	ADS / GetCare Data Cross-Walk S Updated	May 2023		
Field	Data Type, Codes and Max Length	ADS Description/Example	GetCare Description/Example	
Client ID	text = 15 characters	Unique identification number assigned	GetCare ID assigned by GetCare	
		by agency	System	
Last Name First Name	text - 20 characters text - 15 characters	Smith Jonathan	Smith Jonathan	
Middle Name	text - 15 characters	William	Jonathan	
Street Address	text - 255 characters	511 15th Avenue S	511 15th Avenue S	
City	text - 35 characters	Federal Way	Federal Way	
Zio Code	text - 5 characters	98104	98104	
Date of birth	Date - mm/dd/yyyy	Example: 1/30/1928	Example: 1/30/1928	
Race	Integer 0	What is the client's race?	*Race (Check all that apply) Unknown	
	1	Unknown American Indian or Alaska Native	American Indian/Alaska Native	
	2	Asian, Asian American	Asian	
	3	Black, African, African-American	Black/African American	
	4	Hawaiian Native or Pacific Islander	Native Hawaiian/Other Pacific Islan	
			140-14-	
	6 7	White Other	White If have Other identified select	
	,	Other	Ethnicity, if not Leave Blank	
	8	Multi-Racial	Check all that apply	
			Declined to State	
thnicity	Text	What is the client's ethnicity?	*Ethnicity (Choose the correspond ethnicity from list if known)	
	U	Unknown	Leave Blank	
	v v	Hispanic or Latino	Hispanic or Latino	
	n	Not Hispanic or Latino	(is required if known and is the onl way to capture in GetCare)	
nrome		are being updated in GetCare to improv	e recording options for Latino/Hisp At or below 100% Federal Poverty	
ncome	Integer	See Income Guidelines for corresponding \$ amounts	At or below 100% Federal Poverty Level	
	0	Unknown	Declined to State Income	
	1	Very Low (< 30% Median)	Yes	
	2	Low (< 50% Median)	No	
	3	Moderate (< 80% Median)	No	
ive Alone	4 Text	Above Moderate (> 80% Median) Does the client live alone?	No	
IVE Alone	Text	Does the client live alone?	Household Composition (Lives Ale	
	u	Unknown	Declined to State	
	v	Yes	Lives Alone	
	n	No	Other	
		No	Institutionalized	
	1	No No	With Domestic Partner With Non-Relative(s)	
	0	No.	With Other Relative(s)	
		No	With Parent(s)	
	n	No	With Spouse	
iender	Text	What is the client's gender?	Sex/Gender	
	u	Unknown	Declined to Disclose	
	f m	Female Male	Female Male	
		Other (e.e. transgender)	Other	
imited English	Text	Does the client have limited	English Fluency	
		proficiency in English?		
	u y	Unknown Yes	Declined to state Needs Translation	
		No	Fluent	
		1	Limited	
isability Status	Text	Does the client have a disability?	Disability Type	
	u	Unknown	Declined to State	
	Y	Yes	Physical Disability	
		No	No Disability Intellectual/Developmental disabi	
	Y	Yes	Intellectual/Developmental disabi (ID/DD)	
	· ·	Yes	Mental illness	
	Y	Yes	Traumatic brain injury	
	y	Yes	Dementia	
	· · ·	Yes	Memory Loss	
omeless	Text	Yes Is the client homeless or living in	Other, specify Homeless?	
commences	Text	ts the client homeless or living in temporary shelter?	nomeress?	
