

ENTRY AND QUALITY CONTROL

Please describe the time frames and processes for data collection, data entry, and data quality checks, including but not limited to:

1. A re-engagement process which specifies the time frame of closure for inactive participants who fail to return for services. (See table)
2. How, when, and which staff positions are responsible for entering and verifying data (see table)
3. **For JWB Flex:** If a record needs to be archived, the provider must reach out to flex@jwbpinellas.org They will need to include the participant record ID and the record ID of the item to be archived. **For Direct Data Uploads:** If a participant record needs to be deleted that has already been submitted to JWB, the provider must submit written documentation of the participant IDs that need to be removed. The provider must also remove the participants from their exported upload files. If a service or measure record needs to be deleted the provider will remove the record from the upload file.
4. A Continuous Quality Improvement (CQI) process should also be included in this document.
 - a. One or more provider staff shall be appointed to review data quality on a regular basis as detailed by this plan.
 - b. The CQI process should also include steps necessary to correct data inaccuracies.
5. If the agreement between the Provider and JWB requires the collection of data for performance measures, (e.g., surveys, assessments), the Provider Data Management Plan should include guidelines for ensuring the proper execution of the measure.
6. If applicable, procedures for collecting and maintaining a participant wait list.

TABLES

Please identify in a table how, when, and which staff positions are responsible for entering and/or verifying data. Examples below:

Example Table 1

Position	Duties
Specialist	Data collection and application review
Staff Assistant	Data entry and maintenance
Supervisor	Quarterly review

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Example Table 2

Activity	When and/or how often will this occur?	Staff position responsible
Entering data		
Updating participant information		
Closing inactive participants who fail to return for services		
Removal of participant records where an episode was opened but services were never rendered		

Q. Appendix 2

JWB Flex Data Fields

Type	Field Label	Type	Required	Description	Note/Comment
Household	Household ID/Record ID	Numeric	Yes	Unique ID to identify the Household or Family to which a participant belongs	Automatically populated when the Household is created
Household	Name of Head of Household	String	Yes	First and Last Name of the Head of Household or the member of the household who contributes more than half of the household's income or makes most of the household decisions	
Household	Number of Adults	Numeric	Yes	Total number of adults (18 or older) who reside in the same physical location	
Household	Number of Minor Children	Numeric	Yes	Total number of children (under 18) who reside in the same physical location	
Household	Household Income Refused/Unknown	Yes/No	No	Check box if household income is indicated as refused/unknown	
Household	Household Income	Numeric	Yes	Total annual gross income of all members living in the same physical location before taxes	Required unless household income is indicated as Refused/Unknown

Household	Household Arrangement	Drop Down	Yes	Household arrangement information is to establish the closest definition that will allow comparison with Census Bureau data	Drop down menu options: Single Parent - Female Head of Household, Single Parent - Male Head of Household, Dual Parent - Married, Dual Parent- Non-Married Female Head of Household, Dual Parent- Non-Married Male Head of Household, Other-Relative / Kinship Care - Female Head of Household, Other-Relative / Kinship Care - Male Head of Household, Other-Relative / Kinship Care - Married, Other- Non Relative, No dependents - married, No dependents - couple, non-married, No dependents - single female, No dependents, single male
Participant	Participant ID / Record ID	Numeric	Yes	The Record ID is the unique ID for each participant	Automatically populated when the participant is entered into the system

Participant	First Name, Middle Name, Last Name, Last Name Suffix	String	Yes	The participant's full legal name	First and last name at minimum, must be entered; Avoid abbreviations and nicknames, i.e. enter Robert instead of Bob or Bobby; Do not include last name suffixes such as Jr., Sr., II, III, etc. in the last name field; use the separate Last Name Suffix field for this information
Participant	Date of Birth	Date	Yes	The legal date that the participant was born	
Participant	Gender	Drop Down	No	The participant's identified gender	Drop Down Options: Male, Female, Gender Non-Conforming, Trans Male, Trans Female
Participant	Sex	Drop Down	Yes	The biological attributes of men and women (chromosome, anatomy, hormones)	Drop Down Options: Male, Female
Participant	Race	Drop Down	Yes	The race the participant identifies from the Census Bureau defined list	Drop Down Options: American Indian or Alaska Native, Asian, Black or African American, Native Hawaiian, Other Asian (Hmong, Laotian, Thai, Pakistani, Cambodian, etc.), Other Pacific Islander (Fijian, Tongan, etc.), Two or More Races, White, Prefer not to answer

Participant	Ethnicity	Drop Down	Yes	If the participant is of Hispanic, Latino or Spanish Origin, select the participant's ethnicity from the Census Bureau defined list; otherwise select No, not of Hispanic, Latino, or Spanish Origin	Drop Down Options: No, not of Hispanic, Latino, or Spanish Origin; Yes, Mexican, Mexican American, Chicano; Yes, Puerto Rican; Yes, Cuban; Yes, another Hispanic, Latino, or Spanish Origin, Prefer not to answer
Participant	Services Type	Radio Button	Yes	Indicates whether the participant is receiving services as an adult or a child	Adult: a participant who is eighteen years of age or older or who is receiving the services of an adult, i.e. participants under eighteen years of age and currently pregnant or a teen parent and receiving the services of an adult. Child: a participant who is under the age of eighteen at time of intake or someone who is eighteen or older but receiving school-based services. This influences the available options for the Education, School Name, and Student ID fields

