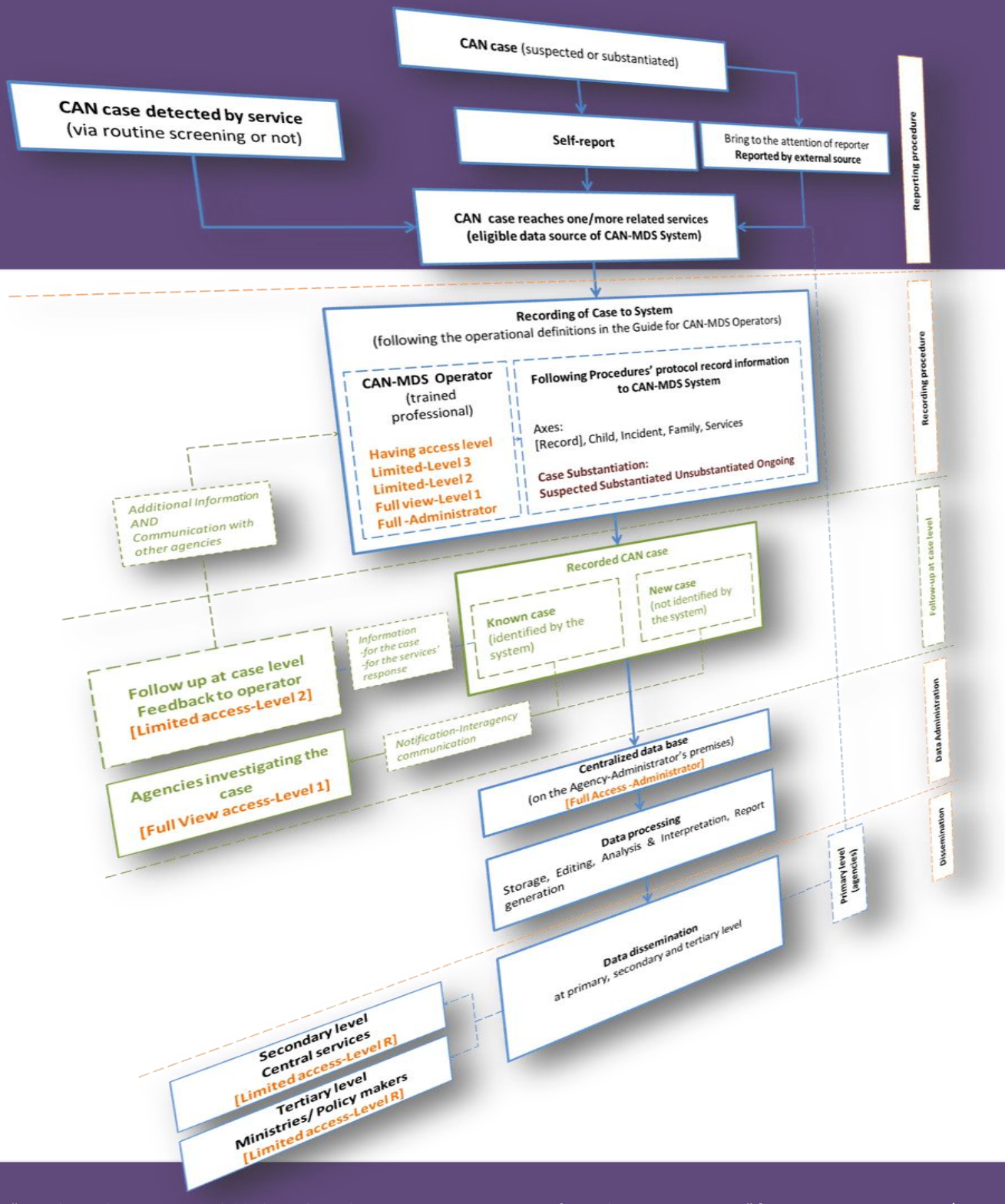
CAN-MDS Toolkit + Synergy + Capacity + Lobbying = Coordinated response to Child Abuse & Neglect

Co-funded by EU REC Programme 2014-2020

CAN-MDS

ADMINISTRATOR'S MANUAL



"Coordinated Response to Child Abuse & Neglect via Minimum Data Set: *from planning to practice*" [REC-RDAP-GBV-AG-2017/ 810508]

NOTE

This Manual is part of the Master CAN-MDS Toolkit.
National version can be developed by removing any information related to other countries (especially from working files).Concerning the language, the specific Manual can be used as it is or to be translated in national languages (optionally).

Action's Identity

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Deliverable title	Master CAN-MDS Toolkit, Administrator's Manual
Target group	National CAN-MDS Administrative Authorities, National CAN-MDS Administrators, Partners and any stakeholder interested in developing and implementing a CAN-MDS System

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This Manual is part of the Master CAN-MDS Toolkit prepared in the context of the Action "Coordinated Response to Child Abuse & Neglect via Minimum Data Set: *from planning to practice*"

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Introductory note

In the context of the Action "CAN-MDS II", the National CAN-MDS Administrator[1] is responsible for the day-by-day administration of system's operation following the instructions by the Administrative Authority and in close collaboration with the Local Coordinator and National Inter-sectoral Board. Moreover, the National Data Administrator is responsible to follow up the CAN-MDS system; ensure that the system operates following the provisioned technical and organisational security measures[2]; maintain a record of processing activities; and notify the National Administrative Authority ('data controller') of any potential data breaches.

[1] National CAN-MDS Administrator or '*data processor*' in the context of CAN-MDS is the natural person who processes the data on behalf of the data controller, following strict instructions

[2] As they set by design in the CAN-MDS System and described in the CAN-MDS Policy and Procedures Manual

In the following pages specific practical information and step by step instructions are available for each aspect of the tasks that National CAN-MDS Administrator should take care during the project. Further information for the role of the National Data Administrator is included in the Data Processing Agreement (DPA) and the Appendix accompanying the agreement between National Administrative Authority and National Data Administrator.

Specific tasks of National Administrator(s)

CAN-MDS Data Sources-related

The National Data Administrator along with and/or on behalf of the National CAN-MDS Administrative Authority:

a. Cooperates with National CAN-MDS Inter-sectoral Board (including active participation in meetings)
b. Identifies eligible organizations-data sources and invites them to officially participate in CAN-MDS[3]
c. Creates Organizations' accounts (on the basis of the pre-defined instructions[4])
d. Administrates Organizations' accounts (additions/updates/deletions)
e. Maintains "CAN-MDS Data sources" accounts file
f. Communicates with Organizations-data sources' Administrations, when necessary.

CAN-MDS OPERATORS-related

The National Data Administrator along with and/or on behalf of the National CAN-MDS Administrative Authority:

a. Applies eligibility criteria to identify CAN-MDS Operators working in cooperating agencies in relevant sectors[5]
b. Invites professionals to officially participate in CAN-MDS as *Operators*[6]
c. Takes care of capacity building of potential Operators and provides them with the necessary material[7]
d. Creates Operators' accounts (based on the pre-defined instructions, including assignment of access level)[8]
e. Administrates eligible CAN-MDS Operators accounts (additions/updates/deletions)
f. Maintains a "CAN-MDS Operators" accounts file
g. Communicates with Operators, when required providing them with support on issues related to technical and operational aspects of the system (with the support of Local Coordinator and Project Coordinator, when needed)

CHILDREN-related DATA

The National Data Administrator on behalf of the National CAN-MDS Administrative Authority:

a. Communicates with professionals, when a CAN incident is recorded in the system
b. Maintains and administrates an *off line data base* containing children's personal data[9,10]
c. Creates and administrates pseudonyms of children involved in CAN incidents[11]

ANONYMIZED AGGREGATED EPIDEMIOLOGICAL DATA

The National Data Administrator following instructions by the National CAN-MDS Administrative Authority:

a. Extracts and edits disaggregated anonymized incidence data (CAN surveillance at public health level)[12]
b. Collects quantitative data concerning inter-sectoral cooperation and qualitative information from Operators
c. Collects qualitative & quantitative data on operational and other aspects of the System

---

[3] By signing bilateral agreements

[4] Via username & password protected System's Administrator Interface and on the basis of instructions included in *Working Files 1* & 6 of the *Methodology for cultural adaptation of national CAN-MDS Toolkit*

[5] According to the customized national pilot plan

[6] On the basis of a "consent form" (taking into account *Working file 10* of the *Methodology for cultural adaptation of national CAN-MDS Toolkits*)

[7] On the basis of the revised *CAN-MDS Training Module and ready to use training material* and the *Training Evaluation Methodology & Tools*

[8] Via username & password protected System's Administrator Interface and on the basis of instructions included in *Working Files 2, 9* and *11* of the *Methodology for cultural adaptation of national CAN-MDS Toolkits*

[9] On the basis of instructions included in *Working File 7* of the *Methodology for cultural adaptation of national CAN-MDS Toolkits*

[10] i.e. children involved in child abuse and/or neglect incidents

[11] Following the guidelines the *ISO 25237:2017 Health informatics – Pseudonymization* and following the process described in Figure *Steps to be followed for obtain a Child's ID (pseudonym) of the* Master Operator's Manual (p.35, 36).

[12] By using the username & password protected System's Administrator Interface functions

d. Participates in National Board meetings and prepares relevant reports[13]

The structure of this Manual is based on the main responsibilities of the National Data Administrator concerning the administration of a. data sources; b. operators; c. pseudonyms of children involved in CAN incidents (recorded by operators in the System); and d. anonymized, aggregated epidemiological CAN data.

e-CAN-MDS: Administrator's Interface

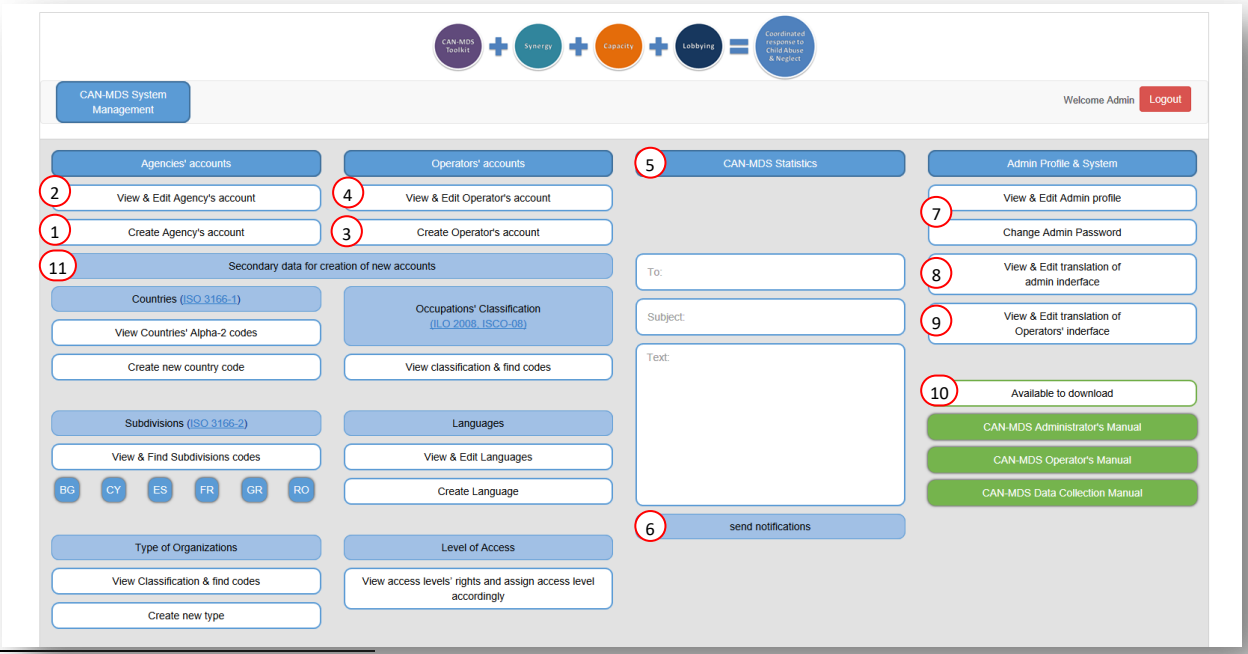
To login e-CAN-MDS Administrator's interface, go to www.can-mds.infowwod.gr, enter **Username** and **Password** and press **Login**

Note: The following introductory screen will appear providing information on
- the number of Agencies and Operators in the system at the specific moment (auto-updated)
- ID information of the Administrator
- ID information of the National Administrative Authority

CAN-MDS System Management

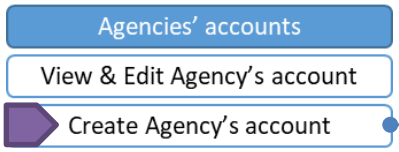
By clicking in the button "CAN-MDS System Management", the Administrator's menu appears (see below). Through this interface National Administrator is able

1. Create new Agencies' accounts
2. View and edit existing Agencies' accounts
3. Create new Operators' accounts
4. View and edit existing Operators' accounts
5. Extract statistics
6. Send notifications to Operators
7. View and edit Administrator's profile and password
8. View and edit translation of administrators interface
9. View and edit translation of Operators' interface
10. Download basic documents (in pdf format)
11. Lastly, all necessary data for tasks 1-4 are available

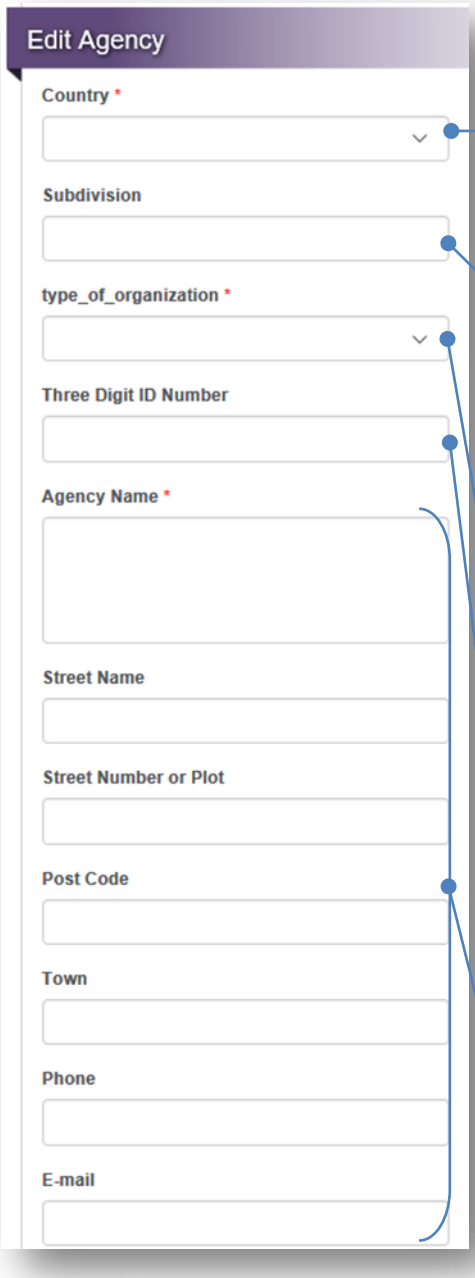


[13] As provisioned in GA, D4.1-D4.4

Creating New Agency's ID through the CAN-MDS application



Press this button to create a new Agency's account



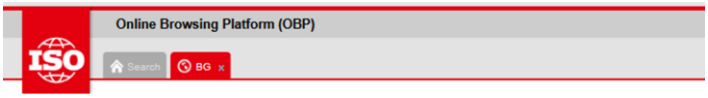
Country: Select the country where the Agency is located from the drop-down menu (2-digit ISO code will auto-completed)

Subdivision: Fill-in the code of geographical subdivision where the Agency is located; you can find the subdivision code following the link corresponding to the country where Agency is located.

Example: Let's suppose you are looking for code of Blagoevgrad, BG

➔From the subdivisions menu click BG

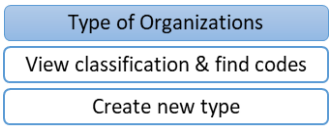
➔The online browsing platform (for Bulgaria) will open



➔Scroll down to **Subdivision category** and find the 3166-2 code

Type of Organization: select the appropriate type of the specific Agency from drop-down menu.

***TIP**: In case the type of organization is not included in the list (e.g. is a country specific type), you can add the new type by using the option "Create*



Three digit ID Number: Numbering the Agency (001, 002, …, 014, …, 123…)

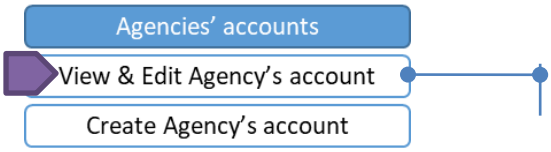
***TIP**: Last ID number is shown in the introductory page (in the example next*

Agency's Name, postal address and contact details: Record full Agency's name, street name and number (or plot), post code, town, phone number and an email address.