		The state of the s	Unknown	
	u	Unknown		
	u v	Unknown Yes	Yes	
	v n	Yes No	No	
eteran	n Text	No Is the client a veteran?	No Veteran	
'eteran	y n Text	Yes No Is the client a veteran? Unknown	No Veteran Declined to State	
eteran	n Text	Yes No Is the client a veteran? Unknown Yes	No Veteran Declined to State Veteran	
	y n Text	Yes No Is the client a veteran? Unknown Yes No	No Veteran Declined to State Veteran No At High Nutritional Risk	
	v n Text u y	Yes No Is the client a veteran? Unknown Yes	No Veteran Declined to State Veteran No At High Nutritional Risk (Enter in GetCare Nutritional Risk	
	y n Text u y n Text	Yes No Is the client a veteran? Unknown Yes No Client has received a score of 6 or evalue on Nutritional Fisis Screening tool.	No Veteran Declined to State Veteran No At High Nutritional Risk (Enter in GetCare Nutritional Risk Assessment)	
	y n Text u Y n Text	Yes No Is the client a veteran? Unknown Yes No Client has received a score of 6 or evester on Nutritional Bisk Screening tool. Unknown	No Veteran Declined to State Veteran No At High Nutritional Risk (Enter in GetCare Nutritional Risk assessment) Declined to State	
utritional Risk	y n Text u y n Text	Yes. No E the client a veteran? Unknown Yes No. Claes has received a score of 6 or enuter. on hartiflened Bisk Screening tool. Unknown Yes. No. No. No. No.	No Veteran Declined to State Veteran No At High Nutritional Risk (Enter in GetCare Nutritional Risk Assessment) Declined to State Yes No	
utritional Risk	y n Text U Y n Text U Y n Text	Yes. No st the client a veteran? Unknown Yes No Cherchian sectoral across of 6 or greater, on Northineal Biol Screening tool, Unknown Yes	No Veteran Declined to State Veteran No At High Nutritional Risk (Enter in GetCare Nutritional Risk Assessment) Declined to State Yes No Urban/Rural (Auto-populates bas	
utritional Risk	y n Text U Y n Text U Y n Text	Yes. No E the client a veteran? Unknown Yes No. Claes has received a score of 6 or enuter. on hartiflened Bisk Screening tool. Unknown Yes. No. No. No. No.	No Veteran Declined to State Veteran No At High Nutritional Risk (Enter in GetCare Nutritional Risk Assessment) Declined to State Yes No Urban/Rural (Auto-populates bas on Zip code)	
utritional Risk	y n Text U Y n Text U Y n Text	Yes. No E the client a veteran? Unknown Yes No. Claes has received a score of 6 or enuter. on hartiflened Bisk Screening tool. Unknown Yes. No. No. No. No.	No Veteran Declined to State Veteran No At High Nutritional Risk (Enter in GetCare Nutritional Risk Octional State Viss No Urban/Rural (Auto-populates bas on Zip code) Rural	
utritional Risk	y n Text U Y n Text U Y n Text	Yes In the client a veteran? Underson See	No Veteran Declined to State Veteran No At High Nutritional Risk (Enter in GetCare Nutritional Risk Assessment) Declined to State Yes No Urban/Rural (Auto-populates bas on Zip code) Rural Urban/Rural	
utritional Risk	y n Text U Y n Text U Y n Text	Yes In the client a vetteran? In the client a vetteran? Yes No Undersoon In the control of a resident on the control of a resident on the control of a resident on the control of th	No Veteran Declined to State Veteran No At High Nutritional Risk (Enter in GetCare Nutritional Risk Octional State Viss No Urban/Rural (Auto-populates bas on Zip code) Rural	
utritional Risk	Y CONTROL OF THE STATE OF THE S	Yes Ne Client a vetteran? Underson No. The Client a vetteran? No. Distribution of the Client and the Clie	No Vesteran Declined to State Vesteran No All Article in discharge Nutritional Risk Alazza in discharge Nutritional Risk Assessment No No Urban/Rarai [Auto-populates base no Risk No Urban/Rarai [Auto-populates base no Risk No	
utritional Risk	V	Yes In the utilized a verticant? In the utilized a verticant? Yes No Characteristic and a verticant of the continue and the removal of the expedited and hardwards in this fermion a total. Yes No Outhor/Parent When is the assemble continued to the Coloniant of the Colon	No Declined to State Vesteran Declined to State Vesteran No At High Nutritional Risk Righter in GetCare Nutritional Risk Assissment) Declined to State Visc No Declined to State Visc No Declined to State Visc No Declined to state No Declined to state Declined to state Declined to state	
