Parent Participant ID		Parent Race/Ethnicity										
Unique Identifier for Parent/Caregiver Participating	Optional Household ID	American Indian or Alaskan Native	Asian	Black	Hispanic/Latino	Middle Eastern/North African	Hawaiian or Pacific Islander	White	Other Race/Ethnicity			
parent_id_shared.pa rent_id	parent_id_shared. optional_househol d_id	parent_race_s hared.race_aia n	parent_race_share d.race_asian	parent_race_shar ed.race_black	parent_race_shared.race_hispanic		parent_race_shared. race_hawaii	parent_race_shared.i ace_white	parent_race_shared.race _other			
Data Entry Type: Unique ID per parent/caregiver.  Please do not use the parent's name, birthdate, or other private information as the ID.	If you are able to track a family or household members, please include a unique id for these purposes. This is optional for FY 25-26 and we hope to get everyone doing this during FY 26-27.	Race/Ethnicity that may apply to a Parent/Caregiv	Parent/Caregiver.	Data Entry Type: Drop Down, Yes or No for all Categories of Race/Ethnicity that may apply to a Parent/Caregiver.	Data Entry Type: Drop Down, Yes or No for all Categories of Race/Ethnicity that may apply to a Parent/Caregiver.	Data Entry Type: Drop Down, Yes or No for all Categories of Race/Ethnicity that may apply to a Parent/Caregiver.	Data Entry Type: Drop Down, Yes or No for all Categories of Race/Ethnicity that may apply to a Parent/Caregiver.	Data Entry Type: Drop Down, Yes or No for all Categories of Race/Ethnicity that may apply to a Parent/Caregiver.	Data Entry Type: Drop Down, Yes or No for all Categories of Race/Ethnicity that may apply to a Parent/Caregiver.			

		Parent's Children Unde	Parent Location		Parent Requires Interpretation	Parent Recruitment
Other Race/Ethnicity Text Box	No Response - Race/Ethnicity	How many children age 5 and under is the participant parenting?	Zip Code	County	Did the Participant Require Interpretation Services Participate?	How did the participant learn about this program?
d.race_other_text Data Entry Type:	parent_race_shared.race _no_response Data Entry Type: Drop Down, Yes or No for all Categories of Race/Ethnicity that may apply to a Parent/Caregiver.	parent_child_shared.participan ts_children  Data Entry Type: Whole Number, Min Value = 1, Max Value = 20  How many children age 5 and under is the participant parenting?	parentlocationshared.zip_code Data Entry Type: 5 Digit Zip Code Enter the zip code of the participant's home address.	parentlocationshared .county  Data Entry Type: Drop Down, Listing of NC Counties.  Indicate county of residence of participant.	parentinterpretshare.interpretation  Data Entry Type: Drop Down, Yes No  Yes indicates that the Participant required an interpreter or bilingual staff to participate in programming. This could be for ASL, Spanish, or any language other than English.  No, indicates that the participant has sufficient comfort and fluency to receive programming verbally in spoken English.	

	Dosage & Delive	ry		Referrals				
Recruitment Other Text	# of Sessions Supporting this Parent this FY	# of Sessions Supporting this Parent to Date	Indicate the Delivery Mode of Sessions	Referrals Received	Number of Service Referrals Received by this Parent to Date	Number of Service Referrals this FY for which the Parent has or is currently receiving services	Number of Service Referrals this FY for Health Services	Number of Service Referrals this FY for Basic Needs
_text	dosage_delivery.num ber_of_sessions Data Entry Type: Whole Number, Max Value 12	r_sessions_to_date Data Entry Type: Whole	dosage_delivery.delivery_ mode Data Entry Type: Drop Down, Only Virtual Only In- Person Hybrid (a mix of in- person and virtual sessions)	ceived_this_fy  Data Entry Type:  Whole Number, Max	Data Entry Type: Whole Number, Max Value 100  This FY and previous FYs, if data is available	referrals.num_ref_curre ntly_receiving Data Entry Type: Whole Number, Max Value 100  Of the referrals made during this FY, for how many of those is the parent currently receiving services or has received services this FY?	_ref_this_fy	Data Entry Type: Whole Number, Max Value 100  Basic needs include food, clothing,

					Protective Factors Survey- 2 Pre					
Number of Service Referrals this FY for Parenting Education	Number of Service Referrals this FY for Finding Child care	Number of Service Referrals this FY for OTHER needed supports	Description of OTHER Referrals made	Number of services overall that parent participant was referred to and has used this FY or is currently used	Date of Assessment	Pre- Family Functioning / Resiliency	Pre- Nurturing & Attachment	Pre- Social Supports		
referrals.num_ref_pa rent_ed_this_fy Data Entry Type: Whole Number, Max Value 100  Parenting Education includes mentoring, support groups (COP, COSP, etc), parent education classes (NPP, Triple P, etc), parenting education home visiting (PAT, HFA, etc) and others.	referrals.num_ref_chi Id_care_this_fy Data Entry Type: Whole Number, Max Value 100  These should be referrals to the CCR&R system, either their online search portal or the 1- 800 number.	other_this_fy  Data Entry Type: Whole Number, Max Value 100  Any referrals that don't fall into the previous categories.	referrals.descrip tion_of_other_re ferrals_made Data Entry Type: Text  Please describe in just a few words the OTHER referrals made for this participant.	referrals.num_ref_overall _this_fy Data Entry Type: Whole Number, Max Value 100	protect_fact_2_pre.date_of _assessment Data Entry Type: Date, mm/dd/yyyy (month/day/year) Date of assessment must be this FY.	protect_fact_2_pre.pre_family_func_resil  Data Entry Type: Number, Max Value = 4  Subscale Average Scores will be a number 0-4 to hundredths place	_nurturing_attach Data Entry Type: Number, Max Value = 4	protect_fact_2_pre.pre_so cial_supports  Data Entry Type: Number, Max Value = 4  Subscale Average Scores will be a number 0-4 to hundredths place		

		<b>Protective Factors Surv</b>	Notes (Optional)				
Pre- Caregiver/Practitioner Relationship	Pre- Concrete Supports	Post- Family Functioning / Resiliency	Post- Nurturing & Attachment	Post- Social Supports	Post- Caregiver/Practitioner Relationship	Post- Concrete Supports (Blank if using retrospective)	Optional Notes
		protect_fact_2_post.post_family				protect_fact_2_post.post	
giver_prac_relations Data Entry Type: Number,	oncrete_supports Data Entry Type:	_func_resil Data Entry Type: Number, Max	_nurturing_attach Data Entry Type:	post_social_supports Data Entry Type:	n Data Entry Type:	_concrete_supports Data Entry Type:	notes.optional_notes Data Entry Type: Text.
Max Value = 4	Number, Max Value = 4	Value = 4	Number, Max Value = 4	Number, Max Value = 4	Number, Max Value = 4	Number, Max Value = 4	Data Littly Type. Text.
	Subscale Average	Subscale Average Scores will	Subscale Average		Subscale Average	*If using the retrospective	
will be a number 0-4 to hundredths place	Scores will be a number 0-4 to hundredths place	be a number 0-4 to hundredths place	Scores will be a number 0-4 to hundredths place	Subscale Average Scores will be a	Scores will be a number 0-4 to hundredths place		
manuroumo piaco	o i to nanaroatrio piaco	piaco	o i to manarounio piaco	number 0-4 to	o i to manaroanio piaco		
				hundredths place		Subscale Average Scores will be a number	
						0-4 to hundredths place	