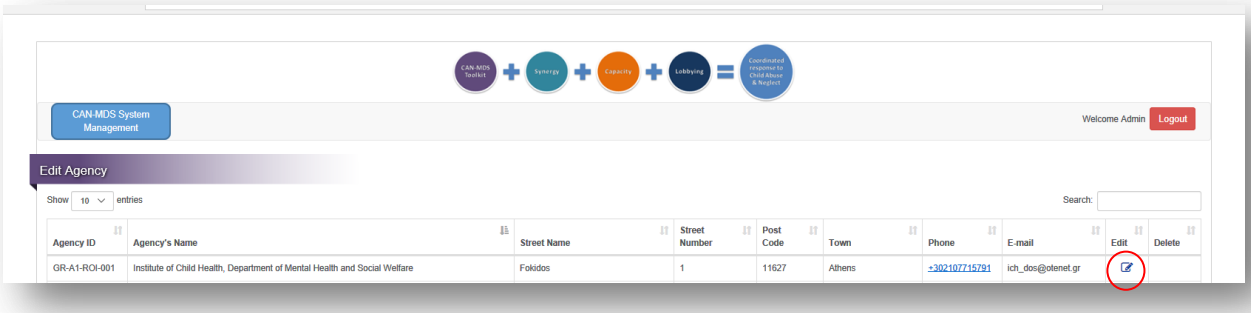
Once the above fields are completed click "**Edit**" in order for the new Agency's Account to be added in the database. Editing is possible, as explained below.

See also: Agency's ID-Examples (page 17)

View & Editing existing Agencies IDs through the CAN-MDS application

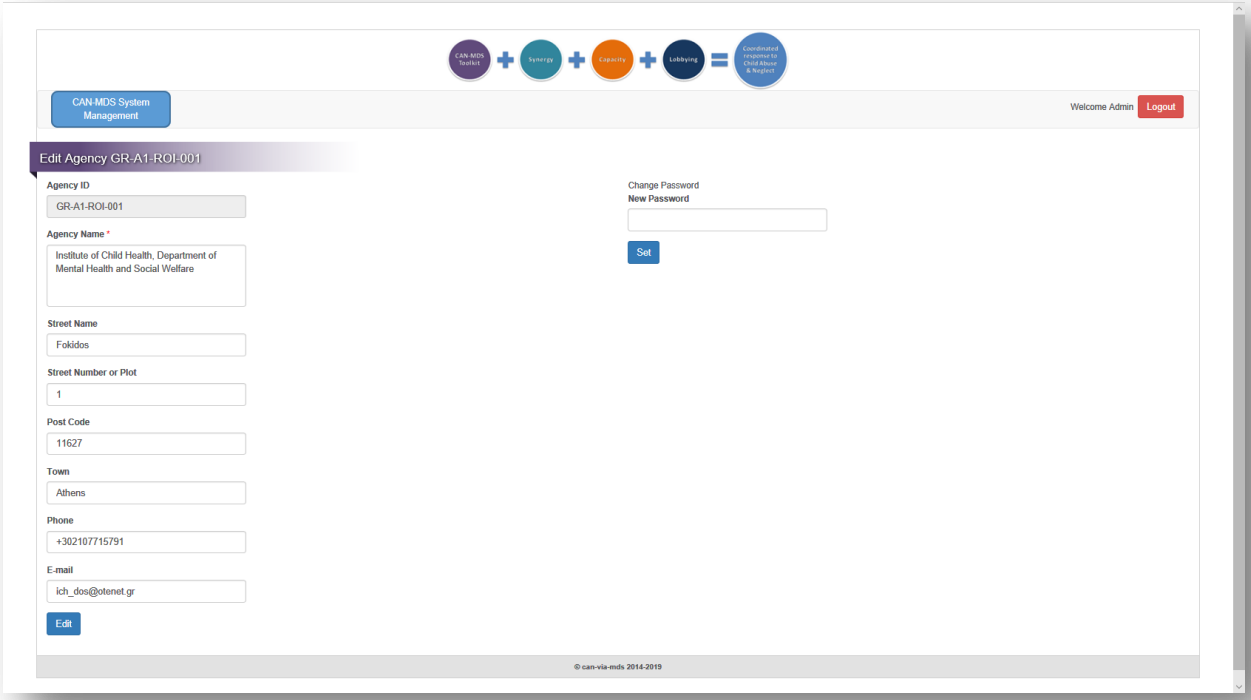


Press this button to view and edit existing Agencies' accounts

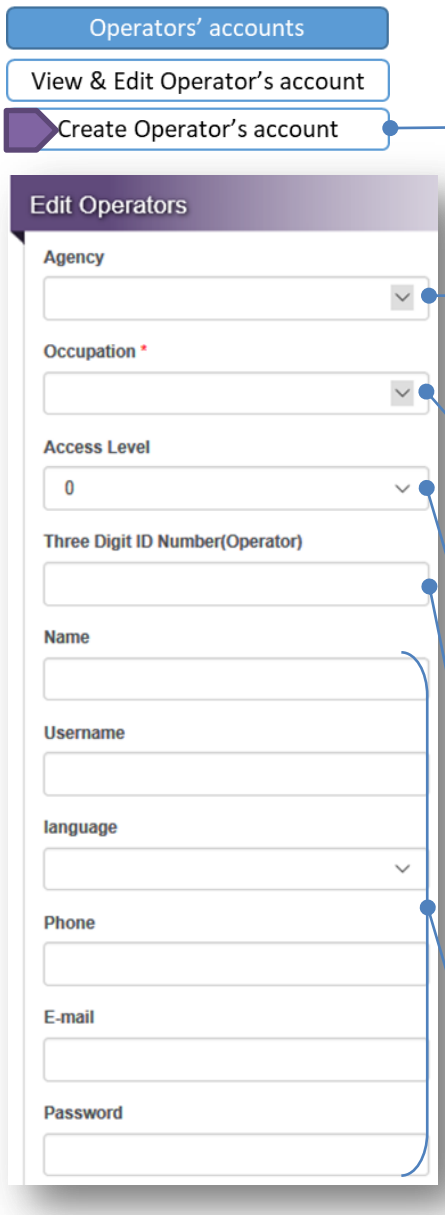


Click "Edit" to update or correct existing Agency's information (the following window will open)

⇨ ***Note**: any piece of information can be modified apart from Agency ID*



Creating New Operator's ID trhough the CAN-MDS application



Press this button to create a new Operator's account

Agency: Select the Agency where the Operator works from the drop-down menu
Note: Agency's ID is a prerequisite for the creation of Operator's ID)

Occupation: Select the professional specialty of the Operator from the drop-down menu (writing in the field you may find in an easier way the specialty); ILO ISCO-08 code will be auto-completed
TIP: Occupation code can be also found through the "View classification & find codes" where the full list of occupations and codes is availbale

Access level: Choose the appropriate access level from the drop-down menu
TIP: Information on rights of users per access level are available in the main menu, by clicking the next button

Three digit ID Number: Number of Operator WITHIN the Agency, as it is possible to have more than one operators in the same agency (001,

Operator's Name and contact details: Record Operator's name, phone number and an email address
Language: Choose the default CAN-MDS language for the specific Operator from the drop-down menu (currenly CAN-MDS is available in 9 languages)
Username and Password: Record a short username that the Operator will use to enter the system and a password with at least 5 digits.
Note: Operator can change the password from the Operator's Panel> My

Once the above fields are completed click "**Edit**" in order for the new Operator's Account to be added in the database. Editing is possible, as explained below

See also: Operator's ID-Examples (page 19)

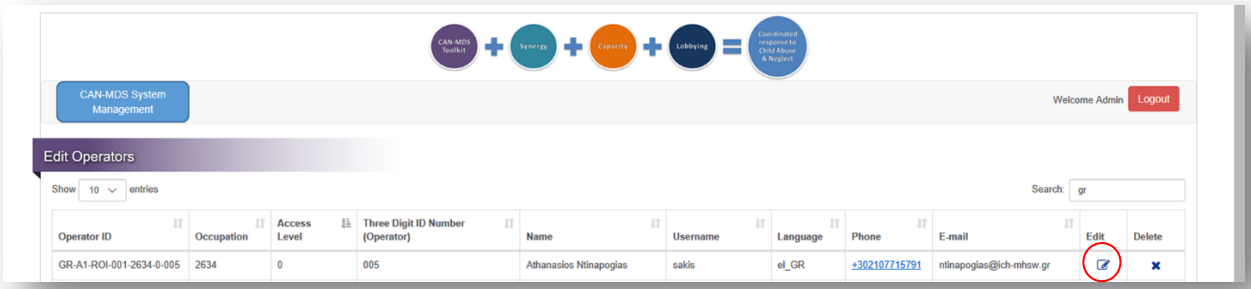
View & Editing existing Operators' IDs through the CAN-MDS application

Operators' accounts

View & Edit Operator's account

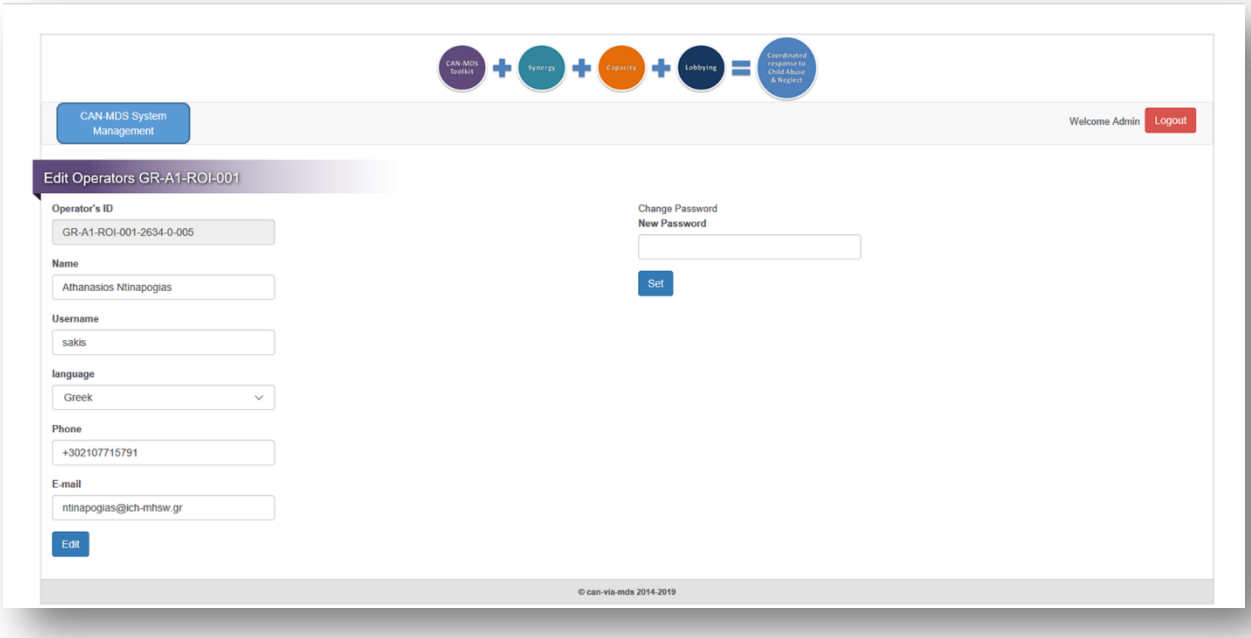
Create Operator's account

Press this button to view and edit existing C
following window will open

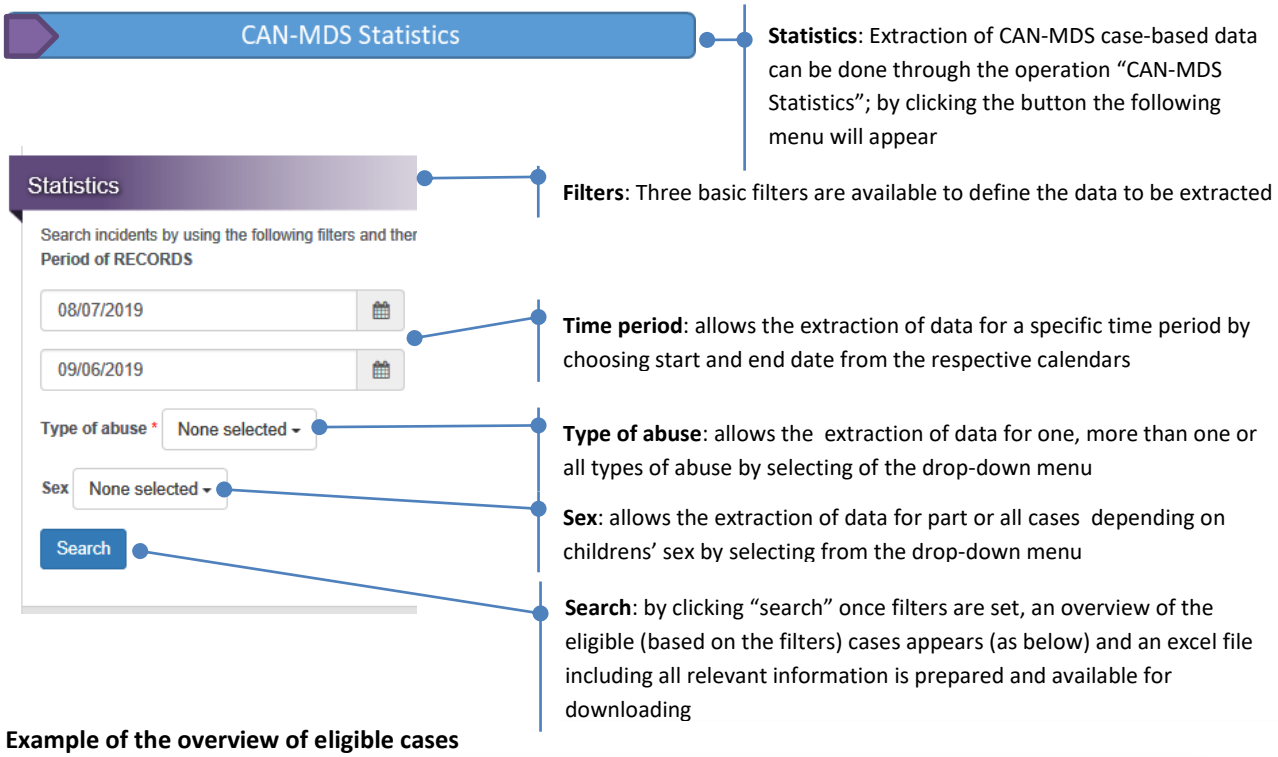


Click "Edit" to update or correct existing Operator's information (the following window will open)

⇨ ***Note**: any piece of information can be modified apart from Operator's ID*



CAN-MDS Statistics: filters & data extraction



Statistics: Extraction of CAN-MDS case-based data can be done through the operation "CAN-MDS Statistics"; by clicking the button the following menu will appear

Filters: Three basic filters are available to define the data to be extracted

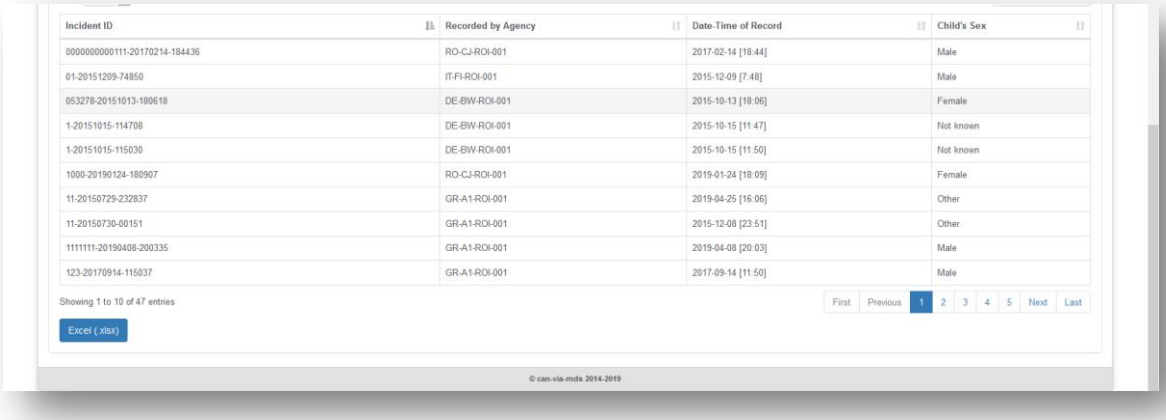
Time period: allows the extraction of data for a specific time period by choosing start and end date from the respective calendars

Type of abuse: allows the extraction of data for one, more than one or all types of abuse by selecting of the drop-down menu

Sex: allows the extraction of data for part or all cases depending on childrens' sex by selecting from the drop-down menu

Search: by clicking "search" once filters are set, an overview of the eligible (based on the filters) cases appears (as below) and an excel file including all relevant information is prepared and available for downloading

Example of the overview of eligible cases



Incident ID	Recorded by Agency	Date-Time of Record	Child's Sex
0000000000111-20170214-184436	RO-CJ-ROI-001	2017-02-14 [18:44]	Male
01-20151209-74850	IT-FI-ROI-001	2015-12-09 [7:48]	Male
053278-20151013-180618	DE-BW-ROI-001	2015-10-13 [18:06]	Female
1-20151015-114708	DE-BW-ROI-001	2015-10-15 [11:47]	Not known
1-20151015-115030	DE-BW-ROI-001	2015-10-15 [11:50]	Not known
1000-20190124-180907	RO-CJ-ROI-001	2019-01-24 [18:09]	Female
11-20150729-232837	GR-A1-ROI-001	2019-04-25 [16:06]	Other
11-20150730-00151	GR-A1-ROI-001	2015-12-08 [23:51]	Other
1111111-20190408-200335	GR-A1-ROI-001	2019-04-08 [20:03]	Male
123-20170914-115037	GR-A1-ROI-001	2017-09-14 [11:50]	Male

Showing 1 to 10 of 47 entries

First Previous 1 2 3 4 5 Next Last

Excel (.xlsx)