utritional Risk	y n n n n n n n n n n n n n n n n n n n	Yes Mind-Lines extense? Unincome Yes No. Mind-Lines and Assessed Assessed Mind-Lines and Assessed Assessed Mind-Lines and Assessed Assessed Mind-Lines and Assessed Assessed Unincome assessed What is the secual orientation of the Mind-Lines Mind-L	No Vesteran Declined to State Vesteran No At Figh Numfrisonal Risk Finite in Gesture truthional Risk Finite in Gesture truthional Risk Finite in Gesture truthional Risk Visi No Urban/Risral (Auto-populates bas on Ris code) Rural Urban/Rural (Auto-populates bas Gesture in Risral Declined to state Seaue Orientation Declined to state Besoue) Declined to state Besoue Declined to state	
utritional Risk	y ned Teel y ned Teel y ned Teel Ned Teel Ned Teel Ned Teel Ned	Yes. Medical everteran? Unknown Yes No. Medical everteran of a measure Medical everteran of the General everterance of the General everter	No Vesteran Declined to State Vesteran Vesteran Ar Figh Nutritional Risk Figh Fight Nutritional Risk Figh Figh Figh Figh Figh Figh Figh Figh	
utritional Risk	y n n n n n n n n n n n n n n n n n n n	Yes Mind-Lines extense? Unincome Yes No. Mind-Lines and Assessed Assessed Mind-Lines and Assessed Assessed Mind-Lines and Assessed Assessed Mind-Lines and Assessed Assessed Unincome assessed What is the secual orientation of the Mind-Lines Mind-L	No Vesteran Declined to State Vesteran No At Figh Numfrisonal Risk Finite in Gesture truthional Risk Finite in Gesture truthional Risk Finite in Gesture truthional Risk Visi No Urban/Risral (Auto-populates bas on Ris code) Rural Urban/Rural (Auto-populates bas Gesture in Risral Declined to state Seaue Orientation Declined to state Besoue) Declined to state Besoue Declined to state	
utritional Risk	y ned Teel y ned Teel y ned Teel Ned Teel Ned Teel Ned Teel Ned	Yes. When Client a veteran? Unknown Yes No. No. No. No. No. No. No. No	No. Western 1. State Declined to State Declined to State No. At Figh No Nortificional Risk Extra 1. State Declined to State Declined to State No. Links Area (Muto-populates base Roral Roral Burst 1. State Declined to State Sexual Ordenstation Declined to State Sexual Ordenstation Declined to State Sexual Ordenstation Bissonal State 1. State Sexual Ordenstation Bissonal Little Constanting Little Con	
utritional Risk	y A Feet Y A Feet	Yes. When Client a veteran? Unknown Yes No. No. No. No. No. No. No. No	No. Vesteran I. State Oscilinate I State Oscilinate I State No. At High Nurtificional Risk (Risk et al. State) No. Oscilinate Indicates Intervitional Risk (Risk et al. State) No. Unban Rural (Auto-populates base No. Oscilinate I Oscilinate Risk et al. No. Oscilinate I Oscilinate Declinate I Ostate Sessual Offenstation Declinate I Ostate Bersoal Lestbern(Risk Lestbern(Risk)	
utritional Risk	Y Next	Yes. Man Clinica veteran? Onlinear Yes. No. Man Control of a manual of a manual control of the control	No Western Control States Vestern Control States Vestern Control States Vestern Control States As right Northood Risk Assessment Northood Risk Assessment Northood Risk Assessment Northood Risk Northood Northood Risk No	
Andrews Missississis Missississis Missississis Missississis Missississis Missississis Missississis Missississis Missississis Mississis Mississi Mississ	Total To	Yes. When Client a veteran? Unknown Yes No. No. No. No. No. No. No. No	No Western Control States Vestern Control States Vestern Control States Vestern Control States As right Northood Risk Assessment Northood Risk Assessment Northood Risk Assessment Northood Risk Northood Northood Risk No	

	4	Lesbian	Lesbian/Gay	
	5	Questioning	Questioning	
	6	Other	Leave Blank	
	ADS / GetCare Data Cross-W:	Ilk Specifications for ADLs & IADLs		
	Data Type, Codes and	T'		
Field	Maximum Length	ADS Data File Description/Example	GetCare Description/Example	
ADLs	Text	Does the client need help with the following Activities of Daily Living (ADLs)?	Activities of Daily Living (ADL)	
Eating		No.	1. Independent	
