



North Carolina Department of Health and Human Services

**DIVISION OF CHILD DEVELOPMENT**

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**SUBSIDIZED CHILD CARE SERVICES ADMINISTRATIVE LETTER No. 01-11**

**TO:** Directors of County Departments of Social Services and Local Purchasing Agencies

**FROM:** Deborah J. Cassidy, Ph.D. *Deborah J. Cassidy*

**ISSUED:** March 17, 2011

**SUBJECT:** Review, Revision and Update of Family Information in the Subsidized Child Care Reimbursement System

**EFFECTIVE DATE:** March 10, 2011

The purpose of this letter is to help Local Purchasing Agencies (LPAs) prepare for the implementation of the Subsidized Early Education for Kids (SEEK) system. As partners in the SEEK process, specific preparations by LPAs are necessary for the transition to SEEK. Following the steps that are provided in this letter will help LPA staff, parents and providers avoid confusion during the implementation process of SEEK. Immediate action on the steps is necessary now.

Parents will receive their magnetic stripe cards through the mail. Names and addresses for this mailing will be based on the family information section of the *Child Demographic Detail Screen* in the Subsidized Child Care Reimbursement System (SCCRS). All LPAs should conduct a thorough review to ensure that the name and mailing address information of all families is current, accurate and complete. Please do not abbreviate the name of the town or city and be careful to eliminate duplicate entries, if possible. Always include the family's phone number which will help with our automated telephone communication about the SEEK magnetic stripe card beginning April.

**Family Case Information**

At the implementation of SEEK Phase I, the *Family Case Name* field in the SCCR system will be translated into two new fields: a new **Case Unit Name** and the **Primary Authorized Cardholder**. Since the SCCR field is formatted slightly different from the new fields, it is necessary that all SCCR family case names follow a standard prescribed format to accommodate the translation of data from SCCR system to the SEEK system. Please ensure that all active family case names are entered as **FIRSTNAME LASTNAME**. Use only one space to separate the names and do not use commas. Be sure to follow one of the Alternate Name Formats presented below when a case head is identified with multiple names.

**Sample Entry on the Child Demographic Detail Screen:**

FIRSTNAME LASTNAME  
123 STREET ST  
ANYTOWN NC 12345  
TELEPHONE NUMBER (123) 333 – 4444

**Acceptable Alternate Name Formats:**

FIRST-MIDDLE LAST (hyphen only, and no space between First and Middle names)  
FIRST LAST-LAST  
FIRST LAST LAST

Note: Reading left to right; the name value entered **before the first space** will be identified as the cardholder's **first name** and the name or names value(s) entered **after the first space** will be identified as the cardholder's **last name**. Please be careful that you do not inadvertently enter two spaces between the first and last names. Be sure to hyphenate first-middle combinations so that the appropriate name value is recognized as the **last name**. You cannot use special characters or numbers in the *Family Case Name* field.

Two additional data items are now available in the **SCCRS Family Information** screen to facilitate the implementation of SEEK. These items are the "Family DOB" and the "Family SIS ID" (both apply to the parent or responsible adult named as the case head).

As you are reviewing the family case name data for accuracy, please also complete these fields. The family case head DOB (date of birth) field is especially important as the parent or responsible adult must use their DOB to pin or activate the magnetic stripe card used to record children's attendance. The Family SIS is not required. If one has not been assigned to the party named, please leave the field blank and SCCRCS will systematically create a unique identification number.

GHB7305M TRAINING SUBSIDIZED CHILD CARE REIMBURSEMENT		110317
03270004 CHILD DEMOGRAPHIC DETAIL		13:02:24
LAST NAME	WASHINGTON	FIRST NAME MANDY MI
DCS ID	20072708331	EIS ID EIS CASE
DOB	2007-07-04	SSN RACE U GENDER M
FAMILY LANGUAGE EN	ELIGIBILITY BEGIN 2010-03-18	END 2011-03-17
FAMILY CASE	556677	NO. RESPONSIBLE ADULTS 1 MONTHLY INCOME 1116
COUNTY	32 DURHAM	INCOME UNIT SIZE 2

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**FAMILY INFORMATION**

FAMILY CASE NO.	556677	FAMILY DOB	1976-07-04	FAMILY SIS ID	
FAMILY CASE NAME	MARY WASHINGTON				
CASE ADDRESS	10 CALVARY WAY				
CITY/STATE/ZIP	DURHAM NC 27704				
TELEPHONE NUMBER (WORKER CHILDREN)	(919) 555 - 5555 DSS999				

Be sure to include the family's telephone number.

