



Child Care and Development Fund  
ACF-801 Case-Level Data Standards

*Technical Bulletin #3*  
*REVISED: May 8, 1998*

---

**Note:** This Technical Bulletin lists the data standards for the ACF-801 Child Care Quarterly Case Record Form prior to the recent changes in reporting requirements. [Technical Bulletin #3r \(Revised\)](#) now includes the revised data standards for submitting the ACF 801 Child Care Quarterly Case Record form.

This Technical Bulletin lists the data standards for the ACF-801 Child Care Quarterly Case Record Form. This Form, which is submitted by States and Territories to the Child Care Bureau, includes key case-level data required by the Personal Responsibility and Work Opportunity Reconciliation Act of 1996. The data standards described here serve as the principal guideline to identify errors in Case-Level data. The submitting State or Territory must correct data that fail to meet these data standards.

The data standards for each item required in the ACF-801 are found in the table starting on page 2. The table's six columns are:

- I., II. Data Element # and Name:** The first two columns list the number and name of each item that must be reported. Each item is referenced by the intersection of the applicable row in the ACF-801 Child Care Quarterly Case Record Form (see Appendix A). For example, the first item of the table, "1. Sample Month/Year of Report Period", is the date of the reporting period. It is located in Section I, row 1 of the ACF-801 form.
- III. Field Size:** The third column lists the size (number of digits or characters) of the data element. Any response that does not use all of the available digits should be right aligned and padded with zeroes. For example, for the seventh row of the table, item "7", the Field Size is 4. If the value were \$150, it would be entered as 0150 so that it contained 4 digits.
- IV. Missing Data Standard:** The fourth column indicates whether or not the data element is required to be reported.
- V. Out of Range Standard:** The fifth column indicates the acceptable range of values for the data. All values must occur within this range. For example, for the fifth row of the table, element "6: Reason for Receiving Subsidized Care", the value must occur within the range of 1 to 5. Values less than 1 or greater than 5 are in error.
- VI. Internal Consistency Standard:** The sixth column lists the standards for consistency among related elements. All of these standards are intuitively logical relationships. For example, the value of element "1. Sample Month/Year of Report Period" must be later than or equal to the value of elements number 8 (Month/Year Child Care Assistance Started) and 24 (Month/Year of Birth).

**Section I. HEAD OF FAMILY UNIT**

| # | Data Element Name   | Field Size | Missing Data Standard | Out-of-Range Standard  | Internal Consistency Standard  |
|---|---|------------|-----------------------|--|--|
| 1 | Sample Month/Year of Report Period                            | 6          | Always required.      | Format YYYYMM:<br>1998 <= YYYY <= current year<br><br>01 <= MM <= 12<br>(for 1998 04 <= MM <= 12). | This Element must be:<br>- later than or equal to the date entered in Element 8 (Month/Year Child Care Assistance Started)<br>- later than or equal to the date entered in Element 24 (Month/Year of Birth). |
| 2 | Unique Identification Case Number ( <i>Optional Element</i> ) | 15         | Not required.         | All characters allowed.  | No internal consistency standard.  |
| 3 | Social Security Number  | 9          | Always required       | All valid SSN's allowed.<br>--if child SSN, then all characters allowed                            | If the answer to Element #5 (Single Parent) = 9, then Element #3 (Head of Household SSN) must equal Element #16 (Child SSN).   |
| 4 | FIPS Code   | 5          | Always required.      | Valid 5 digit FIPS code.   | No internal consistency standard.  |

**Section I. HEAD OF FAMILY UNIT**

| # | Data Element Name                            | Field Size | Missing Data Standard                  | Out-of-Range Standard  | Internal Consistency Standard   |
|---|--|------------|--|--|---|
| 5 | Single Parent                                | 1          | Always required.                       | 0 - 1, 9:<br>0 = No;<br>1 = Yes<br>9 = Not applicable; child is reported as head of household.   | If this Element is coded 9, then the following internal consistencies must hold:<br>-Element #3 (Head of Household SSN) must equal Element #16 (Child SSN).<br>-Element #6 (Reason for Receiving Care) is equal to 4 (protective services). |
| 6 | Reason for Receiving Subsidized Child Care   | 1          | Always required.                       | 1 - 5:<br>1 = Employment, including on-the-job training;<br>2 = Training/Education;<br>3 = Both Employment and Training/Education;<br>4 = Protective Services;<br>5 = Other. | No internal consistency standard.   |
| 7 | Total Monthly Child Care Copayment by Family | 4          | Required if Element #6 is 1, 2, 3 or 5 | 0 - 1000   | This field must be:<br>- less than the sum of Element #26 (Total Expected Dollar Amount per Month to be Received by the Provider) for all the children in the family<br>- less than or equal to Element #9 (Total Monthly Income)           |

