

FSFN Page:	Intake
Tab Name:	N/A
Field Name:	R/T (Response Time)
	Immediate
	24 Hours

FSFN Page:	Roles Pop-up Page
Tab Name:	N/A
Field Name:	Roles
	Alleged Perpetrator
	Child In Home
	Household Member
	Intake Name
	Non-Household Member
	Parent/Caregiver
	Significant Other
	Victim

FSFN Page:	Disability Pop-up Page (for Adult Intakes – entered on the person management Disability/AFCARS tab)
Tab Name:	N/A
Field Name:	Disability
	Autism
	Cerebral Palsy
	Deafness
	Emotional Disability/Dysfunction - Other
	Infirmities/Aging
	Mental Illness



	Mental Limitations-Other
	Organic Brain Damage
	Physical Brain Damage
	Physical Limitations-Other
	Prader-Willi Syndrome
	Retardation
	Spina Bifida

FSFN Page:	Intake
Tab Name:	Participants - Reporter Expando
Field Name:	Report Method
	Fax
	Phone
	Web

FSFN Page:	Intake
Tab Name:	Participants - Reporter Expando
Field Name:	Reporter Type
	Anonymous
	Attorney
	Babysitter
	Bank/Credit Union/S&L Employee/Trustee
	Caregiver
	CBC employee
	Clergy
	Court Personnel
	Day Care Owner/Employee
	Department Employee
	Dept. of Business & Prof. Reg. Employee



	DJJ/DOC/Criminal Justice Personnel
	Florida Local Advocacy Council/Client Relations Coordinator
	Guardian
	Guardian ad Litem
	Hospital Social Worker
	Institution Employee
	Judge
	Law Enforcement
	Long Term care Ombudsman Council
	Medical Examiner
	Mental Health Personnel
	Medical Personnel
	Neighbor/Friend
	Nurse
	Nursing Home/ALF/AFCH Staff
	Other
	Other Health/Mental Health Professional
	Other School Staff
	Paramedic/EMT
	Parent
	Physician
	Principal/Asst Principal
	Relative
	School Counselor/Social Worker
	School Nurse
	Social Services Personnel
	Private Agency Social Service Staff
	Spiritual Healer
	Teacher



	Victim
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FSFN Page:	Intake
Tab Name:	Participants Reporter Expando
Field Name:	Suffix
	Jr.
	Sr.
	II
	III
	IV
	V
	VI

FSFN Page:	Intake
Tab Name:	Relationship
Field Name:	Relationship
	Adoptive Parent - Non-Finalized Adoption
	Approved Non-Relative Caregiver
	Approved Relative Caregiver
	Attorney
	Aunt
	Aunt-Maternal
	Aunt-Paternal
	Brother
	Brother-Half
	Brother-Step
	Cousin
	Cousin-Maternal
	Cousin-Paternal



	Daughter
	Daughter-Step
	DCF Employee - Not Institution
	Facility Staff
	Father
	Father – Adoptive
	Father – Birth
	Father – Legal
	Father – Prospective
	Father – Step
	FS Employee/ Designee
	Granddaughter
	Grandfather
	Grandfather Maternal
	Grandfather-Paternal
	Grandmother
	Grandmother-Maternal
	Grandmother-Paternal
	Grandson
	Guardian/Custodian-Not Parent
	Husband
	Licensed Family Shelter/Foster Parent
	Mother
	Mother- Adoptive
	Mother – Birth
	Mother-Step
	Nephew
	Nephew-Maternal
	Nephew-Paternal



	Niece
	Niece - Maternal
	Niece - Paternal
	Other-Maternal Relative
	Other-Non-Relative
	Other-Paternal Relative
	Other-Relative
	Paramour
	Paramour-Parent/Caregiver
	School Personnel/Teacher
	Sister
	Sister-Half
	Sister-Step
	Sitter
	Son
	Son-Step
	Uncle
	Uncle-Maternal
	Uncle-Paternal
	Unknown
	Wife

FSFN Page:	Intake
Tab Name:	Allegations
Field Name:	Investigative Sub Type
	In-Home
	Institutional
	Other