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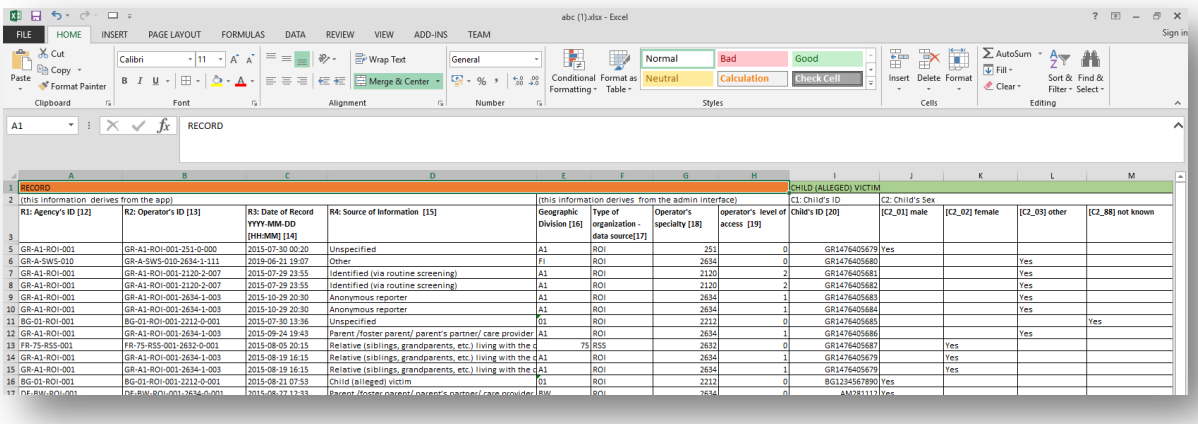
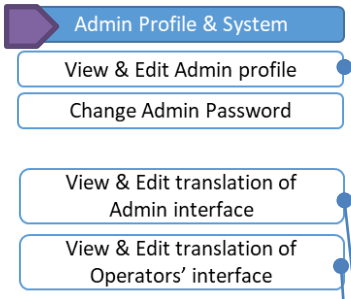
Example of the excel file

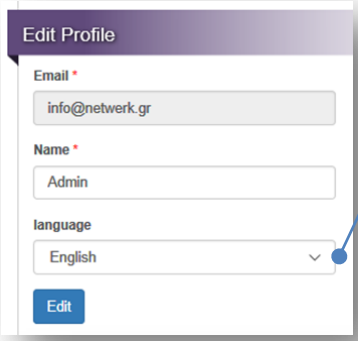


	A	B	C	D	E	F	G	H	I	J	K	L	M
1	RECORD								CHILD (ALLEGED) VICTIM				
2	(this information derives from the app)				(this information derives from the admin interface)				C1: Child's ID	C2: Child's Sex			
3	R1: Agency's ID [12]	R2: Operator's ID [13]	R3: Date of Record YYYY-MM-DD [HH:MM] [14]	R4: Source of Information [15]	Geographic Division [16]	Type of organization - data source[17]	Operator's specialty [18]	operator's level of access [19]	Child's ID [20]	[C2_01] male	[C2_02] female	[C2_03] other	[C2_88] not known
5	GR-A1-ROI-001	GR-A1-ROI-001-251-0-000	2015-07-30 00:20	Unspecified	A1	ROI	251	0	GR1476405679	Yes			
6	GR-A-SWS-010	GR-A-SWS-010-2634-1-111	2019-06-21 19:07	Other	FI	ROI	2634	0	GR1476405680			Yes	
7	GR-A1-ROI-001	GR-A1-ROI-001-2120-2-007	2015-07-29 23:55	Identified (via routine screening)	A1	ROI	2120	2	GR1476405681			Yes	
8	GR-A1-ROI-001	GR-A1-ROI-001-2120-2-007	2015-07-29 23:55	Identified (via routine screening)	A1	ROI	2120	2	GR1476405682			Yes	
9	GR-A1-ROI-001	GR-A1-ROI-001-2634-1-003	2015-10-29 20:30	Anonymous reporter	A1	ROI	2634	1	GR1476405683			Yes	
10	GR-A1-ROI-001	GR-A1-ROI-001-2634-1-003	2015-10-29 20:30	Anonymous reporter	A1	ROI	2634	1	GR1476405684			Yes	
11	BG-01-ROI-001	BG-01-ROI-001-2212-0-001	2015-07-30 13:36	Unspecified	01	ROI	2212	0	GR1476405685				Yes
12	GR-A1-ROI-001	GR-A1-ROI-001-2634-1-003	2015-09-24 19:43	Parent /foster parent/ parent's partner/ care provider	A1	ROI	2634	1	GR1476405686			Yes	
13	FR-75-RSS-001	FR-75-RSS-001-2632-0-001	2015-08-05 20:15	Relative (siblings, grandparents, etc.) living with the c	75	RSS	2632	0	GR1476405687		Yes		
14	GR-A1-ROI-001	GR-A1-ROI-001-2634-1-003	2015-08-19 16:15	Relative (siblings, grandparents, etc.) living with the c	A1	ROI	2634	1	GR1476405679		Yes		
15	GR-A1-ROI-001	GR-A1-ROI-001-2634-1-003	2015-08-19 16:15	Relative (siblings, grandparents, etc.) living with the c	A1	ROI	2634	1	GR1476405679		Yes		
16	BG-01-ROI-001	BG-01-ROI-001-2212-0-001	2015-08-21 07:53	Child (alleged) victim	01	ROI	2212	0	BG1234567890	Yes			

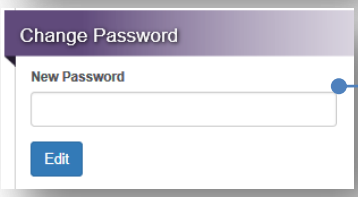
View & Editing Administrator's profile and translation of Administrator's and Operators' application



Through these buttons the National Administrator is allowed to view and edit the account details (name, contact details, default language –see below) as well as to change the password of the Administrator's account

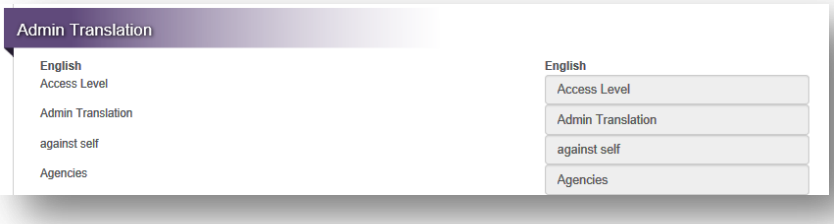


Language: Select the default CAN-MDS language for the National Administrator from the drop-down menu.
Note: new languages can be added; translation from English is allowed trhough the "*View & Edit translation of Admin interface*")

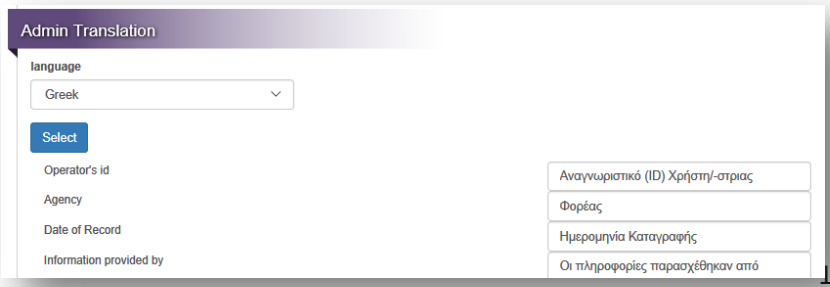


Change password: Periodical change of password is suggested as an additional security measure

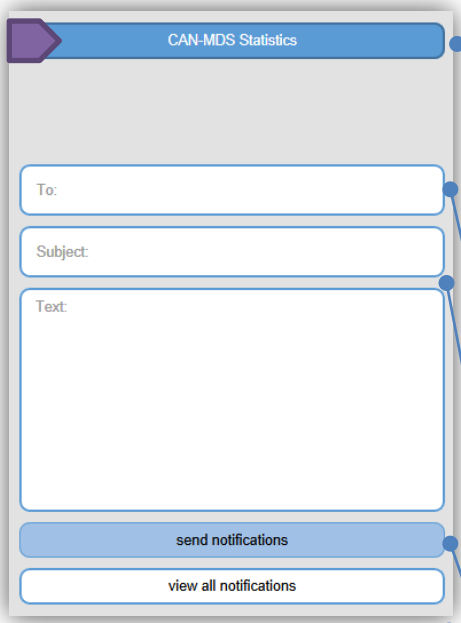
The original version of the CAN-MDS Administrator's interface is available in English and can be used as it is in all countries.
Through **View & edit translation of Administrator's interface** Administrator's interface can be easily translated in national language in order to make the application more user-friendly. By clicking this button a page opens (as below) allowing the translation of each single term from English to national language.



The original version of the CAN-MDS Operator's interface is available in English and can be used as it is in all countries.
Through **View & edit translation of Operator's interface,** interface of CAN-MDS application for the Operators can be easily translated from English into any national language in order to make the application more user-friendly. By clicking the respective button a page opens (as below) allowing the translation or correction of translation of each single term. Although each Operator's account is connected with a default language (usually the national one), Operator has the ability to change language after login.



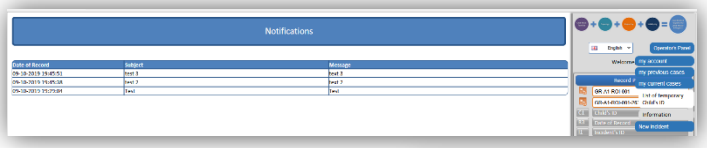
Notifications



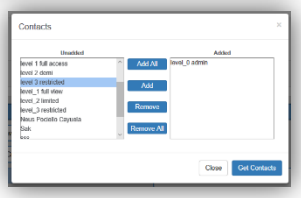
Notifications: through this tool National Administrator will be able to send notifications to operators in their email accounts.

A notification can be general information/news addressed to all operators (send to all) or information related to a specific case or a specific operator or agency (and, therefore, it shall be sent to the specific operator).

Note: Operators will be able to see the notifications within the CAN-MDS application, in Operator's Panel > my current cases > Information.

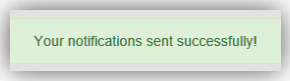


By clicking intto "To: " field, the next menu will open allowing the Administrator to select the who will be the recepients of a specific notification (all, one, or multiple)

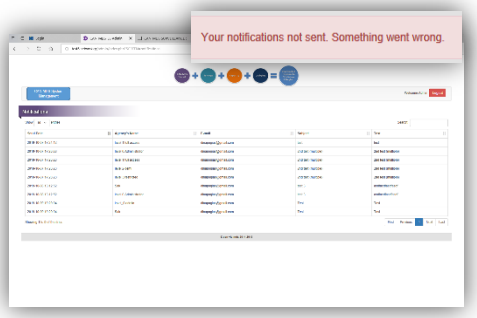


Fields to add "subject" and "text" of notification

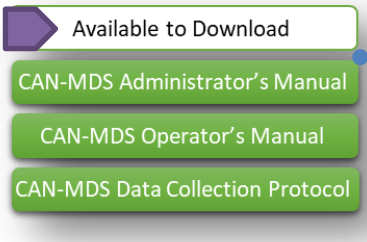
By clicking "send notifications" a message will appear either confirming sent or informing that something went wrong.



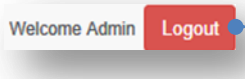
By clicking "view all notifications" a full history of all notification sent through this tool will appear; notifications can be shorted by date; subject; text; agency name; and email account.



Available material to download



Downloadable files: In order to facilitate the National Administrator, the main manuals and the data collection protocol will be readily available within the administrator's CAN-MDS application



Logout: National Administrator can exit the application by clicking the logout button.

Note: When the Administrator's account remains active but without any activity for a 15' period, the application will be disconnected automatically for security reasons.

Examples: Agency's ID

Instructions for creating Agencies' IDs [DE_R1]

ID format	Instructions
	9 or 10-digit CODE (depending on country) formulated as follows: + Country abbreviation (2 letters)[14] (see CAN-MDS Admin app and Annex IA) + Subdivision abbreviation (1 or 2 letters/numbers)[15] (see CAN-MDS Admin app and Annex IB) + Organization/Service Type (3 letters) (see CAN-MDS Admin app and Annex IC) + Organization/Service Number (3 digits) (see CAN-MDS Admin app and Annex ID)
Prerequisites	A detailed mapping of all related agencies on the basis of the information to be collected in the STEP A of the tool for the definition of eligibility criteria for CAN-MDS operators, including basic information on the type of service (such as health, mental health, social welfare etc.).
Secondary information needed:	Agencies' contact details a. ***necessarily*** email to be used in DE_18 for auto-notifications based on the referral(s) made by the Operator's Agency b. further contact details (telephone number(s), address) for the Annex I of the national version
Expected outcomes:	Two lists are expected to be developed: 1st list will include all eligible agencies to be involved in the system along with contact details. 2nd list will include all eligible agencies with their codes. Only System's Administrator will have access in this list including paired "Agency-Code".
NOTE	Agencies' IDs will also be used for the formulation of Operator's ID working in the respective agencies (as 1st part).

Eligible Agencies to be involved in CAN-MDS and to be used as data sources for a CAN-MDS Surveillance system are expected to belong in the following fields:[16]

Fields related to CAN-cases administration	Eligible in the following countries	
Child Protection Services/ Social Welfare Services	BE-BG-CH-DE-ES-FR-GR-IT-RO	**Relevant agencies/ organizations are eligible in all countries**
Physical Health Care Services (primary, secondary & tertiary)	BE-BG-CH-DE-ES-FR-GR-IT-RO	
Judicial Services	BE-BG-CH-DE-ES-FR-GR-IT-RO	
Accredited NGOs/ Community Organizations	BE-BG-CH-DE-FR-GR-IT-RO	**Relevant agencies/ organizations are eligible in most of the countries**
Mental Health Services	BE-BG-DE-FR-GR-IT-RO	
Law Enforcement related Services	BE-BG-CH-ES-FR-GR-IT	
Educational Services (preschool, primary & secondary)	BE-BG-DE-ES-FR-GR-RO	
Already existing registries/monitoring mechanisms	BE-BG-DE-ES-FR-RO	
Research Organizations/ Institutions	BE-BG-DE-FR	
Independent Authorities (such as Child Ombudsman)	BE-FR-GR	**Relevant agencies/ organizations are eligible in some countries**
Other	BE-ES-RO	

[14] **ISO 3166-1**. *Codes for the representation of names of countries and their subdivisions* (part of the ISO 3166 standard published by the International Organization for Standardization)

[15] **ISO 3166-2**. *Country subdivision code* (part of the ISO 3166 standard published by the International Organization for Standardization

[16] See Report: WS3_D2. Eligibility criteria for CAN-MDS Operators' Core Groups and Expanded Groups (2015). Athens: Institute of Child Health

Examples

Agency's Identity	Agency's Identity Data Elements				Agency	**TIP:** Readily available information deriving from the DE_R1 to be used:* From a public health perspective *-to periodically measure incidence of CAN and its specific forms based on data deriving from services' responses to CAN cases* *-per sector and service, at both, local and national level* For case-level administration *-to operate as a communication channel among sectors involved in administration of CAN cases* *-to facilitate follow-up at case-level*
	Country ISO 3166-1	Subdivision ISO 3166-2	Type of Service/ Organization (CAN-MDS)	3-digit ID NUMBER		
BG-23-CPS-001	BG	23	CPS	001	State Agency for Child Protection - Bulgaria	1st Bulgarian Agency *"Child Protection Services"* in subdivision [region (en) / oblast (bg)] of Sofia in Bulgaria
BG-01-ROI-002	BG	01	ROI	002	South West University "Neofit Rilski", Faculty of Public Health and Sport – Bulgaria	2nd Bulgarian Agency *"Research Organization/ Institute/ University"* in subdivision [region (en) / oblast (bg)] of Blagoevgrad in Bulgaria
CY-01-SWS-001	CY	01	SWS	001	Social Welfare Services, Ministry of Labour and Social Insurance - Cyprus	1st Cypriot Agency *"Social Welfare Servcies"* in subdivision [district (en) / district (fr) / eparchia (el) / kaza (tr)] of Lefkosia in Cyprus
CY-01-CPS-002	CY	01	CPS	002	Hope for Children - Cyprus	2nd Cypriot Agency *"Child Protection Services"* in subdivision [district (en) / district (fr) / eparchia (el) / kaza (tr)] of Lefkosia in Cyprus
ES-B-NGO-001	ES	B	NGO	001	Fundacio AROA	1st Spanish Agency *"Non Governmental Organization"* in subdivision [province (en) / provincial (es)] of Barcelona in Spain
FR-75-RSS-001	FR	75	RSS	001	Observatoire national de l'enfance en danger (ONED) – FRANCE	1st French Agency *"Already existing registries/CAN monitoring mechanisms"* in subdivision [département métropolitain (fr) / metropolitan department (en)] of Paris, in [région métropolitaine (fr) / metropolitan region (en) Île-de-France FR-J)] in France
GR-A1-ROI-001	GR	A1	ROI	001	Institute of Child Health, Department of Mental Health and Social Welfare, Greece	1st Greek Agency *"Research Organization/ Institute/ University"* in subdivision [department (en) / nomos (el)] of Attiki [administrative region (en) / periféreia (el) Attiki, GR-I] in Greece
RO-CJ-ROI-001	RO	CJ	ROI	001	Babes-Bolyai University, Department of Sociology and Social Work, Romania	1st Romanian Agency *"Research Organization/ Institute/ University"* in subdivision [department (en) / judeţ (ro)] of Cluj in Romania
RO-CJ-SMS-002	RO	CJ	SMS	002	Directia de Asistenta Sociala si Medicala, Romania	2nd Romanian Agency *"Social and Medical Services"* in subdivision [department (en) / judeţ (ro)] of Cluj in Romania
RO-B-NGO-003	RO	B	NGO	003	Federaţia Organizaţiilor Neguvernamentale Pentru Copil, Romania	3rd Romanian Agency *"Non Governmental Organization"* in subdivision [department (en) / judeţ (ro)] of Bucarest in Romania

* To collect data on which services receive/detect CAN referrals and are involved in administration of cases at both, local and national level. On the basis of the data that will be collected via this variable, the established network of agencies administrating CAN cases and working with maltreated children and their families will be outlined. This information would also be useful for future improvement of the criteria for eligible fields/ services to be included or excluded in the CAN-MDS as data-sources.

