

**A579**  
**Child Treatment Operat**  
**Non-Res**  
**Data Element Definitions**

**Toronto**  
**2013-2014**

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**\*Notes:** 1) All data elements are reported quarterly. The reports must arrive at the Regional Office 30 days after the end of the 1<sup>st</sup>, 2<sup>nd</sup> and 3<sup>rd</sup> quarters, and 45 days after the end of the 4<sup>th</sup> quarter.

2) Cumulative reporting refers to year-to-date.

**Example:** Ten individuals were served in the 1<sup>st</sup> quarter and 6 individuals were served in the 2<sup>nd</sup> quarter. The total reported for the 1<sup>st</sup> quarter is 10 and the total reported for the 2<sup>nd</sup> quarter is 16.

3) Data Elements are to be collected at all service delivery locations.

4) Statistics reported should only be applicable to the services funded under this particular detail code.

Data Element Label	<b>INDSER#</b>
Data Element Name	<b>Number of Individuals Served</b>
Detail Code	<b>A579 – Child Treatment Operat Non-Res</b>
Ministry Definition	The number of individuals for whom a record has been created and who were recipients of the approved service(s) at some point during the fiscal year. This is a cumulative number and an individual is reported in the initial quarter in which he/she received services and counted once during the fiscal year. For example, in the first quarter if 15 individuals received service this would be reported at the end of June (end of the first quarter). If 5 additional new individuals received service during the second quarter a total of 20 individuals would be reported at the end of September (end of the second quarter).
Further Definition	An individual is considered served at the point at which he or she begins receiving the <u>approved service</u> . The approved service is defined as the service for which the agency receives funding. <b>*Note:</b> The approved service is specific to the agency and may or may not include the following components: intake, assessment, core service, aftercare.  Only individuals that are <u>actively</u> receiving service (i.e., have been engaged in the approved service during the specified time period) should be counted; furthermore, only the <u>identified</u> client(s) is to be counted as an individual(s) served. The identified client(s) is the person(s) for whom the care or service is intended or targeted.  A given individual is counted only once during the fiscal year, regardless of whether a new case is opened, or an existing case is re-opened, during the same fiscal year.
Examples	<b>Example 1:</b> A client’s case is closed in the 4th quarter of a given fiscal year. In the 1st quarter of the following fiscal year, this client is the recipient of aftercare services. This client is considered an <b>Individual Served</b> in the new fiscal year <u>if</u> aftercare is deemed to be part of the approved service.  <b>Example 2:</b> A client’s case is open but there is no contact between the service provider and the client during the 1st quarter of a given fiscal year. This client is not considered to be actively receiving service during this time period and so is not counted as an <b>Individual Served</b> in the 1st quarter.  <b>Example 3:</b> A client’s case is closed during the 2nd quarter of a given fiscal year. In the 4th quarter of the same year, the file is re-opened. This client is not counted again in the 4th quarter as he or she has already been counted once during the current fiscal year.  <b>Example 4:</b> A program has a target group of child and parent/caregiver thus focusing on the interaction between parent/caregiver and child. In this instance, both the child and parent/caregiver are the targeted individuals and should both be included in the <b>Individual Served</b> count.
Reporting	Cumulative