Enter the date of birth of the person listed as the case head into "Family DOB".

This is a required field for all families participating in SEEK.

Provide the SIS number for the case head name, if one has been assigned; leave this field blank if there is no SIS or if it is unknown.

NOTES:

End \_ Update \_

Once corrections are made to the Family Information section, tab to the right of the UPDATE field, enter "Y", then press <ENTER>. The SCCRCS view returns to the *Child Demographic Detail Screen* with a message that the family record was successfully updated.

**Family Case Information for Department of Social Services (DSS) Custody**

When DSS has custody of foster children, the family case name in SCCRCS should be entered consistently by all county staff to ensure that the name values are translated properly into the correct **Case Unit Name**. Please enter the family case name as "County DSS Foster Care Unit" (i.e., Alamance DSS Foster Care Unit). Please pay particular attention that one space follows the county name and one space follows "DSS". The DSS mailing address should be used since the SEEK magnetic stripe cards for foster children will be mailed to the DSS Foster Care Unit. Please be sure to include the DSS area code and telephone number in the Family Information section.

See additional instructions and information in the sample below.

GHB7305M TRAINING SUBSIDIZED CHILD CARE REIMBURSEMENT 110317  
03270004 CHILD DEMOGRAPHIC DETAIL 13:11:31

LAST NAME WASHINGTON FIRST NAME MANDY MI  
DCS ID 20072708331 EIS ID EIS CASE  
DOB 2007-07-04 SSN RACE U GENDER M

FAMILY LANGUAGE EN ELIGIBILITY BEGIN 2010-03-18 END 2011-03-17  
FAMILY CASE 556678 NO. RESPONSIBLE ADULTS 1 MONTHLY INCOME 1116  
COUNTY 32 DURHAM INCOME UNIT SIZE 2

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FAMILY INFORMATION  
FAMILY CASE NO. 556678 FAMILY DOB 1976-07-04 FAMILY SIS ID  
FAMILY CASE NAME DURHAM DSS FOSTER CARE UNIT  
CASE ADDRESS 100 HOPE ST  
CITY/STATE/ZIP DURHAM NC 27704  
TELEPHONE NUMBER ( 919 ) 999 - 9999  
WORKER DSS001  
CHILDREN:

Leave Family SIS field blank for Foster Care cases.

The Director should select a date of birth that will be associated with all Foster Care cases, where the Family Case Name is "<County> Foster Care Unit". The DOB can be the Director's own, or may be any other date that will be easily remembered by DSS Foster Care workers.

A DOB that identifies the case head as a teenager or as a person 100 years old or older creates conflict with case identification procedures, and is therefore unacceptable.

NOTES: In DSS Custody cases, the Director's name must be entered on the Purchaser Update screen in SCCRS.

End Update

In DSS custody cases, data translation for SEEK will also require data entry of additional "person" information in order to create the Primary Authorized Cardholder information. The DSS Director's name is to be entered as the DSS Foster Care Responsible Adult. Entry of the Director's name will be performed on the SCCRS Purchaser Update screen, located under SCCRS Main Menu Option (9) Administrative Menu, Option (2) Purchaser Update. Please see the sample below.

GHB5601M TRAINING SUBSIDIZED CHILD CARE REIMBURSEMENT 03/17/11  
03270004 PURCHASER UPDATE 13:24:11

PURCHASER ID: 032  
PURCHASER NAME: DURHAM COUNTY  
ADDRESS 1: 1000 S. AVENUE ST PHONE: ( 919 ) 444 - 4444  
ADDRESS 2: EXT:  
CITY: DURHAM STATE NC ZIP 27703  
COURIER NO: 00 - 00 - 00

SMART START Y  
CLOSE OUT DATE: - -

CONTACT NAME 1: MARY BUTLER  
CONTACT NAME 2: ANNE CHARLES PHONE: ( 919 ) 444 - 4445  
EXT:

EMAIL ADDRESS:  
MBUTLER@DURHAMCOUNTYNC.GOV

PLEASE ENTER THE NAME OF THE DSS DIRECTOR IN YOUR COUNTY:  
FIRST.MI.LAST JAMES B DUKE

F KEYS: 1-Help 3-Exit 4-Main Menu  
GHB152- Successful Update.

In DSS Custody cases, the Director's name must be entered here on the Purchaser Update screen in SCCRS.

