

**REPORT/REQUEST CATEGORIES - WHEN TO USE A CODE,
AND WHO GETS ALERTED**

- ❖ If CPS is used, a provider number IS entered on RRD1, and individual CAPS IDs are NOT entered on RRD2:
 - 1) The provider number will automatically carry over to RRD2
 - 2) An alert is generated to the assigned worker of the provider/facility (Report ##### on provider ##### please read)
 - 3) An alert is generated to the assigned worker of any client placed with that provider/facility (Allegation rec'd for provider #####. Check client #####)
 - 4) An allegation and determination must be entered for the provider on RRD2 before the system will allow closure of the report
 - 5) Because the category is CPS, only CPS-related allegations and determinations can be entered on RRD2. For example, the system will not allow an allegation of "LIC" (Licensing Violation) or determinations of "LVS/LVU" (Licensing violation substantiated/unsubstantiated)

- ❖ If CPS is used, a provider number IS NOT entered on RRD1, and individual CAPS IDs ARE entered on RRD2:
 - 1) If a CAPS ID on RRD2 is identified as a perpetrator, an alert is generated to the assigned worker of any facility that ID is associated with (Provider ##### / Employee ##### indicated as perpetrator) as long as that individual has been entered on PRPL/PRPD
 - 2) An allegation and determination must be entered on RRD2 before the system will allow closure of the report. Because allegations/determinations are not tied to a perpetrator, individual CAPS IDs for victims would also need to be entered on RRD2
 - 3) An alert is generated to the assigned worker of a client if they are an individual associated to a report regardless if they are identified as a perpetrator or a victim (Report ##### received for client ##### on 01/01/98)

- ❖ If CPS is used, a provider number IS entered on RRD1, and individual CAPS IDs ARE entered on RRD2:
 - 1) All of the above would apply, depending on what the worker entered. (i.e., is the allegation against the provider/facility as a whole, or against an individual associated with that provider/facility. Either way, as long as the person is associated to the provider/facility on PRPL/PRPD, the assigned worker for that provider/facility will receive an alert that the report was received)
 - 2) If the allegation is against an INDIVIDUAL associated with the facility, that individual's name should be what is entered in the REPORT NAME field on RRD1

❖ If LIC is used:

- 1) LIC should only be used if the allegation is a licensing issue (i.e., exceeding maximum number of children licensed for, license has expired but still providing care, etc.) If the allegation is one of abuse or neglect, then the category of CPS should be used
- 2) LIC category will require a provider number on RRD1
- 3) An allegation and determination must be entered on RRD2 before the system will allow closure of the report
- 4) Because the category is LIC, only LIC-related allegations and determinations can be entered on RRD2
- 5) An alert is generated to the assigned worker of the provider/facility (Report ##### on provider ##### please read)
- 6) An alert is generated to the assigned worker of any client placed with that provider/facility (Allegation rec'd for provider #####. Check client #####)

❖ If LII is used:

- 1) LII should only be used for licensing information requests (somebody not currently licensed and wanting to become licensed) or for referrals against a non-licensed provider
- 2) NO ALERT is sent out for LII requests because they are not tied to a specific provider number. For example, if it is a report being called in on somebody that is providing care to several children, and the reporter does not believe that person is licensed, it is up to the worker entering the report or the assigned worker of that report to follow up with any investigation on these issues