**Section I. HEAD OF FAMILY UNIT**

| # | Data Element Name                                  | Field Size | Missing Data Standard | Out-of-Range Standard  | Internal Consistency Standard  |
|---|--|------------|-----------------------|--|--|
| 8 | Month/Year Child Care Assistance to Family Started | 6          | Always required.      | Format YYYYMM:<br>1970 <= YYYY <= current year<br><br>01 <= MM <= 12 | This field must be earlier than or equal to the date entered in the Element #1 (Sample Month/Year of Report Period). |

**Section II. FAMILY RECEIVING ASSISTANCE INCOME BY SOURCE**

| <b>#</b> | <b>Data Element Name</b>  | <b>Field Size</b> | <b>Missing Data Standard</b>           | <b>Out-of-Range Standard</b>                   | <b>Internal Consistency Standard</b>  |
|----------|---|-------------------|--|--|---|
| 9        | Total Monthly Income for Determining Eligibility  | 5                 | Required if Element #6 is 1, 2, 3 or 5 | 0 - to maximum allowed in state look up table. | This field must be greater than or equal to the amount entered in Element #7 (Total Monthly Child Care Copayment for the Family). |
| 10       | Employment Income, Including Self - Employment (Yes/No)                                     | 1                 | Required if Element #6 is 1, 2, 3 or 5 | 0 - 1:<br>0 = No;<br>1 = Yes.                  | No internal consistency standard.   |
| 11       | Cash or Other Monetary Assistance under Title IV of the Social Security Act (TANF) (Yes/No) | 1                 | Required if Element #6 is 1, 2, 3 or 5 | 0 - 1:<br>0 = No;<br>1 = Yes.                  | No internal consistency standard.   |

**Section II. FAMILY RECEIVING ASSISTANCE INCOME BY SOURCE**

| #  | Data Element Name   | Field Size | Missing Data Standard                  | Out-of-Range Standard         | Internal Consistency Standard     |
|----|---|------------|--|-------------------------------|-----------------------------------|
| 12 | State Program for Which State Spending is Counted Towards TANF MOE (Yes/No) | 1          | Required if Element #6 is 1, 2, 3 or 5 | 0 - 1:<br>0 = No;<br>1 = Yes. | No internal consistency standard. |
| 13 | Housing Voucher or Cash Assistance (Yes/No)                                 | 1          | Required if Element #6 is 1, 2, 3 or 5 | 0 - 1:<br>0 = No;<br>1 = Yes. | No internal consistency standard. |
| 14 | Assistance under the Food Stamps Act of 1977 (Yes/No)                       | 1          | Required if Element #6 is 1, 2, 3 or 5 | 0 - 1:<br>0 = No;<br>1 = Yes. | No internal consistency standard. |
| 15 | Other Federal Cash Income (for Example SSI) (Yes/No)                        | 1          | Required if Element #6 is 1, 2, 3 or 5 | 0 - 1:<br>0 = No;<br>1 = Yes. | No internal consistency standard. |

**Section III. DEPENDENT CHILDREN RECEIVING CHILD CARE<sup>1</sup>**

| #  | Data Element Name   | Field Size | Missing Data Standard  | Out-of-Range Standard       | Internal Consistency Standard   |
|----|---|------------|--|-----------------------------|---|
| 16 | Child Social Security Number<br><i>(Optional Element)</i> | 9          | Not required   | All characters allowed.     | If the answer to Element #5 = 9, then Element #3 (Head of Household SSN) must equal Element #16 (Child SSN).  |
| 17 | Hispanic or Latino (Ethnicity)                            | 1          | Phased-in Requirement<br><i>Before FY 2000:</i><br><br>(See Internal Consistency Standard)<br><br><i>Effective FY 2000:</i> Always required. | 0 - 1:<br>0 = No<br>1 = Yes | <i>Before FY 2000:</i> At least one of Elements #17 through #22 must be answered "Yes" (equal to 1).<br><br><i>FY 2000 and After:</i> No internal consistency standard. |

<sup>1</sup> Elements #16 through #27 are coded for each child receiving Child Care assistance.

**Section III. DEPENDENT CHILDREN RECEIVING CHILD CARE<sup>1</sup>**

| #  | Data Element Name                        | Field Size | Missing Data Standard  | Out-of-Range Standard                  | Internal Consistency Standard  |
|----|--|------------|--|--|--|
| 18 | American Indian or Alaskan Native (race) | 1          | <p>Phased-in Requirement<br/><i>Before FY 2003:</i></p> <p>(See Internal Consistency Standard)</p> <p><i>Effective FY 2003:</i> Always required.</p> | <p>0 - 1:<br/>0 = No;<br/>1 = Yes.</p> | <p><i>Before FY 2000:</i> At least one of Elements #17 through #22 must be answered "Yes" (equal to 1).</p> <p><i>FY 2000 and After:</i> At least one of Elements #18 through #22 must be answered "Yes" (equal to 1).</p> |
| 19 | Asian (race)                             | 1          | <p>Phased-in Requirement<br/><i>Before FY 2003:</i></p> <p>(See Internal Consistency Standard)</p> <p><i>Effective FY 2003:</i> Always required.</p> | <p>0 - 1:<br/>0 = No;<br/>1 = Yes.</p> | <p><i>Before FY 2000:</i> At least one of Elements #17 through #22 must be answered "Yes" (equal to 1).</p> <p><i>FY 2000 and After:</i> At least one of Elements #18 through #22 must be answered "Yes" (equal to 1).</p> |