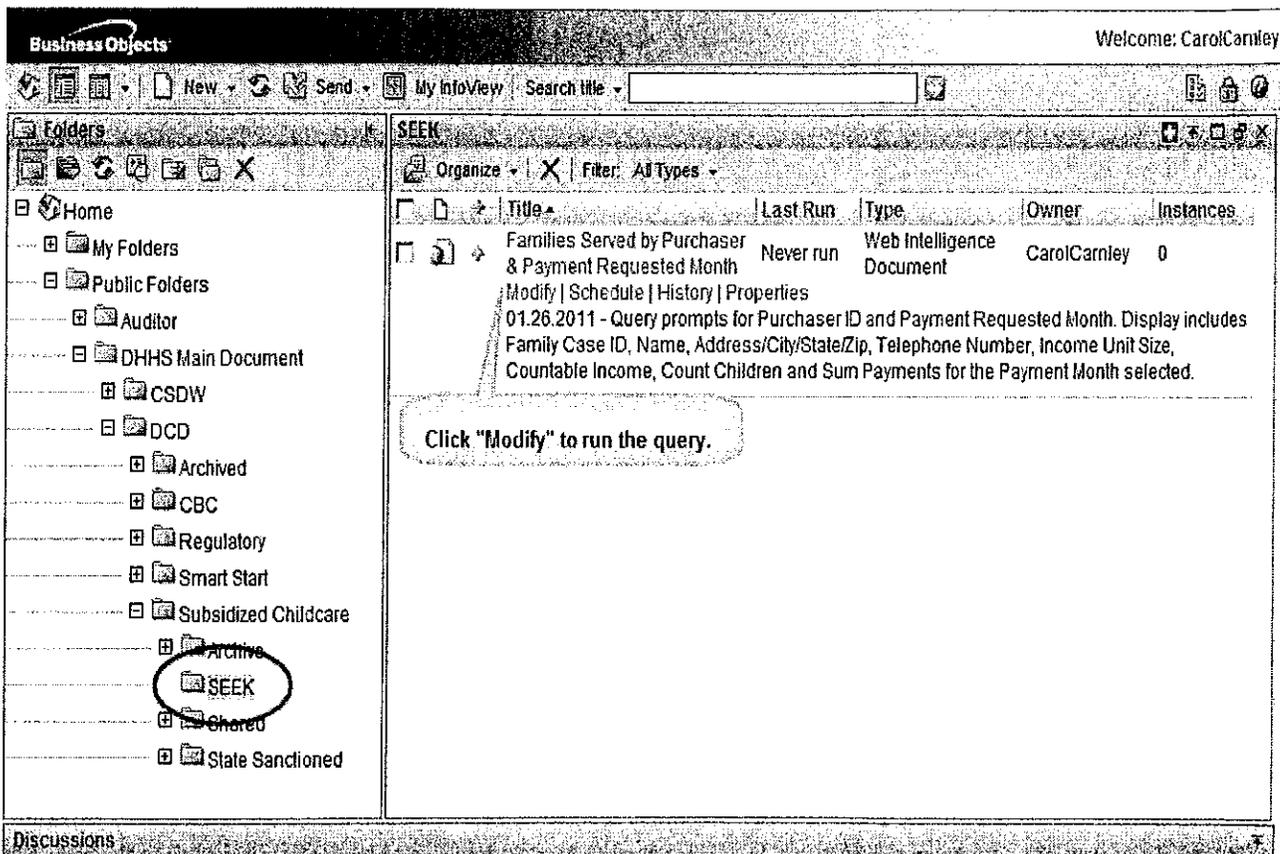
SEEK will use this information to create the Primary Authorized Cardholder record for the case. The SEEK card will be mailed to the attention of the DSS Director, at the address recorded in the Family Case Address field, Family Information section of the Child Demographic screen.

