

**2009
HSRS CORE DESKCARD**

MODULE TYPE 1

CLIENT CHARACTERISTICS (Field 7)

- 19 Developmental disability - brain trauma
- 23 Developmental disability - cerebral palsy
- 25 Developmental disability – autism spectrum
- 26 Developmental disability - mental retardation
- 27 Developmental disability - epilepsy
- 28 Developmental disability - other or unknown
- 29 Family member of developmental disability client
- 86 Severe emotional disturbance
- 02 Mental illness (excluding SPMI)
- 03 Serious and persistent mental illness (SPMI)
- 14 Family member of mental health client
- 04 Alcohol client
- 05 Drug client
- 10 Chronic alcoholic
- 12 Alcohol and other drug client
- 16 Family member of alcohol and other drug client
- 17 Intoxicated driver
- 39 Gambling client
- 07 Blind / visually impaired
- 08 Hard of hearing
- 32 Blind / deaf
- 79 Deaf
- 09 Physical disability / mobility impaired
- 36 Other handicap
- 59 Unmarried parent
- 71 Victim of domestic abuse
- 50 Regular caregiver of dependent person
- 55 Frail elderly
- 57 Abused / neglected elder
- 18 Alzheimer's disease / related dementia
- 43 Migrant
- 44 Refugee
- 45 Cuban / Haitian entrant
- 33 Corrections / criminal justice system client (adults only)
- 91 Hurricane Katrina evacuee
- 92 Hurricane Rita evacuee
- 99 None of above

SPC CLUSTER/CATEGORY (Field 16)

- 100 Child Day Care - Crisis / Respite
 - 101 Child day care - crisis / respite
- 104 Supportive Home Care
- 107 Specialized Transportation and Escort
- 300 Community Living / Support Services
 - 102 Adult day care
 - 103 Respite care
 - 106 Housing / energy assistance
 - 110 Daily living skills training
 - 112 Interpreter services and adaptive equipment
 - 401 Congregate meals
 - 402 Home delivered meals
 - 404 Family planning
 - 406 Protective payment / guardianship
 - 604 Case management
- 400 Investigations and Assessments

- 301 Court intake and studies
- 603 Intake assessment
- 500 Community Support
 - 509 Community support
- 600 Work Related and Day Services
 - 108 Work related services
 - 706 Day center services - nonmedical

- 615 Supported Employment
- 700 Community Residential Services
 - 202 Adult family home
 - 205 Shelter care
 - 506 Community based residential facility
 - 705 Detoxification - social setting

- 800 Community Treatment Services
 - 305 Restitution
 - 501 Crisis intervention
 - 507 Counseling / therapeutic resources
 - 704 Day treatment - medical

- 900 Inpatient and Institutional Care
 - 703 Detoxification - hospital setting
 - 503 Inpatient
 - 505 DD center / nursing home

- 925 Institution for Mental Disease

Client specific reporting is not required on the following cluster. However, it may be used on an optional basis.

- 200 Community Prevention, Access and Outreach
 - 403 Recreational / alternative activities
 - 408 Community prevention, organization and awareness
 - 601 Outreach
 - 602 Information and referral
 - 605 Advocacy and defense resources
 - 606 Health screening and accessibility

TARGET GROUP (Field 17)

- 01 Developmental disability
- 72 Family member / other of DD client
- 31 Mental health (DSS use only)
- 75 Family member / other of mental health client
- 18 Alcohol and other drug abuse (DSS use only)
- 74 Family member / other of AODA client
- 57 Physical and sensory disability
- 76 Family member / other of P and SD client
- 58 Adults and elderly
- 77 Family member / other of adults and elderly client
- 64 Children and family

CLOSING REASON (Field 13)

- (Optional)
- 01 Assessment complete / decision not to serve
- 02 Successful completion
- 03 Client referred
- 04 Client no longer wants service
- 05 Client relocated
- 06 Death of client
- 07 Objectives not attained

- 08 Noncompliance with the program
- 09 Service not available
- 10 Court dismissed
- 11 Client no longer income eligible
- 12 Court order expired / client not income eligible
- 13 Somewhat successful completion
- 98 Other reason

MODULE TYPE

- Used on HSRS reports
- 1 CORE Human Services Reporting System
- 5 FSP Family Support Program
- 6 AODA Alcohol and Other Drug Abuse
- 9 MH Mental Health
- A LTS Long-Term Support

SOS DESK (608) 266-9198

8:00 - 11:30 A.M. and 12:30 - 4:00 P.M.

or leave voice mail message.

E-mail Address: DHSSOSHelp@wisconsin.gov

FAX: (608) 267-2437

HSRS Handbook and Terminal Operator's Guide:

<http://www.dhs.wisconsin.gov/HSRS/index.htm>

WI Department of Health Services

Division of Enterprise Services

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