**Section III. DEPENDENT CHILDREN RECEIVING CHILD CARE<sup>1</sup>**

| #  | Data Element Name                                | Field Size | Missing Data Standard  | Out-of-Range Standard                  | Internal Consistency Standard  |
|----|--|------------|--|--|--|
| 20 | Black or African American (race)                 | 1          | <p>Phased-in Requirement<br/><i>Before FY 2003:</i></p> <p>(See Internal Consistency Standard)</p> <p><i>Effective FY 2003:</i> Always required.</p> | <p>0 - 1:<br/>0 = No;<br/>1 = Yes.</p> | <p><i>Before FY 2000:</i> At least one of Elements #17 through #22 must be answered "Yes" (equal to 1).</p> <p><i>FY 2000 and After:</i> At least one of Elements #18 through #22 must be answered "Yes" (equal to 1).</p> |
| 21 | Native Hawaiian or Other Pacific Islander (race) | 1          | <p>Phased-in Requirement<br/><i>Before FY 2003:</i></p> <p>(See Internal Consistency Standard)</p> <p><i>Effective FY 2003:</i> Always required.</p> | <p>0 - 1:<br/>0 = No;<br/>1 = Yes.</p> | <p><i>Before FY 2000:</i> At least one of Elements #17 through #22 must be answered "Yes" (equal to 1).</p> <p><i>FY 2000 and After:</i> At least one of Elements #18 through #22 must be answered "Yes" (equal to 1).</p> |

**Section III. DEPENDENT CHILDREN RECEIVING CHILD CARE<sup>1</sup>**

| #  | Data Element Name | Field Size | Missing Data Standard  | Out-of-Range Standard              | Internal Consistency Standard   |
|----|-------------------|------------|--|------------------------------------|---|
| 22 | White (race)      | 1          | Phased-in Requirement<br><i>Before FY 2003:</i><br><br>(See Internal Consistency Standard)<br><br><i>Effective FY 2003:</i> Always required. | 0 - 1:<br>0 = No;<br>1 = Yes.      | <i>Before FY 2000:</i> At least one of Elements #17 through #22 must be answered "Yes" (equal to 1).<br><br><i>FY 2000 and After:</i> At least one of Elements #18 through #22 must be answered "Yes" (equal to 1). |
| 23 | Child Gender      | 1          | Always required.   | 1 - 2:<br>1 = Male;<br>2 = Female. | No internal consistency standard.   |

**Section III. DEPENDENT CHILDREN RECEIVING CHILD CARE<sup>1</sup>**

| #  | Data Element Name   | Field Size | Missing Data Standard | Out-of-Range Standard  | Internal Consistency Standard   |
|----|---------------------|------------|-----------------------|--|---|
| 24 | Month/Year of Birth | 6          | Always required.      | Format YYYYMM:<br>01 <= MM <= 12<br><br>current year - Maximum age of child from State look-up table <= YYYY <= current year | This Element must be earlier than or equal to the date entered in Element # 1 (Sample Month/Year of Report Period). |

**Section III. DEPENDENT CHILDREN RECEIVING CHILD CARE<sup>1</sup>**

| #  | Data Element Name  | Field Size | Missing Data Standard | Out-of-Range Standard  | Internal Consistency Standard     |
|----|--------------------|------------|-----------------------|--|-----------------------------------|
| 25 | Type of Child Care | 2          | Always required.      | 01 - 11:<br>01=Licensed/regulating in-home child care;<br>02=Licensed/regulating family child care;<br>03=Licensed/regulating group home child care;<br>04=Licensed/regulating center-based care;<br>05=Legally operating in-home care provided by a non-relative;<br>06=Legally operating in-home care provided by a relative;<br>07=Legally operating family child care provided by a non-relative;<br>08=Legally operating family child care provided by a relative;<br>09=Legally operating group home child care provided by a non-relative;<br>10=Legally operating group home child care provided by a relative;<br>11=Legally operating center-based care. | No internal consistency standard. |

**Section III. DEPENDENT CHILDREN RECEIVING CHILD CARE<sup>1</sup>**

| #  | Data Element Name   | Field Size | Missing Data Standard | Out-of-Range Standard                                | Internal Consistency Standard     |
|----|---|------------|-----------------------|--|-----------------------------------|
| 26 | Total Expected Dollar Amount per Month to be Received by the Provider | 4          | Always required.      | 0 - 1000   | No internal consistency standard. |
| 27 | Total Hours of Child Care During the Month                            | 3          | Always required.      | 1 - (12 times the number of days in reporting month) | No internal consistency standard. |