**Alternate Cardholder Information**

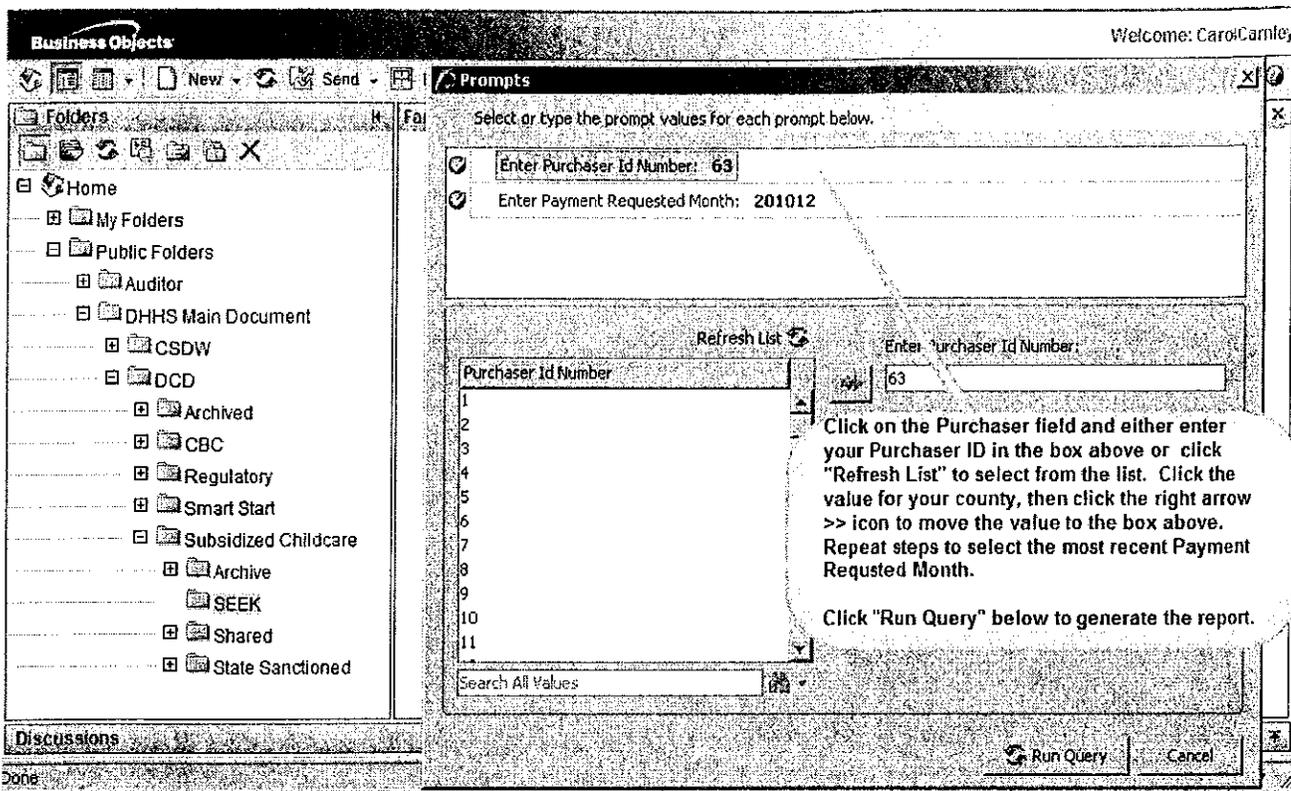
When Phase I of SEEK is implemented, workers will be introduced to a new data entry screen that will allow them to view the information related to the Primary Cardholder for a case, and to record an individual as **Alternate Cardholder**. It is important to remember that data entry must also include the person's DOB.

**Data Warehouse Reports**

Counties may run reports through Data Warehouse to obtain a current list of family demographic information. This will help you to identify specific records that need to be updated or corrected. A Data Warehouse query has already been developed for your use. This query is located at Public Folders\DHHS Main Document\DCD\Subsidized Childcare\SEEK. The name of the query is **Families Served by Purchaser and Payment Requested Month**.