FSFN Page:	Intake
Tab Name:	Allegations Pop-up Page
Field Name:	Maltreatment Code
	Child Intake Maltreatments
	Abandonment
	Asphyxiation
	Bizarre Punishment
	Bone Fracture
	Burns
	Death
	Environmental Hazards
	Failure to Protect
	Failure to Thrive/ Malnutrition/ Dehydration
	Failure to Thrive (Inactive)
	Family Violence Threatens Child (Inactive)
	Household Violence Threatens Child
	Human Trafficking - CSEC
	Human Trafficking - Labor
	Inadequate Supervision
	Internal Injuries
	Intimate Partner Violence Threatens Child
	Malnutrition/Dehydration (Inactive)
	Medical Neglect
	Mental Injury
	Physical Injury
	Sexual Abuse - Sexual Battery
	Sexual Abuse - Sexual Exploitation by Parent/Legal Guardian



	Sexual Abuse - Sexual Molestation
	Substance Exposed Newborn
	Substance Misuse
	Substance Misuse – Alcohol
	Substance Misuse - Illicit Drugs
	Substance Misuse - Prescription Drugs
	Threatened Harm
	Adult Intake Maltreatments
	Asphyxiation
	Bone Fracture
	Burns
	Caregiver Unavailable
	Confinement / Bizarre Punishment
	Death
	Environmental Hazards
	Exploitation
	Inadequate Supervision
	Internal Injuries
	Malnutrition/Dehydration
	Medical Neglect
	Mental Injury
	Physical Injury
	Self Neglect
	Sexual Abuse
	Substance Misuse



FSFN Page:	Intake
Tab Name:	Decision
Field Name:	Reason
	When Screen In radio button is selected
	Screen In - CA/N Non-Caregiver
	Screen In - CA/N Primary Caregiver
	Screen In - CA/N Secondary Caregiver
	Screen In - Accepted for Services/Investigation
	When Screen Out radio button is selected
	Alleged Juvenile Sexual Offender between age 13 - 17
	Caregiver Statutory Guidelines not Met
	Created In Error
	DJJ
	Does Not Rise to the level of Reasonable Cause to Suspect
	No Means to Locate
	Out of State Inquiry
	Victim Statutory Guidelines not Met

FSFN Page:	Intake
Tab Name:	Decision
Field Name:	Primary Language
	Albanian
	American Sign Language
	Arabic
	Cambodian
	Chinese
	Creole
	English
	Farsi



	Filipino
	French
	German
	Greek
	Haitian
	Hmong
	Hungarian
	Iranian
	Italian
	Japanese
	Korean
	Kosovarian
	Laotian
	Latvian
	Lithuanian
	Native American
	Other
	Other Indo European
	Polish
	Portuguese
	Russian
	Somali
	Spanish
	Spanish/English Bilingual
	Telecommunications Device for the Deaf
	Thai
	Unknown
	Vietnamese



FSFN Page:	Intake
Tab Name:	Special Conditions
Field Name:	Special Conditions
	Caregiver Unavailable
	Child on Child Sexual Abuse
	Foster Care Referral
	Parent in need of Assistance

FSFN Page:	Intake
Tab Name:	Services
Field Name:	Services Referral
	DJJ
	Family Support
	ICPC
	ICPC - Priority
	Out-of-State Request
	Re-Open Closed Case For Administrative Purposes
	Relinquished Infant
	Request from Adoptive Parent
	Rule Violation
	Supervision Reinstated

FSFN Page:	Intake
Tab Name:	Create Person
Field Name:	Suffix
	Jr.



	Sr.
	II
	III
	IV
	V
	VI



FSFN Page:	Intake
Tab Name:	Create Person
Field Name:	Gender
	Female
	Male
	Unknown

FSFN Page:	Intake
Tab Name:	Create Person
Field Name:	Race
	American Indian/Alaskan Native
	Asian
	Black/African American
	Declined
	Multi-Race
	Multi-racial-one or more races not known
	Native Hawaiian/Other Pacific Islander
	Unable to Determine
	Unknown
	White

FSFN Page:	Intake
Tab Name:	Create Person
Field Name:	Ethnicity
	African American/Black
	Arabic
	Asian Indian



	Cambodian
	Chinese
	Cuban
	Declined
	Eastern European
	Filipino
	German
	Haitian
	Hispanic/Latino
	Hmong
	Italian
	Japanese
	Korean
	Laotian
	Mexican/Chicano/Mexican American
	Multi-Ethnicity
	Other
	Other Southeast Asian
	Puerto Rican
	Russian
	Thai
	Unable to Determine
	Unknown
	Vietnamese