Moreover, knowing the identity of services involved in case administration could be useful for policy makers as a baseline for assessment of services' needs (at local and national level) for prioritizning the allocation of resources mainly for secondary and tertiary prevention of child maltreatment; furthermore, by profiling the route of case administration and the practices applied, they can strengthen potential synergies and work towards the adoption of agreements or protocols to facilitate agencies' cooperation and subsequently cases' administration.

Examples: Operator's ID

Instructions for creating Operators' IDs [DE_R2]

ID format	Instructions
	17 or 18-digit CODE (depending on country specifics) formulated as follows: + 9 or 10-digit Agency's ID (DE_R1) + Operators Professional Specialty: 4-digit based on ILO (2007)[17] (see CAN-MDS Admin app) + 1 digit for the Access level (See CAN-MDS Admin app and Annex IIB) + 3-digit number indicating individual professionals working in the same Agency.
Prerequisites:	In order for a Professional to become Operator of CAN-MDS systems, s/he should: a. to fulfill the pre-defined eligibility criteria, namely to belong in one of the eligible groups of professionals[18] (see Annex IIC) b. to previously successfully attend the workshop for "CAN-MDS"
Secondary information needed:	Operator's contact details a. ***necessarily*** email and telephone number to be used for further communication with the Administrator b. further contact details (such as address) will be already available in the Annex I of the national version
Expected outcome:	A list is expected to be developed that will include all Operators to be involved in the system along with their codes and contact details. Only System's Administrator will have this list.
NOTE	Given that Operator's ID includes the Agency's ID, information on where the Operator works (geographically, specific agency, type of agency and agency's contact details) will be readily available.

Examples of eligible professionals' specialties to be involved in CAN-MDS as Operators per working field:[19]

Working field	Professional specialties
Welfare	Social Workers, Health Visitors, Care providers in institutions, other personnel (e.g. working in antitrafficking agencies, directorates for disability, Child Ombudsman etc.)
Justice	Judges (family courts, juvennile courts), Probation Officers, Public Procecutors, Forensic surgeons' professionals, Lawyers, other justice related professions)
Health	Medical Doctors (general doctors and specialized doctors such as gynecologists, pediatricians, orthopedists, and radiologists), Midwives, Nurses, and Dentists
Mental health	Child-Psychiatrists, Psychiatrists, Psychologists, Lisenced Counsellors (Youth Counsellors, Family Counsellors, etc.)
Law enforcement	Police Officers (in general and specialized police investigators e.g. in forensic interviews, for crimes against minors etc.)
Education	Teachers/Educators (pre-school, kindergarden, primary and secondary education, for children with special needs), School Principals / public & private schools
Other fields	Researchers, Data administrators, other school personnel (e.g. school guardians), other Public officials (e.g. ministries' employees), other NGOs personnel (e.g. above mentioned professional specialties,volunteers)

[17] International Labour Organization. Resolution Concerning Updating the International Standard Classification of Occupations. Adopted at the Tripartite Meeting of Experts on Labour Statistics, 6 December 2007. (available at http://www.ilo.org/public/english/bureau/stat/isco/isco08/)

[18] WS3 WS3 Creating Synergies; Activity 1 *Developing of eligibility criteria for the creation of national CAN-MDS Operators' Core Groups (in the context of the project) and of national Expanded Groups (to be included into national policy manuals);* WS3 *D3.1 Eligibility criteria for CAN-MDS Operators' Core Groups and Expanded Groups*

[19] See Report: WS3_D2. Eligibility criteria for CAN-MDS Operators' Core Groups and Expanded Groups (2015). Athens: Institute of Child Health

Examples (please note that in the examples below the professional background is taken into account and NOT the academic title)

Operator's ID **17 or 18 digit code**	**Operator's Identity Data Elements**				**Operator**	**Readily available information deriving from the DE_R2 to be used*** **From a public health perspective** **- To outline the administrative practices applied for CAN cases, especially the groups of professionals involved in services' responses to CAN cases** **For case-level administration** **- To operate as a communication channel among professionals working in the same or different sectors and are involved in administration of common CAN cases** **- to facilitate follow-up at case-level**
	Agency's Identity	**Operator's Occupation Classification) ISCO 08**	**Level of access**	**3-digit ID NUMBER**		
BG-23-CPS-001-*2635*-1-001	BG-23-CPS-001	2635	1	001	[National Coordinator's name]	Social Worker with level of access 1 (Full Access), 1st professional working in 1st Bulgarian Agency *"Child Protection Services"* in subdivision [region (en) / oblast (bg)] of Sofia in Bulgaria
BG-01-ROI-002-*2212*-2-001	BG-01-ROI-002	2212	2	001	[Operator's name]	Psychiatrist with level of access 2 (Restricted Access), 1st professional working in the 2nd Bulgarian Agency *"South West University "Neofit Rilski", Faculty of Public Health and Sport"* in subdivision [région (fr) / region (en) / oblast (bg)] of Blagoevgrad in Bulgaria

ID	**The identity belongs to a professional who is**
BG	working in Bulgaria
23	in Sofia region
CPS	in child protection services
001	specifically in State Agency for Child Protection
2635	s/he is a Social Worker
1	s/he has full access in the system (so is the Administrator)
001	s/he is the first professional of the specific organization in the CAN-MDS system

ID	**The identity belongs to a professional who is**
BG	working in Bulgaria
01	in Blagoevgrad region
ROI	In a research institute or organization
002	Specifically in South-West University
2212	s/he is a psychiatrist
2	s/he has access level 2 (s/he is an Operator)
001	s/he is the first professional from the specific organization in the CAN-MDS system

* To collect data on the professional backround of "professionals-operators" who are involved in receiving referrals/ detect cases, recording of cases and involved in case administration in order to map their "responsibilities". These data could be useful for agencies' administrators and policy makers for assessing the educational needs of the different groups of professionals who are mainly involved in the administration of CAN cases. Moreover, this information would also be useful for future improvement of the eligibility criteria for potential CAN-MDS operators.

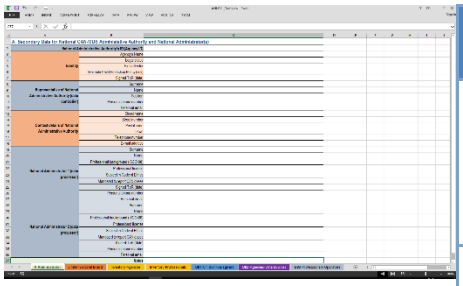
CAN-MDS off-line databases

The following files consist databases that should be kept by the National Administrative Authority separately from the online CAN-MDS System (in the context of Pseudoanonymization). Databases and data to be collected are included in the file "CAN-MDS off-line databases". Although this file is provided in .xlsx format, National Administrators can prepare their own files in other formats (e.g. .mdb)

CAN-MDS off-line databases description

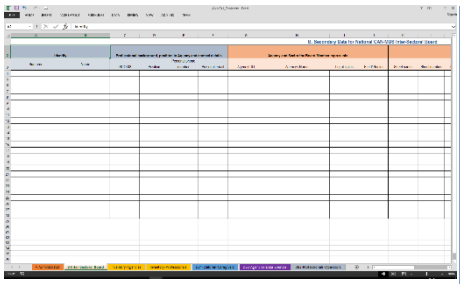
First two databases (in the .xlsx file sheets A and B) include information for the identity of the National Administrative Authority and Administrator(s), and for the Members of the National CAN-MDS Inter-Sectoral Board respectively:

A. National Administrative Authority's ID



Data to be collected for the "Identity of National CAN-MDS Administative Authority and the Administrator(s)" database	
Identity	Agency's Name
	Legal status
	Field/ Sector
	Available Child Protection Policy (link)
	Signed ToR (date) **[template is needed]**
Representative of National Administrative Authority (data controller)	Surname
	Name
	Position
	Personal phone number
	Personal email
Contact details of National Administrative Authority	Street name
	Street number
	Postal code
	Town
	Telephone number
	E-mail address
National Administrator 1 (data processor)	Surname
	Name
	Professional background (ISCO-08)
	Professional license
	Subject in Code of Ethics
	Mandated to report CAN cases
	Signed ToR (date) **[template is needed]**
	Personal phone number
	Personal email
National Administrator 2 (data processor) *[further Administrators can be added]*	Surname
	Name
	Professional background (ISCO-08)
	Professional license
	Subject in Code of Ethics
	Mandated to report CAN cases
	Signed ToR (date) **[template is needed]**
	Personal phone number
	Personal email
Notes	

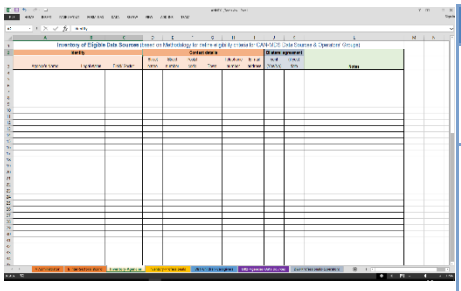
B. Secondary Data for National CAN-MDS Inter-Sectoral Board



Data to be collected for the "Secondary Data for National CAN-MDS Inter-Sectoral Board Members" database	
Identity	Surname
	Name
Professional background, position in Agency and contact details	ISCO-08
	Position
	Personal phone number
	Personal email
Agency and Sector the Board Member represents	Agency's ID
	Agency's Name
	Legal status
	Field/ Sector
Agency's Contact details	Street name
	Street number
	Postal code
	Town
	Telephone number
	E-mail address
Signed ToR	Yes/No **[template is needed]**
	(if yes) date
Notes	

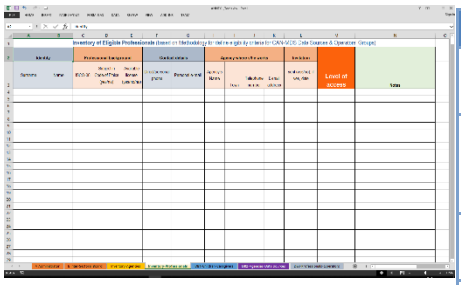
Next two databases (*Inventories*) are preparatory supportive documents continuously updated by the Administrator with the aim to create a pool of eligible organizations-potential data sources for the CAN-MDS as well as a pool of eligible professionals-potential operators for the system. To develop these inventories National Administrator is suggested to apply the methodology described in the report "*Methodology for define eligibility criteria for CAN-MDS Data Sources & Operators' Groups*" and use the respective tool. Through these inventories multisectoral Agencies-Data Sources and multidisciplinary professionals-Operators will be identified and be invited to contribute in the system with the support of the Intersectoral Board members by signing bilateral agreements and consent forms respectivelly. Those Agencies and Professionals that will join the system will be included in the DB2 and DB3 respectivelly.

Inventory of Eligible Data Sources



Data to be collected for the "Inventory of Eligible Agencies"	
Identity	Agency's Name
	Legal status
	Field/ Sector
Contact details	Street name
	Street number
	Postal code
	Town
	Telephone number
	E-mail address
Bilateral agreement	sent (Yes/No) **[template is needed]**
	(if yes) date
Notes	

Inventory of Eligible Professionals



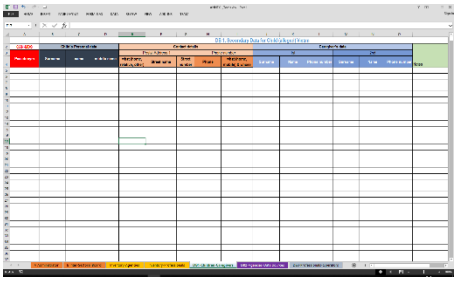
Data to be collected for the "Inventory of Eligible Professionals"	
Identity	Surname
	Name
Professional background	ISCO-08
	Subject in Code of Ethics (yes/no)
	Available license (yes/no/na)
Contact details	Direct/personal phone
	Personal e-mail
Agency where s/he works	Agency's Name
	Town
	Telephone number
	E-mail address
Invitation	sent (yes [date]/no) **[template is needed]**
Level of access	
Notes	

Last three databases include secondary data and identifiers that are NOT included in the CAN-MDS system for security and confidentiality reasons for 1. children (alleged) victims involved in CAN incidents that are recorded in the system by the Operators, 2. the professionals-operators and 3. the agencies/ organizations/ services where operators are working.

DB 1. *Secondary Data for Child (alleged) Victim* is a database of crucial importance as this is going to be the sole document connecting subject of incidents of CAN-MDS System to involved persons (children, caregivers) identities in terms of pseudonymization.

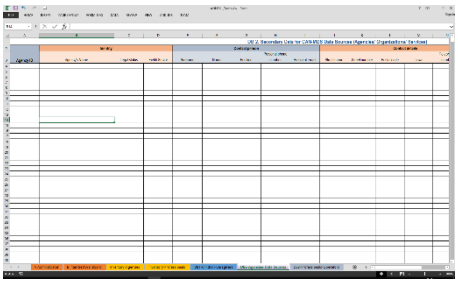
Databases 2 and 3 are also important for the smooth operation of the system, although some of the information incuded there are also available in the CAN-MDS System (in the administrating panel).

DB 1. Secondary Data for Child (alleged) Victim



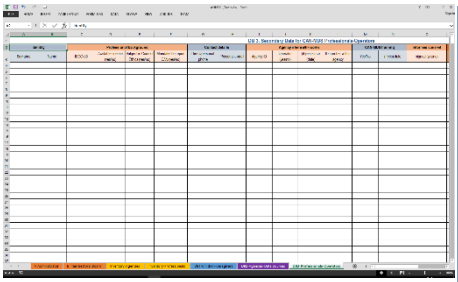
Data to be collected for the "DB 1. Secondary Data for Child (alleged) Victim" database		
CAN-MDS		Pseudonym
Child's Personal data		Surname
		name
		middle name
Contact details	***Postal Address 1***	what (home, relative, other)
		Street name
		Street number
	Phone number	Phone
		what (home, mobile) & whose
Caregiver's data	***1st caregiver***	Surname
		Name
		Phone number
	2nd caregiver	Surname
		Name
		Phone number
Notes		

DB 2. Secondary Data for CAN-MDS Data Sources (Agencies/ Organizations/ Services)



Data to be collected for the "DB 2. Secondary Data for CAN-MDS Data Sources (Agencies/ Organizations/ Services)" database	
Agency ID	
Identity	Agency's Name
	Legal status
	Field/ Sector
Contact person	Surname
	Name
	Position
	Personal phone number
	Personal email
Contact details	Street name
	Street number
	Postal code
	Town
	Telephone number
	E-mail address
Bilateral agreement	Yes/No **[template is needed]**
	(if yes) date
Notes	

DB 3. Secondary Data for CAN-MDS Professionals-Operators



Data to be collected for the "DB 3. Secondary Data for CAN-MDS Trained Professionals" database	
Identity	Surname
	Name
Professional background	ISCO-08
	Available license (yes/no)
	Subject in Code of Ethics (yes/no)
	Mandated to report CAN (yes/no)
Contact details	Direct/personal phone
	Personal e-mail
Agency where s/he works	Agency ID
	Operator (yes/no)
	(if yes) since (date)
	ID number within agency
CAN-MDS training	Yes/No
	(if yes) date
Informed consent	signed (yes/no) **[template is needed]**
e-CAN-MDS	username
	level of access
Notes	

Working Files

The following documents are directly related to the operation of CAN-MDS System.
Files 1, 2, 3, 4 include secondary data for the creation of Agencies' and Users' Accounts that are also available through CAN-MDS Administrator application.
Files 5, 6, 7 are necessary for better understanding of specific types of neglect in each country (i.e. country specific information that should be included in the National version of the Operator's Manual of CAN-MDS Toolkit).
Files 8, 9 addressed to National Administrators. File 8 contains updated information/contact details for Ombudspersons that may invited in the respective National Inter-Sectoral Boards while file 9 contains the matching of CAN-MDS sub-data elements with other classification systems (such as DSM 5, ICD-10 and ICD-9) that may be useful in the context of research activities.

