

Appendix - Activity Codes

Definitions and Codes for Work Program Activities in CARES

AA – AODA Assessment

Valid for the following programs: W-2, LF, CF

Report this activity when participants are involved in an Alcohol and Other Drug Abuse (AODA) assessment by a qualified AODA provider.

For Federal Work Participation: Hours count as “Core” for no more than 240 hours for a single parent of a child under age six and 360 hours for all other work-eligible individuals. Hours may be counted for no more than 4 consecutive weeks. Timeframe for these limits is the preceding 12 months.

AC – Assessment for Child with a Disability

Valid for the following programs: W-2

Report this activity when a participant is involved in an assessment of the need for the participant to be the sole provider of care for a dependent child with a disability or incapacitation.

Documentation must be provided by using the [Need to Care for Disabled Family Member \(10786\)](#) form or an agency-developed form that, at a minimum, has the same elements. (See [7.4.2.1 #2](#))

This code should not be used for CMC participants.

For Federal Work Participation: Reporting this activity for a participant will exclude that case from Federal Work Participation calculations.

AD – Disability and Learning Assessment

Valid for the following programs: W-2, LF, CF

Report this activity when participants are involved in a formal assessment by a qualified assessing agency. This assessment will identify the appropriate level of work needed, accommodations, and learning capacity of the participant.

For Federal Work Participation: Hours count as “Core” for no more than 240 hours for a single parent of a child under age six and 360 hours for all other work-eligible individuals. Hours may be counted for no more than 4 consecutive weeks. Timeframe for these limits is the preceding 12 months.

AF – Assessment for Other Family Member

Valid for the following programs: W-2.

Report this activity when a participant is involved in an assessment of the need for the participant to be the sole provider of care for a W-2 Group member with a disability or incapacitation, when that W-2 Group member is not a child or foster child.

Documentation must be provided by using the [Need to Care for Disabled Family Member \(10786\)](#) form or an agency-developed form that, at a minimum, has the same elements. (See [7.4.2.1 #2](#))

For Federal Work Participation: Reporting this activity for a participant will exclude that case from Federal Work Participation calculations.

AL – Physician’s Assessment

Valid for the following programs: W-2, LF, CF

Report this activity when participants are involved in a physician’s assessment to determine the participant’s physical limitations due to medical conditions.

For Federal Work Participation: Hours count as “Core” for no more than 240 hours for a single parent of a child under age six and 360 hours for all other work-eligible individuals. Hours may be counted for no more than 4 consecutive weeks. Timeframe for these limits is the preceding 12 months.

AM – Mental Health Assessment

Valid for the following programs: W-2, LF, CF

Report this activity when participants are currently involved in a mental health assessment by a qualified mental health provider.

For Federal Work Participation: Hours count as “Core” for no more than 240 hours for a single parent of a child under age six and 360 hours for all other work-eligible individuals. Hours may be counted for no more than 4 consecutive weeks. Timeframe for these limits is the preceding 12 months.

AV – Domestic Violence Assessment and Supportive Services

Valid for the following programs: W-2, CF

Report this activity for a participant who is receiving services for domestic violence. This includes assessment and supportive services, such as counseling, temporary shelter, legal assistance, etc.

For Federal Work Participation: This activity is not counted for Federal Work Participation requirements.

BE – Adult Basic Education (ABE)

Valid for the following programs: W-2, CF, TMJ/TJ

Report this activity for participants who are engaged in an Adult Basic Education (ABE) course that is not tied to participation in a job skills training. ABE is instruction designed

to focus on the areas of reading, mathematics, communication skills, social studies, physical sciences, health, and career education. ABE consists of 3 levels:

Level 1, or Beginning ABE:

Instruction designed for adults whose academic functioning level is comparable to grades 0 - 5.9.

Level 2, or Intermediate ABE:

Instruction designed for adults whose academic functioning level is comparable to grades 6.0 - 8.9.

Level 3 or Adult Secondary Education (ASE):

Instruction, which delivers competencies, academic or occupational, comparable to that offered in secondary schools (grades 9.0 - 12.9).

Up to one hour of unsupervised study time for each hour of class time plus supervised study time may also be assigned under this activity and tracked for attendance purposes. A statement from the educational program indicating the amount of study time required must be used to determine the assignment of hours.

For Federal Work Participation: Hours count as “Non-Core.”

CA – AODA Counseling

Valid for the following programs: W-2, LF, CF

Report this activity when the participant attends AODA Counseling prescribed by an AODA-related Health Care professional.

For Federal Work Participation: Hours count as “Core” for no more than 240 hours for a single parent of a child under age six and 360 hours for all other work-eligible individuals. Hours may be counted for no more than 4 consecutive weeks. Timeframe for these limits is the preceding 12 months.

CC – Child Care Related Activities

Valid for the following programs: W-2

Report this activity for an applicant or participant who is engaged in activities to secure child care arrangements in order to participate in work activities. This may include contacting a child care resource and referral network, researching availability of child care, touring child care facilities, and interviewing child care providers.

For Federal Work Participation: This activity is not counted for Federal Work Participation requirements.

CD – Caring for Disabled Child

Valid for the following programs: W-2

Report this W-2 activity for the hours of care provided by a participant for a dependent child with a disability or incapacitation. Documentation of the need for the participant to

be the sole provider of care must be provided by using the form [Need to Care for Disabled Family Member \(10786\)](#) or an agency-developed form that, at a minimum, has the same elements. (See [7.4.2.1 #2](#)) This code should not be used for CMC participants.

For Federal Work Participation: Reporting this activity for a participant will exclude that **family case** from Federal Work Participation calculations.

CE – Career Planning & Counseling

Valid for the following programs: W-2, LF, CF, TMJ/TJ

Report this activity for participants receiving services geared towards assessment of a participant’s career interests and guidance in the career planning process. Examples of activities include:

- Career assessments, including work styles, skills and interests;
- Educational Needs Assessment Tools (e.g. TABE Testing) to determine education and training needs for increased employability;
- Career exploration/job shadowing;
- Reviewing labor market information and training opportunities; and
- Career guidance and counseling.

For Federal Work Participation: Hours count as “Core” for no more than 240 hours for a single parent of a child under age six and 360 hours for all other work-eligible individuals. Hours may be counted for no more than 4 consecutive weeks. Timeframe for these limits is the preceding 12 months.

CF – Caring for Other **Disabled Family Member**

Valid for the following programs: W-2

Report this W-2 activity for the hours of care provided by a participant for a W-2 Group member with a disability or incapacitation other than a child or care of a foster child. Documentation of the need for the participant to be the sole provider of care must be provided by using the form [Need to Care for Disabled Family Member \(10786\)](#) or an agency-developed form that, at a minimum, has the same elements. (See [7.4.2.1 #2](#)).

For Federal Work Participation: Reporting this activity for a participant will exclude that **family case** from Federal Work Participation calculations.

No change to remainder of Activity Codes Appendix