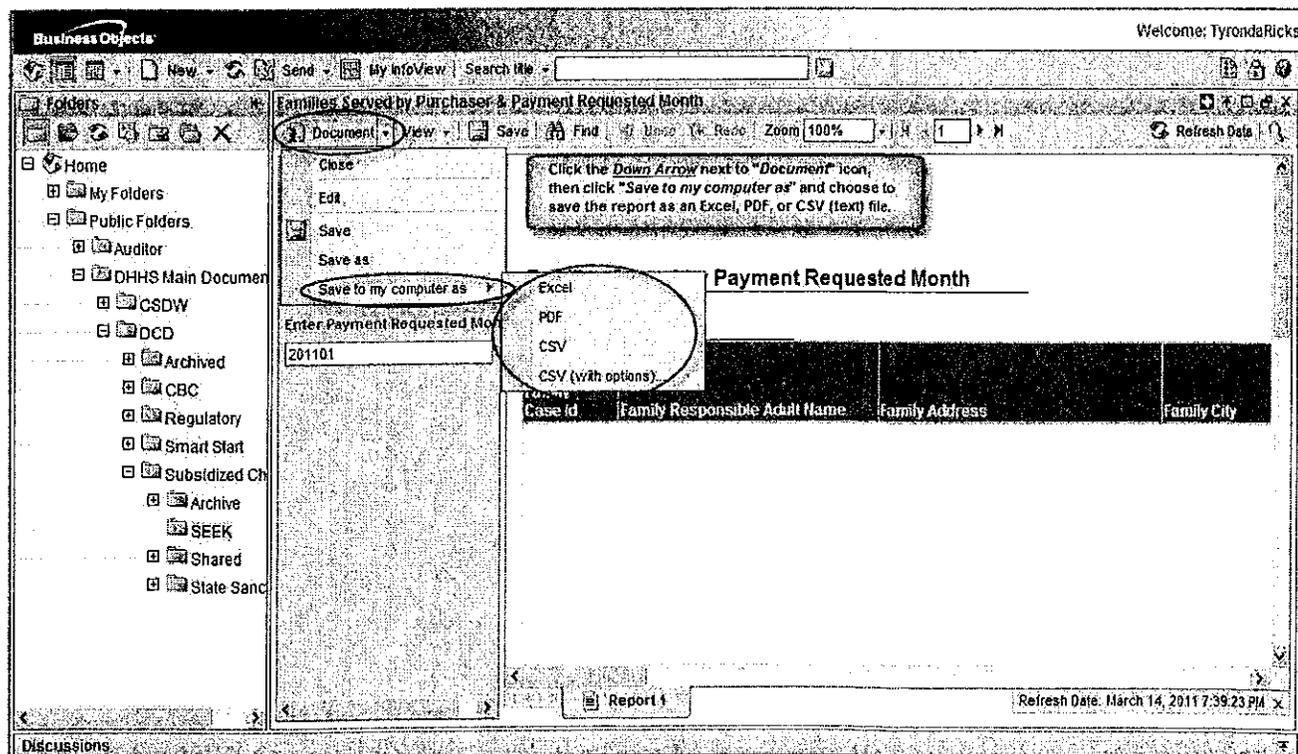


Click on "Modify" to run the query. You will be prompted to enter your Purchaser ID number and the most recent payment requested month in this format YYYYMM. The prompt box will look like the box provided on the next page.



To change the purchaser ID value, click on "Enter Purchaser ID Number", click on the value in the search box, then click the >> arrow to move the value to the box on the right. Similarly, click on "Enter Payment Requested Month", scroll down to the last value listed and click >> to move the date value to the box on the right. Once your values are in place, click Run Query.

When the report displays on your screen, follow the directions below to save the results in an Excel file.



March 17, 2011

If you are unsure about your account to access the Data Warehouse, please see your county's Security Officer. They will request Data Warehouse accounts from the DHHS Customer Support Center as needed. If you need technical assistance or instructions about how to navigate within and/or run a query within Data Warehouse, you should always first seek assistance from workers in your county with Data Warehouse experience. When you need additional assistance beyond the help of the workers in your agency, you can contact Carol Camley or Tyronda Ricks in the Information Technology Business Unit of the Division. Their contact information is provided below.

[Carol.Camley@dhhs.nc.gov](mailto:Carol.Camley@dhhs.nc.gov) (919) 890-7008

[Tyronda.Ricks@dhhs.nc.gov](mailto:Tyronda.Ricks@dhhs.nc.gov) (919) 890-7090

Pilot counties must enter accurate information regarding family name, address, date of birth for the parent/responsible adult and phone number by April 15, 2011 and all other counties by April 29, 2011. Please share this information with any staff who will be involved in reviewing and updating information for SEEK implementation.

We thank you for your assistance and prompt attention to this request which will help all stakeholders move towards a successful implementation of the new time and attendance reporting system. Please provide a copy of this letter to all staff in your agency that work with the Subsidized Child Care Services Program. Furthermore, a copy of this letter must be maintained in your agency's Subsidized Child Care Reimbursement System Manual. If you have questions about this letter, please contact Carol Camley, Tyronda Ricks or your Subsidy Services Consultant.

DJC:CC

cc: Child Care Coordinators  
Subsidy Services Consultants  
North Carolina Partnership for Children, Inc.