WORKING FILE 1. COUNTRY AND SUBDIVISIONS' CODES (ISO 3166-1 & ISO 3166-2)
WORKING FILE 2. TYPES OF AGENCIES (ORGANIZATIONS/SERVICES)
WORKING FILE 3. CLASSIFICATION OF PROFESSIONAL SPECIALTIES (ISCO-08, ILO 2008)
WORKING FILE 4. OPERATOR'S LEVEL OF ACCESS
WORKING FILE 5. EDUCATION RELATED INFORMATION
WORKING FILE 6. MANDATORY AND RECOMMENDED VACCINATIONS
WORKING FILE 7. SECONDARY DATA FOR MANDATORY REPORTING OF CAN
WORKING FILE 8. NATIONAL OMBUDSPERSONS
WORKING FILE 9. CORRESPONDANCE OF CAN-MDS CODES/SUBCODES WITH EXISTING SYSTEMS (DSM-V, ICD-10 & ICD-9)

WORKING FILE 1. COUNTRY AND SUBDIVISIONS' CODES (ISO 3166-1 & ISO 3166-2)

COUNTRY CODES (ISO 3166-1)

COUNTRY CODES (ISO 3166-1)[20] **Alpha-2 code** – a two-letter code that represents a country name, recommended as the general purpose code

Country abbreviation (2 letters)[21]

BE	=	Belgium
BG	=	Bulgaria
CH	=	Switzerland
CY	=	Cyprus
DE	=	Germany
ES	=	Spain
FR	=	France
GR	=	Greece
IT	=	Italy
RO	=	Romania

SUBDIVISION CODES (ISO 3166-2)

Subdivision codes (ISO 3166-2)[22] – code that represents the name of a principal subdivision (e.g province or state) of countries coded in ISO 3166-1. This code is based on the two-letter code element from ISO 3166-1 followed by a separator and up to three alphanumeric characters. The characters after the separator cannot be used on their own to denote a subdivision, they must be preceded by the alpha-2 country code.
The codes denoting the subdivision are usually obtained from national sources and stem from coding systems already in place in the country.

[20] Glossary for ISO 3166 - Codes for countries and their subdivisions (www.iso.org/iso/country_codes_glossary.html)
[21] **ISO 3166-2** (1998). *Codes for the representation of names of countries and their subdivisions – Part 2: Country subdivision code* (part of the ISO 3166 standard published by the International Organization for Standardization
[22] Glossary for ISO 3166 - Codes for countries and their subdivisions (www.iso.org/iso/country_codes_glossary.html)

BE[23]

Short name	BELGIUM
Short name lower case	Belgium
Full name	the Kingdom of Belgium
Alpha-2 code	BE
Alpha-3 code	BEL
Numeric code	056

List source: Institut Belge de Normalisation (IBN), 1996-06-06; IGN 1986 update BET 1996; http://unstats.un.org/unsd/geoinfo/UNGEGN/docs/25th-gegn-docs/wp%20papers/wp93-tgl%20belgium-april%202009.pdf

Code source: Institut Belge de Normalisation (IBN), 1996-06-06

3 Regions [région (fr) / Region (de) / gewest (nl)]	**Language code**	**3166-2 code**
Brussels Hoofdstedelijk Gewest	nl	
Bruxelles-Capitale, Région de	fr	BE-BRU
Vlaams Gewest	nl	BE-VLG
wallonne, Région	fr	BE-WAL
10 Provinces [province (fr) / Provinz (de) / provincie (nl)]		
Antwerpen	nl	BE-VAN
Brabant wallon	fr	BE-WBR
Hainaut	fr	BE-WHT
Liège	fr	BE-WLG
Limburg	nl	BE-VLI
Luxembourg	fr	BE-WLX
Namur	fr	BE-WNA
Oost-Vlaanderen	nl	BE-VOV
Vlaams-Brabant	nl	BE-VBR
West-Vlaanderen	nl	BE-VWV

EXAMPLE: BE-BRU-ROI-001 → Coördinatiecel Internationaal Kind en Gezin - Kind en Gezin Academie – Belgium

[23] ISO 3166-Codes for the representation of names of countries and their subdivisions. Committee: ISO/TC 46 ICS: 01.140.30 (https://www.iso.org/obp/ui/#iso:code:3166:BE)

BG[24]

Short name	BULGARIA
Short name lower case	Bulgaria
Full name	the Republic of Bulgaria
Alpha-2 code	BG
Alpha-3 code	BGR
Numeric code	100

List source: Administrative Atlas of the Republic of Bulgaria, produced by Global, Sofia 2007 for MSAAR; http://en.wikipedia.org/wiki/Romanization_of_Bulgarian

Code source: Transliteration Law, Promulgated. OJ. No 19 - 13 March 2009., Amended OJ. N 77 - 1 October 2010., Amended, N 77 - 9 October 2012. Approved by the United Nations in 2012

28 Regions [région (fr) / oblast (bg)]	Language code	3166-2 code
Blagoevgrad	bg	BG-01
Burgas	bg	BG-02
Dobrich	bg	BG-08
Gabrovo	bg	BG-07
Haskovo	bg	BG-26
Kardzhali	bg	BG-09
Kyustendil	bg	BG-10
Lovech	bg	BG-11
Montana	bg	BG-12
Pazardzhik	bg	BG-13
Pernik	bg	BG-14
Pleven	bg	BG-15
Plovdiv	bg	BG-16
Razgrad	bg	BG-17
Ruse	bg	BG-18
Shumen	bg	BG-27
Silistra	bg	BG-19
Sliven	bg	BG-20
Smolyan	bg	BG-21
Sofia	bg	BG-23
Sofia (stolitsa)	bg	BG-22
Stara Zagora	bg	BG-24
Targovishte	bg	BG-25
Varna	bg	BG-03
Veliko Tarnovo	bg	BG-04
Vidin	bg	BG-05
Vratsa	bg	BG-06
Yambol	bg	BG-28

EXAMPLE: BG-01-ROI-001 → South West University "Neofit Rilski", Faculty of Public Health and Sport – Bulgaria

[24]ISO 3166-Codes for the representation of names of countries and their subdivisions. Committee: ISO/TC 46 ICS: 01.140.30 (https://www.iso.org/obp/ui/#iso:code:3166:BG)

CY[25]

Short name	CYPRUS
Short name lower case	Cyprus
Full name	the Republic of Cyprus
Alpha-2 code	CY
Alpha-3 code	CYP
Numeric code	196

List source: *Cyprus Organization for Standardization (CYS); The Complete Gazetteer of the Republic of Cyprus; The Cyprus Permanent Committee for the Standardization of Geographical Names*

Code source: Cyprus Organization for Standards and Control of Quality (KOPEP), 2002, renamed Cyprus Organization for Standardization (CYS)

6 district (en) / district (fr) / eparchia (el) / kaza (tr)	**Language code**	**3166-2 code**
Lefkosia	el	CY-01
Lemesos	el	CY-02
Larnaka	el	CY-03
Ammochostos	el	CY-04
Pafos	el	CY-05
Keryneia	el	CY-06

EXAMPLE: CY-01-CPS-001 → 'Hope for Children' CRC Policy Center – Nicosia, Cyprus

[25] ISO 3166-Codes for the representation of names of countries and their subdivisions. Committee: ISO/TC 46 ICS:01.140.30 (https://www.iso.org/obp/ui/#iso:code:3166:CY)

CH[26]

Short name	SWITZERLAND
Short name lower case	Switzerland
Full name	the Swiss Confederation
Alpha-2 code	CH
Alpha-3 code	CHE
Numeric code	756

List source: Swiss constitution (2002-10-15)
Code source: Swiss Association for Standardization (SNV), 1987-08-26

26 Cantons [Kanton (de)/chantun (rm)/cantone (it)/canton (fr)]	Language code	3166-2 code
Aargau	de	CH-AG
Appenzell Ausserrhoden	de	CH-AR
Appenzell Innerrhoden	de	CH-AI
Basel-Landschaft	de	CH-BL
Basel-Stadt	de	CH-BS
Bern	de	CH-BE
Berne	fr	CH-BE
Freiburg	de	CH-FR
Fribourg	fr	CH-FR
Genève	fr	CH-GE
Glarus	de	CH-GL
Graubünden	de	CH-GR
Grigioni	it	CH-GR
Grischun	rm	CH-GR
Grisons	fr	CH-GR
Jura	fr	CH-JU
Luzern	de	CH-LU
Neuchâtel	fr	CH-NE
Nidwalden	de	CH-NW
Obwalden	de	CH-OW
Sankt Gallen	de	CH-SG
Schaffhausen	de	CH-SH
Schwyz	de	CH-SZ
Solothurn	de	CH-SO
Thurgau	de	CH-TG
Ticino	it	CH-TI
Uri	de	CH-UR
Valais	fr	CH-VS
Vaud	fr	CH-VD
Wallis	de	CH-VS
Zug	de	CH-ZG
Zürich	de	CH-ZH

[26] ISO 3166-Codes for the representation of names of countries and their subdivisions. Committee: ISO/TC 46 ICS:01.140.30 (https://www.iso.org/obp/ui/#iso:code:3166:CH)

EXAMPLE: CH-LU-ROI-001 → Lucerne University of Applied Sciences & Arts, School of Social Work – Switzerland

DE[27]

Short name	GERMANY
Short name lower case	Germany
Full name	the Federal Republic of Germany
Alpha-2 code	DE
Alpha-3 code	DEU
Numeric code	276

List source: DE-PRO (German Association for Facilitation of Trade Procedures and Promotion of EDI) 1991-06-07, Codes and names according to the Federal Ministry of the Interior

Code source: DE-PRO (German Association for Facilitation of Trade Procedures and Promotion of EDI) 1991-06-07, Codes and names according to the Federal Ministry of the Interior

16 Lands [Länder (de) / Land (fr)]	Language code	3166-2 code
Baden-Württemberg	de	DE-BW
Bayern	de	DE-BY
Berlin	de	DE-BE
Brandenburg	de	DE-BB
Bremen	de	DE-HB
Hamburg	de	DE-HH
Hessen	de	DE-HE
Mecklenburg-Vorpommern	de	DE-MV
Niedersachsen	de	DE-NI
Nordrhein-Westfalen	de	DE-NW
Rheinland-Pfalz	de	DE-RP
Saarland	de	DE-SL
Sachsen	de	DE-SN
Sachsen-Anhalt	de	DE-ST
Schleswig-Holstein	de	DE-SH
Thüringen	de	DE-TH

EXAMPLE: DE-BW-ROI-001 → University Ulm, Department of Child & Adolescent Psychiatry/Psychotherapy - Germany

[27] ISO 3166-Codes for the representation of names of countries and their subdivisions. Committee: ISO/TC 46 ICS: 01.140.30 (https://www.iso.org/obp/ui/#iso:code:3166:DE)

ES[28]

Short name	SPAIN
Short name lower case	Spain
Full name	the Kingdom of Spain
Alpha-2 code	ES
Alpha-3 code	ESP
Numeric code	724
Remarks	

In the autonomous communities of Galicia, Catalonia and the Balearics, the respective regional languages are the sole official languages of toponymy. Castilian language forms are given in square brackets for information. For the autonomous communities of Navarra, Valencia and the Basque Country, with the exception of the province names Bizkaia and Gipuzkoa, the regional language has co-official status with Castilian (regional language forms are marked with an asterisk).

List source: National Geospatial-Intelligence Agency GEOnet Names Server (GNS) (http://geonames.nga.mil/gns/html); IGN 1986; update: Asociación Española de Normalización y Certificación (AENOR), 2002-05-06; http://geonames.de/coues.html; http://fr.wikipedia.org;http://www.lehendakaritza.ejgv.euskadi.net/r48-2312/fr/contenidos/informacion/estatuto_guernica/fr_455/estatu_com_f.html; http://www.elpais.com/articulo/espana/Congreso/aprueba/cambiar/nombre/provincias/vascas/euskera/elpepuesp/20110504elpepunac_35/Tes

Code source: Road traffic codes for capitals of provinces + ISO/TC 46/WG 2 Secretariat (*);Law 1991-12-11; ISO 3166/MA (*)

17 autonomous community (en) / communauté autonome (fr) / comunidad autónoma (es)	**Language code**	**3166-2 code**	**Parent subdivision**
Andalucía	es	ES-AN*	
Aragón	es	ES-AR*	
Asturias, Principado de	es	ES-AS*	
Canarias	es	ES-CN*	
Cantabria	es	ES-CB*	
Castilla y León	es	ES-CL*	
Castilla-La Mancha	es	ES-CM*	
Catalunya [Cataluña]	ca	ES-CT*	
Euskal Herria	eu	ES-PV*	
Extremadura	es	ES-EX*	
Galicia [Galicia]	gl	ES-GA*	
Illes Balears [Islas Baleares]	ca	ES-IB*	
La Rioja	es	ES-RI*	
Madrid, Comunidad de	es	ES-MD*	
Murcia, Región de	es	ES-MC*	
Nafarroako Foru Komunitatea*	eu	ES-NC*	
Navarra, Comunidad Foral de	es	ES-NC*	
País Vasco	es	ES-PV*	
Valenciana, Comunidad	ca	ES-VC*	

[28] ISO 3166-Codes for the representation of names of countries and their subdivisions. Committee: ISO/TC 46 ICS: 01.140.30 (https://www.iso.org/obp/ui/#iso:code:3166:ES)

Valenciana, Comunitat*	gl	ES-VC*	
50 province (en) / province (fr) / provincia (es)			
A Coruña [La Coruña]	gl	ES-C	ES-GA
Alacant*	ca	ES-A	ES-VC
Albacete	es	ES-AB	ES-CM
Alicante	es	ES-A	ES-VC
Almería	es	ES-AL	ES-AN
Araba*	eu	ES-VI	ES-PV
Asturias	es	ES-O	ES-AS
Badajoz	es	ES-BA	ES-EX
Balears [Baleares]	ca	ES-PM	ES-IB
Barcelona [Barcelona]	es	ES-B	ES-CT
Bizkaia	eu	ES-BI	ES-PV
Burgos	es	ES-BU	ES-CL
Cantabria	es	ES-S	ES-CB
Castelló*	ca	ES-CS	ES-VC
Castellón	es	ES-CS	ES-VC
Ciudad Real	es	ES-CR	ES-CM
Cuenca	es	ES-CU	ES-CM
Cáceres	es	ES-CC	ES-EX
Cádiz	es	ES-CA	ES-AN
Córdoba	es	ES-CO	ES-AN
Gipuzkoa	eu	ES-SS	ES-PV
Girona [Gerona]	ca	ES-GI	ES-CT
Granada	es	ES-GR	ES-AN
Guadalajara	es	ES-GU	ES-CM
Huelva	es	ES-H	ES-AN
Huesca	es	ES-HU	ES-AR
Jaén	es	ES-J	ES-AN
La Rioja	es	ES-LO	ES-RI
Las Palmas	es	ES-GC	ES-CN
León	es	ES-LE	ES-CL
Lleida [Lérida]	ca	ES-L	ES-CT
Lugo [Lugo]	gl	ES-LU	ES-GA
Madrid	es	ES-M	ES-MD
Murcia	es	ES-MU	ES-MC
Málaga	es	ES-MA	ES-AN
Nafarroa*	eu	ES-NA	ES-NC
Navarra	es	ES-NA	ES-NC
Ourense [Orense]	gl	ES-OR	ES-GA
Palencia	es	ES-P	ES-CL
Pontevedra [Pontevedra]	gl	ES-PO	ES-GA
Salamanca	es	ES-SA	ES-CL
Santa Cruz de Tenerife	es	ES-TF	ES-CN
Segovia	es	ES-SG	ES-CL

Sevilla	es	ES-SE	ES-AN
Soria	es	ES-SO	ES-CL
Tarragona [Tarragona]	ca	ES-T	ES-CT
Teruel	es	ES-TE	ES-AR
Toledo	es	ES-TO	ES-CM
Valencia	es	ES-V	ES-VC
Valladolid	es	ES-VA	ES-CL
València*	ca	ES-V	ES-VC
Zamora	es	ES-ZA	ES-CL
Zaragoza	es	ES-Z	ES-AR
Álava	es	ES-VI	ES-PV
Ávila	es	ES-AV	ES-CL
2 autonomous city in North Africa (en) / ville autonome en Afrique du Nord (fr) / ciudad autónoma en el Norte de África (es)			
Ceuta	es	ES-CE	
Melilla	es	ES-ML	

EXAMPLE: **ES-CT-B-NGO-001 → Fundacio AROA – SPAIN**

FR[29]

Short name	FRANCE
Short name lower case	France
Full name	the French Republic
Alpha-2 code	FR
Alpha-3 code	FRA
Numeric code	250
Remarks	

Comprises: Metropolitan France, French Guiana, Guadeloupe, Martinique, La Réunion, Mayotte, Saint Barthélemy, Saint Martin, Saint Pierre and Miquelon, French Polynesia, French Southern Territories, New Caledonia, Wallis and Futuna. Includes: Clipperton Island.