Eating		100	2. Minimum Assistance	
		Yes	3. Moderate Assistance	
			4. Maximum Assistance	
			5. Declined to State	
Foiletinz		No	Independent Minimum Assistance	
	v	Yes	Minimum Assistance Moderate Assistance	
			4. Maximum Assistance	
			5. Declined to State	
Walkinz		No	1. Independent	
			2. Minimum Assistance	
	Y	Yes	Moderate Assistance Maximum Assistance	
			5. Declined to State	
Fransferring	n	No	1. Independent	
		1	2. Minimum Assistance	
	v	Yes	3. Moderate Assistance	
		+	Maximum Assistance	
Dressinz	0	No	5. Declined to State 1. Independent	
Dressing		NO.	Ingependent Minimum Assistance	
		Yes	3. Moderate Assistance	
			4. Maximum Assistance	
			5. Declined to State	
Bathine	n	No	Independent	
		Yes	2. Minimum Assistance	
	Y	res	Moderate Assistance Maximum Assistance	
			5. Declined to State	
Med Mgmt	0	No	1. Independent	
			2. Minimum Assistance	
	У	Yes	3. Moderate Assistance	
			4. Maximum Assistance	
IADLs	Text	Does the client need help with the	5. Declined to State Instrumental Activities of Daily L	
AUG.	100.0	following Instrumental Activities of Daily Living (IADLs)?	(IADL)	
Cooking		No	1. Independent	
			2. Minimum Assistance	
	v	Yes	3. Moderate Assistance	
		_	Maximum Assistance Declined to State	
Shopping		No	Decined to State Independent	
snooding		NO .	2. Minimum Assistance	
		Yes	3. Moderate Assistance	
			4. Maximum Assistance	
			5. Declined to State	
Chores	n	No	1. Independent	
	y	Yes	Minimum Assistance Moderate Assistance	
	Y	res	Moderate Assistance Maximum Assistance	
			5. Declined to State	
Driving	0	No	1. Independent	
			2. Minimum Assistance	
	v	Yes	3. Moderate Assistance	
		+	Maximum Assistance Declined to State	
Heavy Housework		No	Declined to State Independent	
reave ribusework			Independent Minimum Assistance	
	Y	Yes	3. Moderate Assistance	
			4. Maximum Assistance	
		1	5. Declined to State	
Phoning		No	1. Independent	
	v	lu	Minimum Assistance Moderate Assistance	
		Yes		
	Y			
Money Mont	-		Maximum Assistance Declined to State	
Money Mamt	y n	No	5. Declined to State	
Money Mamt			Declined to State Independent Minimum Assistance	
Money Mamt		No Ves	5. Declined to State 1. Independent 2. Minimum Assistance 3. Moderate Assistance	
Money Mamt			Declined to State Independent Minimum Assistance	

ADS / GetCare Service Enrollment and Unit Information for Home Delivered									
ADS / GetCare Service Enrollment and ADS Previous Way of Recording Service				d Unit Information for Home Delivered GetCare Service Recording effective 10/1/2021					
ADS Service Type Code Unit Type Definition				GetCare Scope of Work GetCare Program (Funding) GetCare Service Detail Assessment Required in GetCare					
Home Delivered Meals	ni	Integer	Rogular home delivered meal	Home Delivered Meals	OAA TIIIC/SCSA/LOC	1 NSIP Meal	Nutrition risk (Score Only or At High Nutritional Risk located in Nutritional Risk Self Screening Section of Nutritional Assessment)		
							Functional Assessment (ADLs/IADLs)		
COPES Home Delivered Meals	n4	Integer	Retired (No longer in use effective 10/1/2021)						
Emergency Food Kit	n5	Integer	Retired (No longer in use effective 10/1/2021)						
Under Age 60 Home Delivered Meals	n6	Integer	Home delivered meal for clients under age 60	Home Delivered Meals	SBT/LOC	1 Meal HDM-under 60	None		
Produce Bag / Market Basket	n7	Integer	Supplemental produce bags	Produce Bag / Market Basket	SBT/LOC	1 unit	None		
Short-term / Transitional meal	n8	Integer	Hospital to home meals	Home Delivered Meals	SBT/VSHSL/LOC	1 Short-term/transitional meal	None		
CV-19 Response Groceries	n10	Integer	Retired (No longer in use effective 05/01/2023)						
CV-19 Response Home Delivered Meals	n11	Integer	Retired (No longer in use effective 05/01/2023)						
CV-19 COPES Home Delivered Meals	n12	Integer	Retired (No longer in use effective 10/1/2021)						
Groceries	n13	Integer	Ethnic grocery bags using SBT/VSHSL or other local funds	Grocery Bag	SBT/VSHSL/LOC	1 unit	None		
Service Month	Date - mm/dd/yyyy	Use first day of month for reporting period, e.g., 1/1/2016 S		Service Month	Date - mm/dd/yyyy	Use first day of month for rep	orting period, e.g., 01/01/2023		