Participant	Education	Drop Down	Yes	The participants highest level of education; Students enrolled in school during the school year should indicate their current grade; Students enrolling during the summer should indicate the grade they will be entering	Drop down options differ if the participant is identified as receiving adult or child services; For adults, education options range from did not graduate high school up to a doctorate degree; If a participant is identified as having child services then they should select the current grade in which the child is enrolled
Participant	Student ID	Numeric	No	The School ID is the permanently assigned identifying code for a student in the Pinellas County School System	If the Student ID is unavailable or if the participant refuses to provide the ID, a pseudo Student ID of 9999999999 (ten 9's) must be entered in the Student ID field. For children attending private school a pseudo Student ID of 7777777777 (ten 7's) must be entered in the Student ID field. Every attempt should be made to collect the Student ID. If the actual Student ID is later obtained the Student ID field must be updated.
Participant	School Name	Drop Down	No	The name of the Kindergarten through 12th Grade school that the participant attends	If a participant is receiving child services, but is not in school or attends a school outside of the Pinellas County use the N/A or School Not Listed Option

Participant	Social Security Number	Numeric	Program Specific	Nine Digit number issued to U.S. citizens	Only enter if required by JWB and denoted in your contract. Otherwise this field should be left blank.
Participant	Home Phone Number	Numeric	No	Home phone number of the household	
Participant	Cell Phone Number	Numeric	No	Cell phone number of the participant	For children, this should be the parent's cell phone number
Participant	Email Address	String	No	Email address	For children, this should be the parent's email address
Participant	Does this Person Speak a Language other than English at home?	Drop Down	Yes	Primary language spoken in the home	Yes / No; If Yes, please select the most frequently spoken language from the drop down
Participant	Primary Language Spoken	Drop Down	Yes	As to indicate the primary language spoken in the home other than English	This is only a required field if the participate indicates another language is spoken at home. Drop down options: English, Spanish, Chinese, Vietnamese, Korean, Russian, Arabic, Tagalog, Polish, French, Haitian Creole, Portuguese, Japanese, Italian, American Sign Language, Other

Participant	Current Living Situation	Drop Down	Yes	Current housing arrangement in which the participant resides	Drop down options: Have Physical Address, Legally Restricted, Unsheltered, Sheltered, Safe Haven, Institutional Setting, Temporary Housing Situation, Potentially Permanent Housing Situation
Participant	Address 1, Address 2, City and ZIP Code	String	No	Physical Street address for the primary place of residence of the participant	Use standard post office abbreviations for addresses i.e., St for Street, N for North, NW for Northwest etc. and no punctuation. For example: "14155 58th St N". For apartment, building, suite and lot numbers, please use Address Line 2.
Participant	Linked Household	String	Yes	Household information will appear under the linked household field	If a participant is not linked to a household, the field will appear blank. If the field is blank, a household MUST be linked to the participant.
Participant	Relationship to Head of Household	Drop Down	No	Participant's relationship to the Head of Household in which they reside	Drop down options: Spouse, Biological son or daughter, Adopted son or daughter, stepson or stepdaughter, Brother or sister, Father or Mother, Grandchild, Parent-in-law, Son-in-law or daughter-in-law, Other relative, Roomer or Boarder, Housemate or roommate, Unmarried partner, Other non-relative, Self

Episode	Episode Open Date	Date	Yes	First day a participant is active within the program	
Episode	Referred From	Drop Down	Yes	Primary source of referral to this program	Please refer to list of Drop Down options
Episode	Referred To	Drop Down	No	Referrals made for the participant throughout the program	If there are multiple referrals for a participant, select all that are appropriate. If the participant returns for services and has a new episode, do not delete the previous data entered into this field; simply add the additional referrals as they are provided.
Episode	Episode Close Date	Date	No	Last date the participant received services	Service is defined as face-to-face service, direct phone, voice contact, or telehealth but does not include voice mail, email, or written contact.

Episode	Episode Closing Reason	Drop Down	No	Information regarding why each participant left the program or stopped receiving services	Drop Down options: Completed program, Transferred to another provider prior to completion of program, Participant withdrew- with notice, Participant withdrew- health problems, Participant withdrew - lack of transportation, Participant withdrew- without notice, Participant lost eligibility - aged out, Participant lost eligibility - was arrested/incarcerated, Participant lost eligibility - moved out of service area, Participant lost eligibility - violation of program rules, Participant lost eligibility - lack of progress, Participant died, Reunification, Funding Ended / Site Closed
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