List source: Association Française de Normalisation (AFNOR), 1995-11-09; Institut National de la Statistique et des Études Économiques (INSEE), 2004 ; 2011-03

Code source: Association Française de Normalisation (AFNOR), 1995-11-09; Correction INSEE; 2002-0

22 Metropolitan Regions [région métropolitaine (fr)]	**Language code**	**3166-2 code**	**Parent subdivision**
Alsace	fr	FR-A	
Aquitaine	fr	FR-B	
Auvergne	fr	FR-C	
Basse-Normandie	fr	FR-P	
Bourgogne	fr	FR-D	
Bretagne	fr	FR-E	
Centre	fr	FR-F	
Champagne-Ardenne	fr	FR-G	
Corse	fr	FR-H	
Franche-Comté	fr	FR-I	
Haute-Normandie	fr	FR-Q	
Île-de-France	fr	FR-J	
Languedoc-Roussillon	fr	FR-K	
Limousin	fr	FR-L	
Lorraine	fr	FR-M	
Midi-Pyrénées	fr	FR-N	
Nord-Pas-de-Calais	fr	FR-O	
Pays-de-la-Loire	fr	FR-R	
Picardie	fr	FR-S	
Poitou-Charentes	fr	FR-T	
Provence-Alpes-Côte-d'Azur	fr	FR-U	
Rhône-Alpes	fr	FR-V	
96 Metropolitan Departments [département métropolitain (fr)]			
Ain	fr	FR-01	FR-V

[29] ISO 3166-Codes for the representation of names of countries and their subdivisions. Committee: ISO/TC 46 ICS: 01.140.30 (https://www.iso.org/obp/ui/#iso:code:3166:FR)

Aisne	fr	FR-02	FR-S
Allier	fr	FR-03	FR-C
Alpes-de-Haute-Provence	fr	FR-04	FR-U
Alpes-Maritimes	fr	FR-06	FR-U
Ardèche	fr	FR-07	FR-V
Ardennes	fr	FR-08	FR-G
Ariège	fr	FR-09	FR-N
Aube	fr	FR-10	FR-G
Aude	fr	FR-11	FR-K
Aveyron	fr	FR-12	FR-N
Bas-Rhin	fr	FR-67	FR-A
Bouches-du-Rhône	fr	FR-13	FR-U
Calvados	fr	FR-14	FR-P
Cantal	fr	FR-15	FR-C
Charente	fr	FR-16	FR-T
Charente-Maritime	fr	FR-17	FR-T
Cher	fr	FR-18	FR-F
Corrèze	fr	FR-19	FR-L
Corse-du-Sud	fr	FR-2A	FR-H
Côte-d'Or	fr	FR-21	FR-D
Côtes-d'Armor	fr	FR-22	FR-E
Creuse	fr	FR-23	FR-L
Deux-Sèvres	fr	FR-79	FR-T
Dordogne	fr	FR-24	FR-B
Doubs	fr	FR-25	FR-I
Drôme	fr	FR-26	FR-V
Essonne	fr	FR-91	FR-J
Eure	fr	FR-27	FR-Q
Eure-et-Loir	fr	FR-28	FR-F
Finistère	fr	FR-29	FR-E
Gard	fr	FR-30	FR-K
Gers	fr	FR-32	FR-N
Gironde	fr	FR-33	FR-B
Haute-Corse	fr	FR-2B	FR-H
Haute-Garonne	fr	FR-31	FR-N
Haute-Loire	fr	FR-43	FR-C
Haute-Marne	fr	FR-52	FR-G
Hautes-Alpes	fr	FR-05	FR-U
Haute-Saône	fr	FR-70	FR-I
Haute-Savoie	fr	FR-74	FR-V
Hautes-Pyrénées	fr	FR-65	FR-N
Haute-Vienne	fr	FR-87	FR-L
Haut-Rhin	fr	FR-68	FR-A
Hauts-de-Seine	fr	FR-92	FR-J
Hérault	fr	FR-34	FR-K

Ille-et-Vilaine	fr	FR-35	FR-E
Indre	fr	FR-36	FR-F
Indre-et-Loire	fr	FR-37	FR-F
Isère	fr	FR-38	FR-V
Jura	fr	FR-39	FR-I
Landes	fr	FR-40	FR-B
Loire	fr	FR-42	FR-V
Loire-Atlantique	fr	FR-44	FR-R
Loiret	fr	FR-45	FR-F
Loir-et-Cher	fr	FR-41	FR-F
Lot	fr	FR-46	FR-N
Lot-et-Garonne	fr	FR-47	FR-B
Lozère	fr	FR-48	FR-K
Maine-et-Loire	fr	FR-49	FR-R
Manche	fr	FR-50	FR-P
Marne	fr	FR-51	FR-G
Mayenne	fr	FR-53	FR-R
Meurthe-et-Moselle	fr	FR-54	FR-M
Meuse	fr	FR-55	FR-M
Morbihan	fr	FR-56	FR-E
Moselle	fr	FR-57	FR-M
Nièvre	fr	FR-58	FR-D
Nord	fr	FR-59	FR-O
Oise	fr	FR-60	FR-S
Orne	fr	FR-61	FR-P
Paris	fr	FR-75	FR-J
Pas-de-Calais	fr	FR-62	FR-O
Puy-de-Dôme	fr	FR-63	FR-C
Pyrénées-Atlantiques	fr	FR-64	FR-B
Pyrénées-Orientales	fr	FR-66	FR-K
Rhône	fr	FR-69	FR-V
Saône-et-Loire	fr	FR-71	FR-D
Sarthe	fr	FR-72	FR-R
Savoie	fr	FR-73	FR-V
Seine-et-Marne	fr	FR-77	FR-J
Seine-Maritime	fr	FR-76	FR-Q
Seine-Saint-Denis	fr	FR-93	FR-J
Somme	fr	FR-80	FR-S
Tarn	fr	FR-81	FR-N
Tarn-et-Garonne	fr	FR-82	FR-N
Territoire de Belfort	fr	FR-90	FR-I
Val-de-Marne	fr	FR-94	FR-J
Val-d'Oise	fr	FR-95	FR-J
Var	fr	FR-83	FR-U
Vaucluse	fr	FR-84	FR-U

Vendée	fr	FR-85	FR-R
Vienne	fr	FR-86	FR-T
Vosges	fr	FR-88	FR-M
Yonne	fr	FR-89	FR-D
Yvelines	fr	FR-78	FR-J
5 Overseas Departments [département d'outre-mer (fr)]			
Guadeloupe (see also separate country code entry under GP)	fr	FR-GP	
Guyane (française) (see also separate country code entry under GF)	fr	FR-GF	
La Réunion (see also separate country code entry under RE)	fr	FR-RE	
Martinique (see also separate country code entry under MQ)	fr	FR-MQ	
Mayotte (see also separate country code entry under YT)	fr	FR-YT	
7 Overseas territorial collectivities [collectivité territoriale d'outre-mer (fr)]			
Nouvelle-Calédonie (see also separate country code entry under NC)	fr	FR-NC	
Polynésie française (see also separate country code entry under PF)	fr	FR-PF	
Saint-Barthélemy (see also separate country code entry under BL)	fr	FR-BL	
Saint-Martin (see also separate country code entry under MF)	fr	FR-MF	
Saint-Pierre-et-Miquelon (see also separate country code entry under PM)	fr	FR-PM	
Terres australes françaises (see also separate country code entry under TF)	fr	FR-TF	
Wallis-et-Futuna (see also separate country code entry under WF)	fr	FR-WF	
1 Dependency [dépendance (fr)]			
Clipperton	fr	FR-CP	

EXAMPLE: **FR-75-RSS-001 → Observatoire national de l'enfance en danger (ONED) – FRANCE**

GR[30]

Short name	GREECE
Short name lower case	Greece
Full name	the Hellenic Republic
Alpha-2 code	GR
Alpha-3 code	GRC
Numeric code	300
Remarks	
Includes:	Mount Athos autonomous area (non applicable here)

List source: Hellenic Organization for Standardization (ELOT), 1997-04-08; http://el.wikipedia.org/wiki/ISO_3166-2:GR; http://www.inathos.gr/; www.statistics.gr; Law 3852/2010 available at :http://www.kedke.gr/uploads2010/N38522010_KALLIKRATIS_FEKA87_07062010.pdf

Code source: Hellenic Organization for Standardization (ELOT), 1997-04-08

13 Administration Regions [periféreia (el) / région administrative (fr)]	**Language code**	**3166-2 code**	**Parent subdivision**
Anatoliki Makedonia kai Thraki	el	GR-A	
Attiki	el	GR-I	
Dytiki Ellada	el	GR-G	
Dytiki Makedonia	el	GR-C	
Ionia Nisia	el	GR-F	
Ipeiros	el	GR-D	
Kentriki Makedonia	el	GR-B	
Kriti	el	GR-M	
Notio Aigaio	el	GR-L	
Peloponnisos	el	GR-J	
Sterea Ellada	el	GR-H	
Thessalia	el	GR-E	
Voreio Aigaio	el	GR-K	
51 Departments [département (fr) / nomos (el)]			
Achaïa	el	GR-13	GR-G
Aitolia kai Akarnania	el	GR-01	GR-G
Argolida	el	GR-11	GR-J
Arkadia	el	GR-12	GR-J
Arta	el	GR-31	GR-D
Attiki	el	GR-A1	GR-I
Chalkidiki	el	GR-64	GR-B
Chania	el	GR-94	GR-M
Chios	el	GR-85	GR-K
Dodekanisos	el	GR-81	GR-L

[30] ISO 3166-Codes for the representation of names of countries and their subdivisions. Committee: ISO/TC 46 ICS: 01.140.30 (https://www.iso.org/obp/ui/#iso:code:3166:GR)

Drama	el	GR-52	GR-A
Evros	el	GR-71	GR-A
Evrytania	el	GR-05	GR-H
Evvoia	el	GR-04	GR-H
Florina	el	GR-63	GR-C
Fokida	el	GR-07	GR-H
Fthiotida	el	GR-06	GR-H
Grevena	el	GR-51	GR-C
Ileia	el	GR-14	GR-G
Imathia	el	GR-53	GR-B
Ioannina	el	GR-33	GR-D
Irakleio	el	GR-91	GR-M
Karditsa	el	GR-41	GR-E
Kastoria	el	GR-56	GR-C
Kavala	el	GR-55	GR-A
Kefallonia	el	GR-23	GR-F
Kerkyra	el	GR-22	GR-F
Kilkis	el	GR-57	GR-B
Korinthia	el	GR-15	GR-J
Kozani	el	GR-58	GR-C
Kyklades	el	GR-82	GR-L
Lakonia	el	GR-16	GR-J
Larisa	el	GR-42	GR-E
Lasithi	el	GR-92	GR-M
Lefkada	el	GR-24	GR-F
Lesvos	el	GR-83	GR-K
Magnisia	el	GR-43	GR-E
Messinia	el	GR-17	GR-J
Pella	el	GR-59	GR-B
Pieria	el	GR-61	GR-B
Preveza	el	GR-34	GR-D
Rethymno	el	GR-93	GR-M
Rodopi	el	GR-73	GR-A
Samos	el	GR-84	GR-K
Serres	el	GR-62	GR-B
Thesprotia	el	GR-32	GR-D
Thessaloniki	el	GR-54	GR-B
Trikala	el	GR-44	GR-E
Voiotia	el	GR-03	GR-H
Xanthi	el	GR-72	GR-A
Zakynthos	el	GR-21	GR-F

EXAMPLE: **GR-A1-ROI-001 → Institute of Child Health, Department of Mental Health and Social Welfare, Greece**

IT[31]

Short name	ITALY
Short name lower case	Italy
Full name	the Republic of Italy
Alpha-2 code	IT
Alpha-3 code	ITA
Numeric code	380

List source: Ente Nazionale Italiano di Unificazione (UNI), 1995-11-15 (regions) + 1998-03-02 (provinces); BET 1996; Servizio Informativo e Cartografico Regionale, Regione Autonoma della Sardegna 2006; http://www.statoids.com/uit.html; http://fr.wikipedia.org/wiki/

Code source: Ente Nazionale Italiano di Unificazione (UNI); ISO/TC 46/WG 2 Secretariat (*)

20 Regions [regione (it) / région (fr)]	**Language code**	**3166-2 code**	**Parent subdivision**
Abruzzo	it	IT-65	
Basilicata	it	IT-77	
Calabria	it	IT-78	
Campania	it	IT-72	
Emilia-Romagna	it	IT-45	
Friuli-Venezia Giulia	it	IT-36	
Lazio	it	IT-62	
Liguria	it	IT-42	
Lombardia	it	IT-25	
Marche	it	IT-57	
Molise	it	IT-67	
Piemonte	it	IT-21	
Puglia	it	IT-75	
Sardegna	it	IT-88	
Sicilia	it	IT-82	
Toscana	it	IT-52	
Trentino-Alto Adige	it	IT-32	
Trentino-Südtirol	de	IT-32	
Umbria	it	IT-55	
Val d'Aoste	fr	IT-23	
Valle d'Aosta	it	IT-23	
Veneto	it	IT-34	
110 Provinces [province (fr) / provincia (it)]			
Agrigento	it	IT-AG	IT-82
Alessandria	it	IT-AL	IT-21
Ancona	it	IT-AN	IT-57
Aosta	it	IT-AO	IT-23
Aoste	fr	IT-AO	IT-23
Arezzo	it	IT-AR	IT-52

[31] ISO 3166-Codes for the representation of names of countries and their subdivisions. Committee: ISO/TC 46 ICS: 01.140.30 (https://www.iso.org/obp/ui/#iso:code:3166:IT)

Ascoli Piceno	it	IT-AP	IT-57
Asti	it	IT-AT	IT-21
Avellino	it	IT-AV	IT-72
Bari	it	IT-BA	IT-75
Barletta-Andria-Trani	it	IT-BT	IT-75
Belluno	it	IT-BL	IT-34
Benevento	it	IT-BN	IT-72
Bergamo	it	IT-BG	IT-25
Biella	it	IT-BI	IT-21
Bologna	it	IT-BO	IT-45
Bolzano	it	IT-BZ	IT-32
Bozen	de	IT-BZ	IT-32
Brescia	it	IT-BS	IT-25
Brindisi	it	IT-BR	IT-75
Cagliari	it	IT-CA	IT-88
Caltanissetta	it	IT-CL	IT-82
Campobasso	it	IT-CB	IT-67
Carbonia-Iglesias	it	IT-CI*	IT-88
Caserta	it	IT-CE	IT-72
Catania	it	IT-CT	IT-82
Catanzaro	it	IT-CZ	IT-78
Chieti	it	IT-CH	IT-65
Como	it	IT-CO	IT-25
Cosenza	it	IT-CS	IT-78
Cremona	it	IT-CR	IT-25
Crotone	it	IT-KR	IT-78
Cuneo	it	IT-CN	IT-21
Enna	it	IT-EN	IT-82
Fermo	it	IT-FM	IT-57
Ferrara	it	IT-FE	IT-45
Firenze	it	IT-FI	IT-52
Foggia	it	IT-FG	IT-75
Forlì-Cesena	it	IT-FC*	IT-45
Frosinone	it	IT-FR	IT-62
Genova	it	IT-GE	IT-42
Gorizia	it	IT-GO	IT-36
Grosseto	it	IT-GR	IT-52
Imperia	it	IT-IM	IT-42
Isernia	it	IT-IS	IT-67
La Spezia	it	IT-SP	IT-42
L'Aquila	it	IT-AQ	IT-65
Latina	it	IT-LT	IT-62
Lecce	it	IT-LE	IT-75
Lecco	it	IT-LC	IT-25
Livorno	it	IT-LI	IT-52

Lodi	it	IT-LO	IT-25
Lucca	it	IT-LU	IT-52
Macerata	it	IT-MC	IT-57
Mantova	it	IT-MN	IT-25
Massa-Carrara	it	IT-MS	IT-52
Matera	it	IT-MT	IT-77
Medio Campidano	it	IT-VS	IT-88
Messina	it	IT-ME	IT-82
Milano	it	IT-MI	IT-25
Modena	it	IT-MO	IT-45
Monza e Brianza	it	IT-MB	IT-25
Napoli	it	IT-NA	IT-72
Novara	it	IT-NO	IT-21
Nuoro	it	IT-NU	IT-88
Ogliastra	it	IT-OG*	IT-88
Olbia-Tempio	it	IT-OT	IT-88
Oristano	it	IT-OR	IT-88
Padova	it	IT-PD	IT-34
Palermo	it	IT-PA	IT-82
Parma	it	IT-PR	IT-45
Pavia	it	IT-PV	IT-25
Perugia	it	IT-PG	IT-55
Pesaro e Urbino	it	IT-PU	IT-57
Pescara	it	IT-PE	IT-65
Piacenza	it	IT-PC	IT-45
Pisa	it	IT-PI	IT-52
Pistoia	it	IT-PT	IT-52
Pordenone	it	IT-PN	IT-36
Potenza	it	IT-PZ	IT-77
Prato	it	IT-PO	IT-52
Ragusa	it	IT-RG	IT-82
Ravenna	it	IT-RA	IT-45
Reggio Calabria	it	IT-RC	IT-78
Reggio Emilia	it	IT-RE	IT-45
Rieti	it	IT-RI	IT-62
Rimini	it	IT-RN	IT-45
Roma	it	IT-RM	IT-62
Rovigo	it	IT-RO	IT-34
Salerno	it	IT-SA	IT-72
Sassari	it	IT-SS	IT-88
Savona	it	IT-SV	IT-42
Siena	it	IT-SI	IT-52
Siracusa	it	IT-SR	IT-82
Sondrio	it	IT-SO	IT-25
Taranto	it	IT-TA	IT-75

Teramo	it	IT-TE	IT-65
Terni	it	IT-TR	IT-55
Torino	it	IT-TO	IT-21
Trapani	it	IT-TP	IT-82
Trento	it	IT-TN	IT-32
Treviso	it	IT-TV	IT-34
Trieste	it	IT-TS	IT-36
Udine	it	IT-UD	IT-36
Varese	it	IT-VA	IT-25
Venezia	it	IT-VE	IT-34
Verbano-Cusio-Ossola	it	IT-VB	IT-21
Vercelli	it	IT-VC	IT-21
Verona	it	IT-VR	IT-34
Vibo Valentia	it	IT-VV	IT-78
Vicenza	it	IT-VI	IT-34
Viterbo	it	IT-VT	IT-62

