

CSI PERIODIC DATA

Confidential Patient Information
See Welfare & Institutions Code:5328

PLEASE Print Legibly

1: Periodic date completed: ___ / ___ / _____

4: Employment Status: ___

2: Education : ___

5: Axis 5: **Field not used**

3: Other Factors: **Field not used**

6: Legal Consent: ___

7: Living Situation: ___

8: Care Giver Under 18: ___ Over 18: ___

CSI Reported date: **Display only**

CSI Periodic Codes

2: **Education** - Enter in the number indicating the **highest grade** completed. If the highest grade is greater than 20, enter "20", if the highest grade is unknown then enter "99".

4: **Employment Status**

01	Competitive job market, 35 hours or more per week	07	Rehabilitative work, 20 to 35 hours per week	13	Unemployed, not actively seeking work
02	Competitive job market, less than 20 hours per week	08	School, full-time	14	Retired
03	Competitive job market, 20 to 35 hours per week	09	Job training, full-time	15	Not in the labor force
04	Full-time home making responsibility	10	Part time school / job training	16	Unknown
05	Rehabilitative work, 35 hours or more per week	11	Volunteer work	17	Resident / Inmate
06	Rehabilitative work, less than 20 hours per week	12	Unemployed, actively seeking work		

6: **Legal Consent**- Indicate what authority you have to treat minors.

0	Unknown	C	Murphy Conservatorship	G	Juvenile Court, Dependent of Court
9	Not Applicable	D	Probate	H	Juvenile Court, Ward Status Offender
A	Temporary	E	PC 2974	I	Juvenile Court, Ward Juvenile Offender
B	Lanterman-Petris-Short	F	Representative Payee w/out Conservator		

7: **Living Situation**

05	Foster family home (for children)	20	Small Board & Care home (6 beds or less)	36	Mental Health Rehabilitation Center
06	Single room (motel, rooming house)	21	Large Board & Care home (7 beds or more)	37	PHF/Inpatient Psych
07	Group quarters (dorm, migrant barracks)	22	Residential Treatment Center	40	Drug Abuse Facility
08	Group home	23	Community Treatment Facility	41	Alcohol Abuse Facility
09	CRT's long-term or transitional housing	24	Adult Residential / Social Rehabilitation	42	Justice Related
10	Satellite housing	31	State Hospital	50	Temporary Arrangement
13	House or Apartment	32	VA Hospital	51	Homeless, no identifiable county residence
14	House or Apt. w/support	33	SNF/ICF/IMD, for psychiatric reasons	52	Homeless, in transit
15	House or Apt. w/supervision	34	SNF/ICF/Nursing home for physical health reasons	98	Other
16	Supported housing	35	General hospital	99	Unknown

8: **Care Giver**- Enter the number of persons the client cares for or is responsible for at least 50% of the time, under the age of 18 and over the age of 18.

00	None	1-98	Number of Persons	99	Unknown
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Completed by: _____ Date: _____

Input by: _____ Date: _____