REPORTS TO BE REVEIWED ON A REGULAR BASIS

Dement				
Report				
Number	Name of Report in XPTR	Title of Report as shown on Report		
PQA020	DHRPQ FC PMT RPT PQA020	Final Foster Care Payment Report		
	Child Name, SIS #, Facility Name & ID, Rat			
State/Fede	ral Share, Eligible Children Listed out by Co	ounty, all applicable counties totals at		
end				
072	PAQ072 SSN w/all 9's	Cases with Invalid SSN		
Lists cases	in the Central Registry with invalid SSN Inc	ludes – Case Manager, Child Name		
	Listed out by County			
079		Reviews Due By		
	for review this month, next month, or overd			
	e, Case #, SIS #, Agency team Review Date			
	e, Case #, SIS #, Agency learn Neview Date	e, Court Review Date, Action Required		
090	BOA080 Case Managare Brit	CPRS Case Managero Depart		
080	PQA080 Case Managers Rpt	CPPS Case Managers Report		
	is the Foster Care Case Managers' Report.	It gives, by Svv, what activities are		
past due, d	ue this month, and due next month.			
		Quarterly Client Analysis		
081	PQA081 QTR Client Analysis children in placement. New cases, active c	Summary		
male Acti Case	es: Placement Reason 1-15 Type of Authority 1-9 Time in Custody (months) 0-6, 7-1 ninated Type of Authority es: Termination Reasons Time in Custody Plan Goal	es 0-5, 6-12, 13-18, 18+		
084	PQA084 Quarterly Case List	Monthly Case Listing		
	en cases by county. Within the county cases			
case the following information is included" Case Manager, SIS #, Child's Name, Age, Race, Placement Type. Authority Reason, Months in Custody, Months in Foster Care, LA Type				
Termination Reason.				
89	Foster homes-Violation LC	Foster Homes Violation of Licensing Capacity		
Lists by county the foster homes (by ID # and name) that were in violation of their licensing				
capacity and what dates during the month they were in violation.				

Report Number	Name of Report in XPTR	Title of Report as shown on Report			
Number		The of Report as shown on Report			
91		Permanency Plan Analysis			
	summary of 9 permanent plan goals (1 – Pr				
	– Guardianship w/ Relative, 5 – Guardians				
	- Custody w. Other, 8 - Plan Goal not Est,				
	and 19 barriers.				
J					
107	PQA 107 IV-E Foster Care	Children Eligible Under Title IV-E			
IV-E Foster	Children for Review				
		CPPS ADOPTION ASSISTANCE			
		PROGRAM CHILDREN ELIGIBLE			
108	PQA 108 IV-E Adopt Assist.	UNDER TITLE IV-E			
IV-E Adopti	on Assistance Children for Review				
	-				
120	FC Pmt Report PQA120. With in this re				
		Foster Care IV-E Child Caring			
120-1		Institutions Final Payment Report			
	Care Institutions that are paid with IV-E th				
	y name and ID, Child name and SIS#, days				
-	nt Amount, CCI Payment Amount, Fed Sha	re Non-Fed Share. Report run			
monthly.					
	C. Dreft Depart with in this report ever				
FQATOS F	C Plint Report with in this report are:	PQA165 FC Pmt Report with in this report are:			
		Children In Custody or Placement			
		Children In Custody or Placement Responsibility of DSS for over 1			
229	POA229 Children in Custody	Responsibility of DSS for over 1			
229	PQA229 Children in Custody	Responsibility of DSS for over 1 Year			
Includes – (Child's Name, SIS #, Age, Race, Sex, Time	Responsibility of DSS for over 1 Year in Care, When Placement Authority			
Includes – (Responsibility of DSS for over 1 Year in Care, When Placement Authority			
Includes – (Child's Name, SIS #, Age, Race, Sex, Time	Responsibility of DSS for over 1 Year in Care, When Placement Authority tatewide totals at end of report			
Includes – (Child's Name, SIS #, Age, Race, Sex, Time	Responsibility of DSS for over 1 Year in Care, When Placement Authority			
Includes – 0 Began, Cas 230	Child's Name, SIS #, Age, Race, Sex, Time se Manager Each County by county, and s PQA230 Plcmnt into NC	Responsibility of DSS for over 1 Year in Care, When Placement Authority tatewide totals at end of report Children Into Interstate Compact Into NC			
Includes – 0 Began, Cas 230 (kids in and	Child's Name, SIS #, Age, Race, Sex, Time and the Manager Each County by county, and s	Responsibility of DSS for over 1 Year in Care, When Placement Authority tatewide totals at end of report Children Into Interstate Compact Into NC – Child's Name, SIS #, Age, Race,			
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Includes – 0 Began, Cas 230 (kids in and Sex, Time i report 231 Includes – 0 Each Coun 300 Includes – 0	Child's Name, SIS #, Age, Race, Sex, Time and the Manager Each County by county, and s PQA230 Plcmnt into NC ther state's custody placed here) Includes n Care, Case Manager Each County by count PQA231 Plcd in other State Child's Name, SIS #, Age, Race, Sex, Time	Responsibility of DSS for over 1 Year in Care, When Placement Authority tatewide totals at end of report Children Into Interstate Compact Into NC – Child's Name, SIS #, Age, Race, unty, and statewide totals at end of Children in Placement in another state than NC e in Care, Case Manager report Children with Plan of Adoption Illy Free (Y/N), Available for Adoption			

SYA Reports

Report			
Number	Name of Report in XPTR	Title of Report as shown on Report	
		Percentages Of Time By Program	
200-1	DHRSY WR001F1 Percentage of Time	& Service Worker	
This reports lets SWS's and PM's know what SW's are coding on day sheets. This report is			
found under SYA.			
440		CPS 90 Day No Services Provided	
Report of cases that have been inactive for the last 90 days. Lists cases by county. Includes			
total number of cases, divides them into active and inactive ones, gives percentages for each.			
Statewide total at end of report.			
631			
This report supplements the SYA 200-1 (Percent of Time) and gives a breakdown of service			
coding to program coding.			

CYA Reports

Report		Title of Demont on all sum on Demont	
Number	Name of Report in XPTR	Title of Report as shown on Report	
004-1		Child Abuse & Neglect Reports Entered	
Report of all reports entered into the Central Registry. Shows, by county, for each month, and			
	YTD, the source of reports, characteristics of children (age, race, sex), if investigation was completed in required time (# and %), # of days for investigation to be completed, type		
	N, A&N, D), and numbers substantiated, u		
	services recommended, and services not recommended. Gives information by county,		
region, and statewide.			
Monthly report.			
008-1	CYA008 Case Managers Rpt.	Case Manager's Report	
This reports gives a list by SW of the 5104's entered in a month. It supplements the			
CYA 004. report			
		Central Registry Responsible	
910-1	CYA910 Resp. Individ List	Individual List Report	
This report is a list of individuals determined to be Responsible for the Abuse or Serious			
Neglect of a juvenile.			

FCF Reports

Report		
Number	Name of Report in XPTR	Title of Report as shown on Report
402-1		Foster Care Licensing System
Lists all placement resources by Name, Facility Id #, Cap (acity), Sex they can take, ages,		
rate, supervisory agency, phone #		
Report		
Number	Name of Report in XPTR	Title of Report as shown on Report
		Foster Care Facility Licensing
		System – Group Homes &
503-1		Institutions List
List of all group homes and institutions by name, ID#, address, license		
dates (from-to), capacity, sex and ages allowed, and supervising agency.		