EXAMPLE: **IT-FI-ROI-001 → Istituto degli Innocenti Italy**

RO[32]

Alpha-2 code	RO
Short name	ROMANIA
Short name lower case	Romania
Full name	
Alpha-3 code	ROU
Numeric code	642

List source: Institutul Român de Standardizare (IRS), 1988-04-29; U.S. Geopolitical Entities, Names, and Codes (GENC) Standard, cf. http://earth- info.nga.mil/gns/html/gazetteers2.html; IGN 1990 update BET 1996; update PCGN 2002-10; http://www.guv.ro (2002-11-01)

Code source: Institutul Român de Standardizare (IRS), 1988-04-29; ISO 3166/MA (*)

1 Municipality [municipalité (fr) / municipiu (ro)]	**Language code**	**3166-2 code**
Bucureşti	ro	RO-B
41 Departments [judeţ (ro) / département (fr)]		
Alba	ro	RO-AB
Arad	ro	RO-AR
Argeş	ro	RO-AG
Bacău	ro	RO-BC
Bihor	ro	RO-BH
Bistriţa-Năsăud	ro	RO-BN
Botoşani	ro	RO-BT
Brăila	ro	RO-BR
Braşov	ro	RO-BV
Buzău	ro	RO-BZ
Călăraşi	ro	RO-CL
Caraş-Severin	ro	RO-CS
Cluj	ro	RO-CJ
Constanţa	ro	RO-CT
Covasna	ro	RO-CV
Dâmboviţa	ro	RO-DB
Dolj	ro	RO-DJ
Galaţi	ro	RO-GL
Giurgiu	ro	RO-GR
Gorj	ro	RO-GJ
Harghita	ro	RO-HR
Hunedoara	ro	RO-HD
Ialomiţa	ro	RO-IL
Iaşi	ro	RO-IS
Ilfov	ro	RO-IF*
Maramureş	ro	RO-MM
Mehedinţi	ro	RO-MH

[32] ISO 3166-Codes for the representation of names of countries and their subdivisions. Committee: ISO/TC 46 ICS: 01.140.30 (https://www.iso.org/obp/ui/#iso:code:3166:RO)

Mureş	ro	RO-MS
Neamţ	ro	RO-NT
Olt	ro	RO-OT
Prahova	ro	RO-PH
Sălaj	ro	RO-SJ
Satu Mare	ro	RO-SM
Sibiu	ro	RO-SB
Suceava	ro	RO-SV
Teleorman	ro	RO-TR
Timiş	ro	RO-TM
Tulcea	ro	RO-TL
Vâlcea	ro	RO-VL
Vaslui	ro	RO-VS
Vrancea	ro	RO-VN

EXAMPLE: **RO-CJ-ROI-001 → Babes-Bolyai University, Department of Sociology and Social Work Romania**

WORKING FILE 2. Types of Agencies (Organization/Service)

Agency/ Organization/Service Type (3-letter): As no standards are available for Organization/Service Type, the following initialisms will be used for the formulation of Agency's ID

Organization/Service Type	3-letter initialism	Major Groups of Occupations belonging to each field (ISCO, 2008: broad classification)[33]
Child Protection Services	**CPS**	*39-0000 Personal Care and Service Occupations* *21-0000 Community and Social Service Occupations*
Social Welfare Services	**SWS**	*21-0000 Community and Social Service Occupations* *39-0000 Personal Care and Service Occupations*
Mental Health Services	**MHS**	*19-0000 Life, Physical, and Social Science Occupations*
Primary Health Care Services	**PHC**	*29-0000 Healthcare Practitioners & Technical Occupations* *31-0000 Healthcare Support Occupations* *11-0000 Management Occupations*
Secondary Health Care Services	**SHC**	
Tertiary Health Care Services	**THC**	
Socio-Medical Services	**SMS**	*As SWS and PHC, SHC and THC*
Judicial Services	**JUD**	*23-0000 Legal Occupations* *43-0000 Office and Administrative Support Occupations*
Police	**POL**	*33-0000 Protective Service Occupations*
Other Law Enforcement-related Services	**LES**	
Preschool Educational Facilities	**PEF**	*25-0000 Education, Training, and Library Occupations* *11-0000 Management Occupations* *43-0000 Office and Administrative Support Occupations*
Primary Educational Services	**PES**	
Secondary Educational Services	**SES**	
Vocational Educational Services	**VES**	
Already existing registries/CAN monitoring mechanisms	**RSS**	*15-0000 Computer and Mathematical Occupations*
Research Organizations/ Institutions/ Universities	**ROI**	*19-0000 Life, Physical, and Social Science Occupations* *15-0000 Computer and Mathematical Occupations*
Independent Authorities (such as Child Ombudsman)	**IAU**	*11-0000 Management Occupations*
Accredited NGOs	**NGO**	*NA (could be all the broad categories)*
Community Organizations	**COM**	*NA (could be all the broad categories)*
Other Related Services	**ORS**	*11-0000 Management Occupations*

**Professionals codes will be based on the detailed classification of occupations ISCO-2008 published by ILO, 2007.*

[33] Bureau of Labor Statistics (2010). 2010 Standard Occupational Classification (final structure for the 2010 SOC). On behalf of the Standard Occupational Classification Policy Committee (SOCPC) (available at: http://www.bls.gov/oes/current/oes_stru.htm#11-0000).

WORKING FILE 3. CLASSIFICATION OF PROFESSIONAL SPECIALTIES (ISCO-08)

ISCO-08: International Standards for Classificiation of Occupations (ILO, 2007)

Available at: http://www.ilo.org/public/english/bureau/stat/isco/docs/gdstruct08.doc (word format) and at: http://www.ilo.org/public/english/bureau/stat/isco/docs/gdstruct08.xls (excel format).

"The Tripartite Meeting of Experts on Labour Statistics on Updating the International Standard Classification of Occupations (ISCO) [,…] Adopts, this sixth day of December 2007, the following resolution

1. *The occupational classification system of major, sub-major, minor and unit groups shown in the Annex to this resolution is endorsed by the Meeting of Experts in Labour Statistics and is designated the International Standard Classification of Occupations, 2008 (ISCO-08).*
2. *ISCO classifies jobs. A Job is defined for the purposes of ISCO-08 as a set of tasks and duties performed, or meant to be performed, by one person, including for an employer or in self employment.*
3. *An occupation is defined as a set of jobs whose main tasks and duties are characterised by a high degree of similarity. A person may be associated with an occupation through the main job currently held, a second job or a job previously held.*
4. *Jobs are classified by occupation with respect to the type of work performed, or to be performed. The basic criteria used to define the system of major, sub-major, minor and unit groups are the "skill level" and "skill specialization" required to competently perform the tasks and duties of the occupations.*
5. *In collecting and processing statistics classified by occupation (e.g. for use in fields such as labour market analysis, educational planning, human resource planning, occupational health and safety analysis, wages analysis, etc.), each country should endeavour to compile data that can be converted to the ISCO-08 system, to facilitate the international use and comparison of occupational information."*[34]

ISCO 08 Code	Title EN (full list available at: http://www.ilo.org/public/english/bureau/stat/isco/isco08/)
134	Professional services managers
1341	Child care services managers
1342	Health services managers
1344	Social welfare managers
1345	Education managers
1349	Professional services managers not elsewhere classified
143	Other services managers
1431	Sports, recreation and cultural centre managers
1439	Services managers not elsewhere classified
2	Professionals
2120	Mathematicians, actuaries and statisticians
22	Health professionals
221	Medical doctors
2211	Generalist medical practitioners
2212	Specialist medical practitioners
222	Nursing and midwifery professionals
2221	Nursing professionals
2222	Midwifery professionals
223	Traditional and complementary medicine professionals
2230	Traditional and complementary medicine professionals
2240	Paramedical practitioners
226	Other health professionals
2261	Dentists
2264	Physiotherapists
2265	Dieticians and nutritionists
2266	Audiologists and speech therapists

[34] International Labour Organization (2007). Resolution Concerning Updating the International Standard Classification of Occupations. Adopted at the Tripartite Meeting of Experts on Labour Statistics. (Available at: http://www.ilo.org/public/english/bureau/stat/isco/docs/resol08.doc)

2267	Optometrists and ophthalmic opticians
2269	Health professionals not elsewhere classified
23	Teaching professionals
232	Vocational education teachers
2320	Vocational education teachers
233	Secondary education teachers
2330	Secondary education teachers
234	Primary school and early childhood teachers
2341	Primary school teachers
2342	Early childhood educators
235	Other teaching professionals
2351	Education methods specialists
2352	Special needs teachers
2353	Other language teachers
2354	Other music teachers
2355	Other arts teachers
2359	Teaching professionals not elsewhere classified
2522	Systems administrators
2529	Database and network professionals not elsewhere classified
26	Legal, social and cultural professionals
261	Legal professionals
2611	Lawyers
2612	Judges
2619	Legal professionals not elsewhere classified
263	Social and religious professionals
2632	Sociologists, anthropologists and related professionals
2633	Philosophers, historians and political scientists
2634	Psychologists
2635	Social work and counselling professionals
2636	Religious professionals
32	Health associate professionals
321	Medical and pharmaceutical technicians
3211	Medical imaging and therapeutic equipment technicians
3212	Medical and pathology laboratory technicians
3213	Pharmaceutical technicians and assistants
3214	Medical and dental prosthetic technicians
322	Nursing and midwifery associate professionals
3221	Nursing associate professionals
3222	Midwifery associate professionals
323	Traditional and complementary medicine associate professionals
3230	Traditional and complementary medicine associate professionals
325	Other health associate professionals
3251	Dental assistants and therapists
3252	Medical records and health information technicians
3253	Community health workers
3254	Dispensing opticians
3255	Physiotherapy technicians and assistants
3256	Medical assistants
3258	Ambulance workers
3259	Health associate professionals not elsewhere classified
3314	Statistical, mathematical and related associate professionals
3342	Legal secretaries
3344	Medical secretaries
3355	Police inspectors and detectives
34	Legal, social, cultural and related associate professionals

341	Legal, social and religious associate professionals
3411	Police inspectors and detectives
3412	Social work associate professionals
3413	Religious associate professionals
342	Sports and fitness workers
3422	Sports coaches, instructors and officials
53	Personal care workers
531	Child care workers and teachers' aides
5311	Child care workers
5312	Teachers' aides
532	Personal care workers in health services
5321	Health care assistants
5322	Home-based personal care workers
5329	Personal care workers in health services not elsewhere classified
54	Protective services workers
541	Protective services workers
5411	Fire-fighters
5412	Police officers
5413	Prison guards
5414	Security guards
5419	Protective services workers not elsewhere classified

WORKING FILE 4. Operator's Level of Access

Levels of Access[35]

Responsibilities	Level of access	Attributes & *"rights"* of the level of access
System Administrator	Full Access	enters data WITH access to ALL data, aggregated AND disaggregated (at case-level) (view/ edit/ delete) and to users' accounts create/edit/delete)
- Making decision on whether sufficient evidence exists to prosecute (alleged) offenders	Full View access (level 1)	enters data WITH view access to ALL data, aggregated AND disaggregated (at case-level) (view/ edit/ delete) and to users' accounts (view)
- Conducting initial assessments for suspected CAN cases - Providing services to CAN victims (diagnostic/ treatment/ consultation/ care) - Providing services to CAN victims' families (supporting) - Following-up of CAN cases	Limited access (level 2)	enters data WITH access to data entered by the same user (view/ edit/delete) AND to data entered by other users for the same case (view)
- Notifying (optionally) authorities of (suspected) CAN cases - Reporting mandatorily (suspected) CAN cases - Applying screening in the general child population for CAN - Providing emergency protective measures to CAN victims - Providing legal advice/ consultation/ advocacy for CAN cases	Limited access (level 3)	enters data WITH access ONLY to data entered by the specific user (view/edit/delete)]
- No administration-Making referrals to other services for ALL cases - Professionals not subjected to a code of ethics or related national legislation	No access	no *"rights"*

[35] CAN-MDS WS3, Act. 1 Developing of eligibility criteria for the creation of national CAN-MDS Operators' Core Groups (in the context of the project) and of national Expanded Groups,*D3.1: Eligibility criteria for CAN-MDS Operators' Core Groups and Expanded Groups*

Recommended Data sources and corresponding level of access in CAN-MDS

(Core data sources/ Expanded data sources -where applicable, according to country specifics)

Full View Access (Level 1)	Limited Access (Level 2)	Limited Access (Level 3)
- **Public Prosecutors working in Judicial Services** - **Social Workers working in Child Protection System**	- Social Workers working in Social Welfare Services - Social Workers working in Accredited NGOs/ Community Organizations - Mental Health Professionals (psychologists, psychiatrists) working in Mental Health services - Child Psychiatrists working in Health Care Services - Child Psychiatrists working in Mental Health Services - Psychologists working in Child Protection/Social Welfare Services - Psychologists working in Health Care Services - Psychologists working in Mental Health Services - Paediatricians working in Health Care Services - Medical Doctors (different specialties, e.g. orthopaedists, radiologists) working in Health Care Services - Police Officers working in Law Enforcement-related Services - Mental Health Professionals *(psychologists, psychiatrists)* working in Law Enforcement related services - Licensed Counsellors working in CPS/Social Welfare Services - Licensed Counsellors working in Mental Health Services - Judges working in Judicial Services - Gynaecologists working in Health Care Services - Nurses working in CPS/Social Welfare Services - Midwives working in CPS/Social Welfare Services - Data administrators working in existing related registries - Legitimate researchers working to human subject protection	- Social Workers working in Health Care Services - Mental Health Professionals *(psychologists, psychiatrists, licensed counsellors)* working in Accredited NGOs/Community Organizations - Social Workers working in Education Services - Social Workers working in Mental Health Services - Care Providers in Institutions working in Child Protection System/ Social Welfare Services - Psychologists working in Educational Services - Licensed Counsellors working in Education - Probation Officers working in Judicial Services - Other Justice-related professions working in Judicial Services - Nurses working in Accredited NGOs/Community Organizations - Teachers/educators (pre-school, kindergarten, primary and secondary education, for children with special needs, school principals) working in Educational services - Other personnel working in antitrafficking, directorate for disability, Child Ombudsman, etc.) working in Independent Authorities

Operator's ID within Agency

Organization/Service Number (3 digits): Numerical ID per Professional per Agency

WORKING FILE 5. EDUCATION RELATED INFORMATION

[I3_B_4] Omissions < educational neglect related omissions

Useful information for national adaptation of permissible values related to educational neglect omissions

Compulsory Education in Europe 2018-18

Available at: https://publications.europa.eu/en/publication-detail/-/publication/4569ca0c-caa7-11e8-9424-01aa75ed71a1/language-en/format-PDF [36]

Duration of compulsory education/training and student's age-groups, 2018-2019

	Full-time education/training												Additional Compulsory Part-time	
	Starting age					Leaving age						Duration (in years)	Ending age	
	3	4	5	6	7	14	15	16	17	18	19			
BE (fr/nl/de)				6						18		12	na	
BG			5		7			16				11	na	
CH		4		6				16				11	na	
CY			5	6			15					10	na	
DE *(11 Länder)*				6						18		12	na	
DE *(5 Länder)*				6				16			19	13	na	
EL		4		6			15					11	na	
ES				6				16				10	na	
FR				6				16				10	na	
IT				6				16				10	na	
RO				6					17			11	na	
	ISCED 2011 level 0					ISCED 2011 level 1					na: non applicable			

Explanatory notes

In countries where compulsory education starts at pre-primary level (ISCED 0), the starting age of primary education (ISCED 1) is also indicated.The starting and leaving ages presented in this report are notional; early or late entry, grade retention or other interruptions to schooling are not taken into account.

Country-specific notes

Germany: **11** ***Länder***: Baden-Wuerttemberg, Bayern, Hamburg, Hessen, Mecklenburg-Vorpommern, Niedersachsen, Rheinland-Pfalz, Saarland, Sachsen, Sachsen-Anhalt and Schleswig-Holstein. **5** ***Länder***: Berlin, Brandenburg, Bremen, Nordrhein-Westfalen and Thueringen.In Nordrhein-Westfalen, the duration of full-time compulsory education is nine years for the *Gymnasium*, and ten years for other general education schools.

Greece: Since school year 2018/19 and according to Law 4521/2018, compulsory attendance of pre-primary school (*Nipiagogeio*) lasts two years. The implementation of the measure will be progressive and in any case, it will take place within a three-year period.

ISCED 2011: International Standard Classification of Education

ISCED 0: Early Childhood Education Programmes at this level are typically designed with a holistic approach to support children's early cognitive, physical, social and emotional development and introduce young children to organised instruction outside of the family context. ISCED level 0 refers to early childhood programmes that have an intentional education component.

ISCED 1: Primary education Programmes at this level are typically designed to provide students with fundamental skills in reading, writing and mathematics (i.e. literacy and numeracy) and establish a solid foundation for learning and understanding core areas of knowledge, personal and social development, in preparation for lower secondary education. Age is typically the only entry requirement at this level. The customary or legal age of entry is usually not below 5 years old nor above 7 years old. This level typically lasts six years, although its duration can range between four and seven years.

ISCED 2: Lower secondary education Programmes at this level are typically designed to build on the learning outcomes from ISCED level 1. Students enter ISCED level 2 typically between ages 10 and 13 (age 12 being the most common).

[36] European Commission/EACEA/Eurydice, 2018. *Compulsory Education in Europe – 2018/19.* Eurydice Facts and Figures. Luxembourg: Publications Office of the European Union.

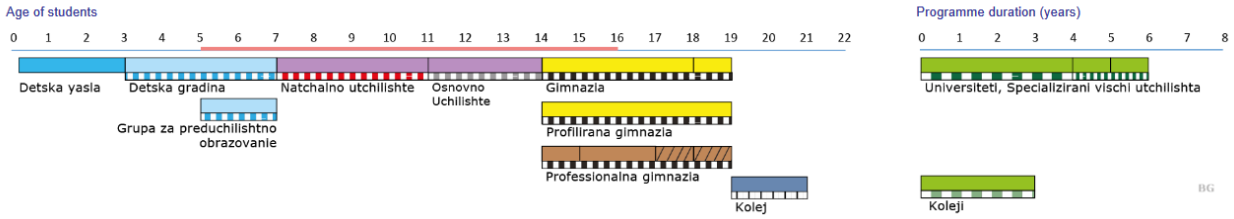
ISCED 3: Upper secondary education Programmes at this level are typically designed to complete secondary education in preparation for tertiary education or provide skills relevant to employment, or both. Pupils enter this level typically between ages 14 and 16.
ISCED 4: Post-secondary non-tertiary education Post-secondary non-tertiary education provides learning experiences building on secondary education, preparing for labour market entry as well as tertiary education. Programmes at ISCED level 4, or post-secondary non-tertiary education, are typically designed to provide individuals who completed ISCED level 3 with non-tertiary qualifications required for progression to tertiary education or for employment when their ISCED level 3 qualifications do not grant such access. The completion of an ISCED level 3 programme is required to enter ISCED level 4 programmes.
ISCED 5: Short-cycle tertiary education Programmes at this level are often designed to provide participants with professional knowledge, skills and competencies. Typically, they are practically based, occupationally-specific and prepare students to enter the labour market. However, these programmes may also provide a pathway to other tertiary education programmes. Entry into ISCED level 5 programmes requires the successful completion of ISCED level 3 or 4 with access to tertiary education.
ISCED 6: Bachelors' or equivalent level Programmes at this level, are often designed to provide participants with intermediate academic and/or professional knowledge, skills and competencies, leading to a first degree or equivalent qualification. Entry into these programmes normally requires the successful completion of an ISCED level 3 or 4 programme with access to tertiary education. Entry may depend on subject choice and/or grades achieved at ISCED levels 3 and/or 4. Additionally, it may be required to take and succeed in entry examinations. Entry or transfer into ISCED level 6 is also sometimes possible after the successful completion of ISCED level 5.
ISCED 7: Master's or equivalent level Programmes at this level, are often designed to provide participants with advanced academic and/or professional knowledge, skills and competencies, leading to a second degree or equivalent qualification. Typically, programmes at this level are theoretically-based but may include practical components and are informed by state of the art research and/or best professional practice. They are traditionally offered by universities and other tertiary educational institutions. Entry into ISCED level 7 programmes preparing for a second or further degree normally requires the successful completion of an ISCED level 6 or 7 programme. In the case of long programmes that prepare for a first degree equivalent to a Master's degree, entry requires the successful completion of an ISCED level 3 or 4 programme with access to tertiary education. Entry into such programmes may depend on subject choice and/or grades achieved at ISCED levels 3 and/or 4. Additionally, it may be required to take and succeed in entry examinations. For the full details on each ISCED level, please consult: UNESCO, Institute for Statistics, 2012. International Standard Classification of Education. ISCED 2011.
Available at: http://www.uis.unesco.org/Education/Documents/isced-2011-en.pdf

The Structure of the European Education Systems 2018/19: Schematic Diagrams September 2018

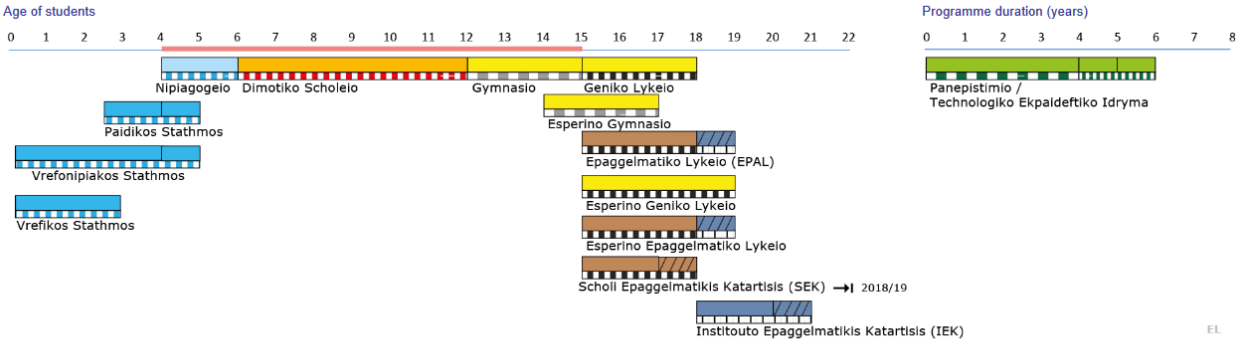
European Commission/EACEA/Eurydice, 2018. *The Structure of the European Education Systems 2018/19: Schematic Diagrams*. Eurydice Facts and Figures. Luxembourg: Publications Office of the European Union.

Source: eacea.ec.europa.eu/national-policies/eurydice/sites/eurydice/files/the_structure_of_the_european_education_systems_2018_19.pdf

Bulgaria

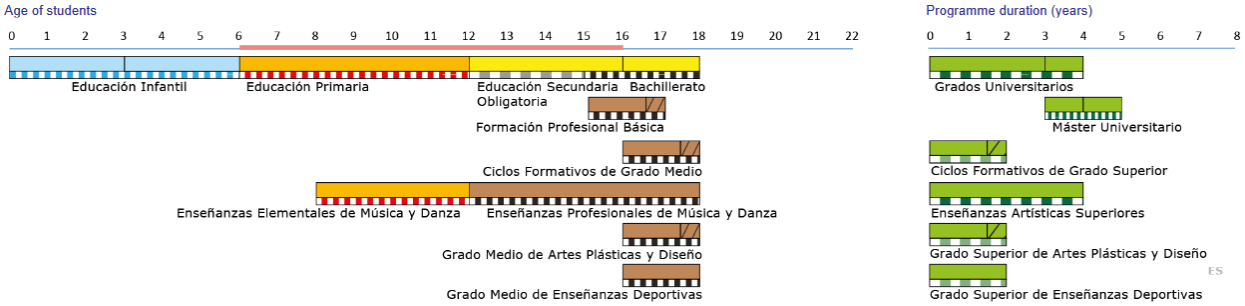


Greece

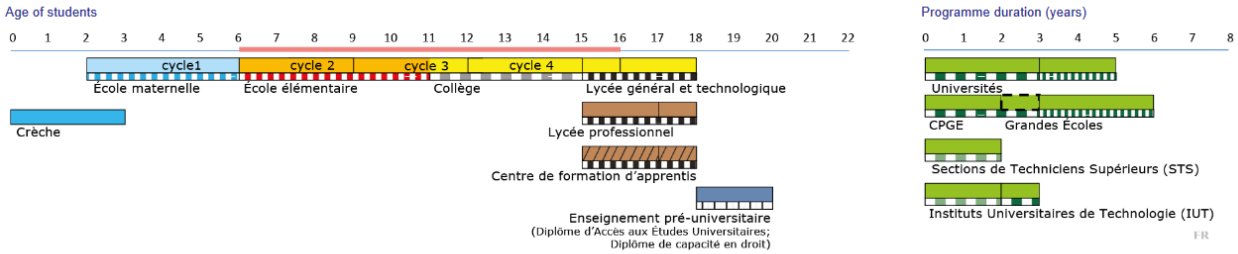


Note: The new Law 4521/2018 has established the two-year compulsory pre-primary education in *Nipiagogeio*. For school year 2018/19, it is applied in 184 municipalities; it will be expanded to all municipalities over the span of 3 years. Meanwhile, *Vrefonipiakoi stathmoi* and *Paidikoi stathmoi* will continue to accommodate children up to 5 years old.

Spain

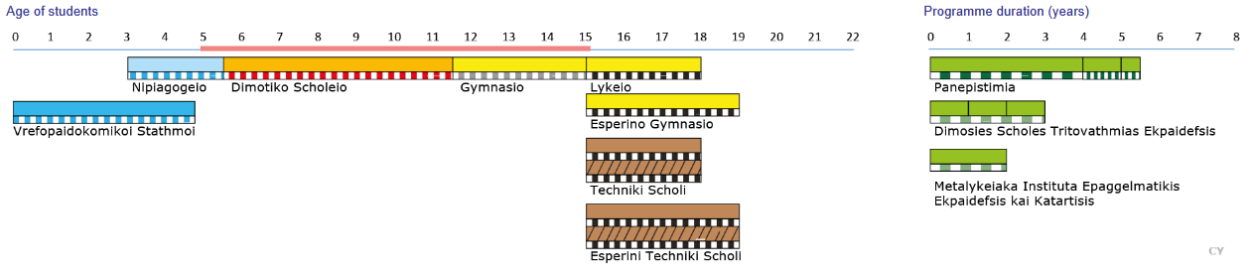


France

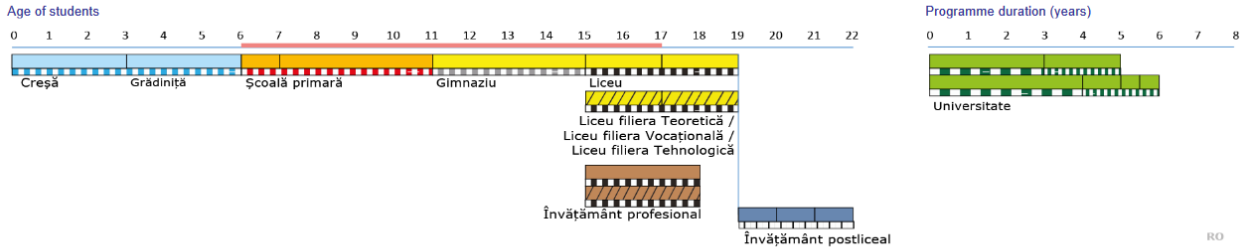


Note: Additional year (see Key) for university or IUT/STS students who want to integrate the *Grandes Écoles* via «parallel admission» (i.e. students are admitted to the *Grandes Écoles* on record and after taking a competitive exam and/or an interview, without going through the CPGE stage).

Cyprus



Romania



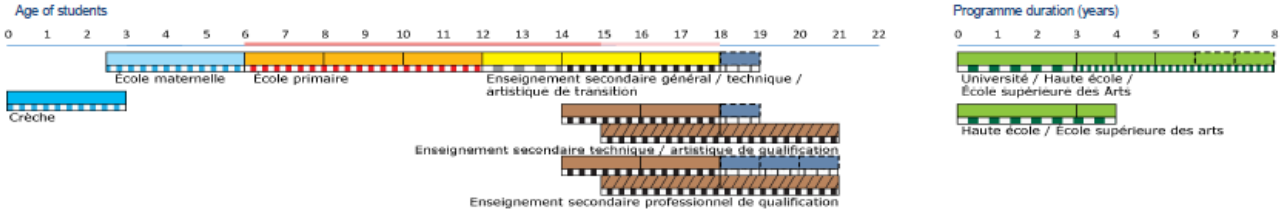
Note: According to the Law of National Education No 1/2011 with completions, at the art. 23(1), e), *Invatamant postliceal* is defined as non-university tertiary education (*Învățământ terțiar non-universitar*).
According to the International Standard Classification on Education (ISCED), *Invatamant postliceal* is defined as ISCED 4 level.

Other CAN-MDS relevant countries

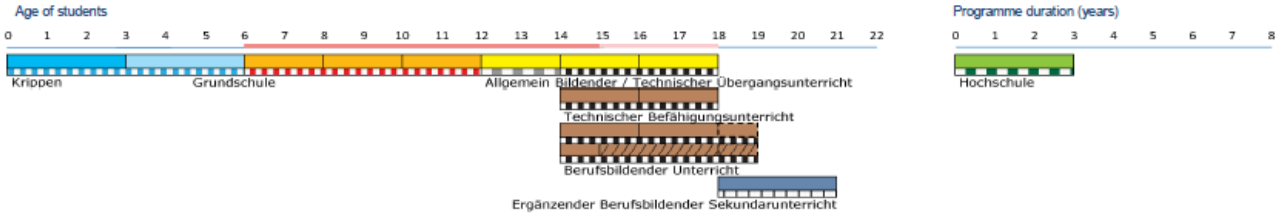
The Structure of the European Education Systems 2014/15: Schematic Diagrams November 2014

Source: http://eacea.ec.europa.eu/education/eurydice/documents/facts_and_figures/education_structures_EN.pdf

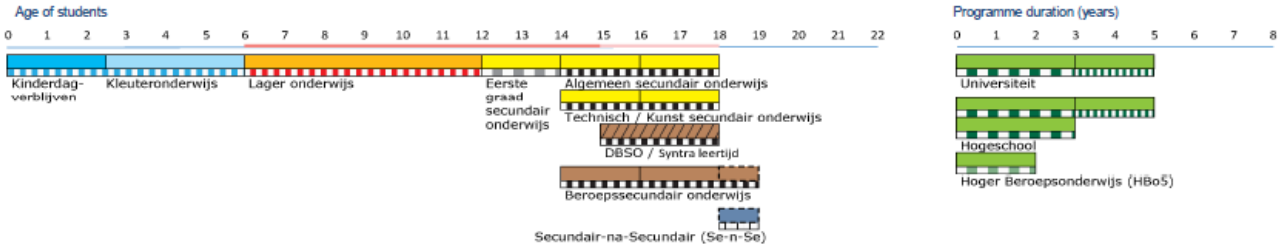
Belgium – French Community

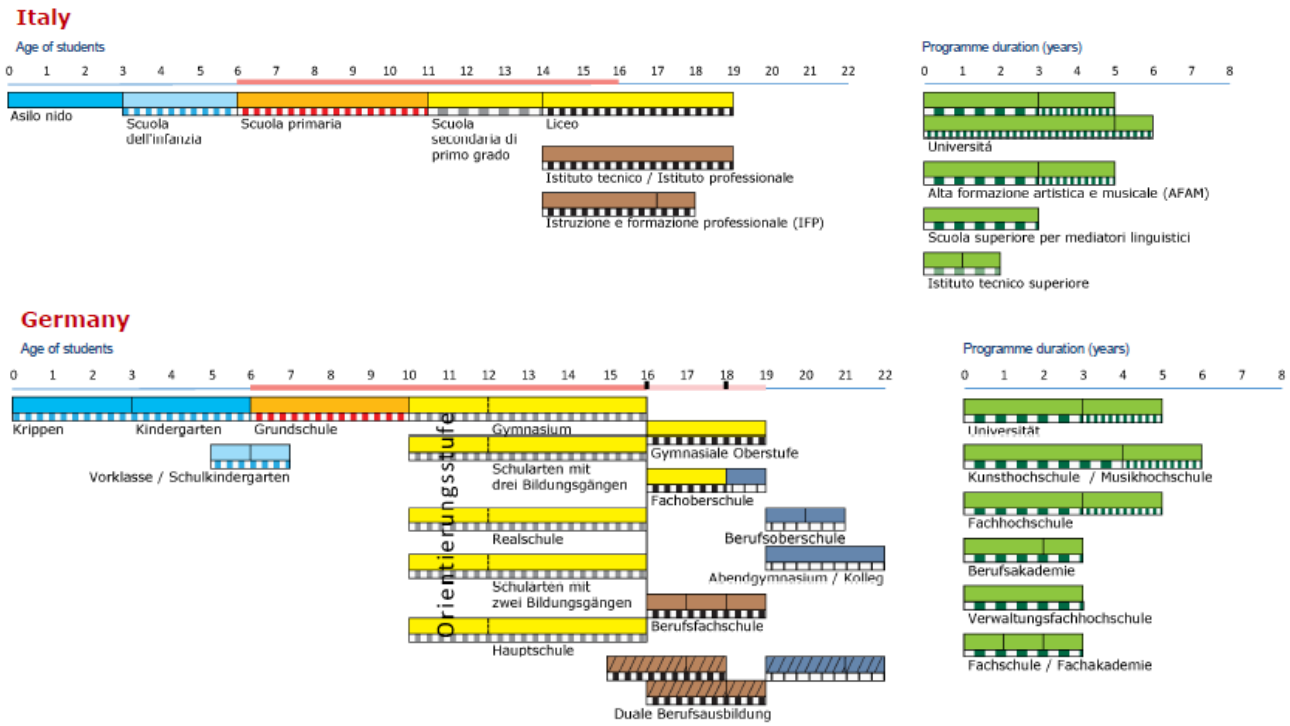


Belgium – German-speaking Community



Belgium – Flemish Community





Early childhood education and care (ECEC)

Provision for children from birth through to primary education that falls within a national regulatory framework, i.e., it has to comply with a set of rules, minimum standards and/or undergo accreditation procedures.

Source: European Commission/EACEA/Eurydice, 2019. *Key Data on Early Childhood Education and Care in Europe-2019 Edition.* Eurydice Report. Luxembourg: Publications Office of the European Union. Available at: https://eacea.ec.europa.eu/national-policies/eurydice/sites/eurydice/files/ec0319375enn_0.pdf

Age from which a place in ECEC is guaranteed, 2018/19

	BE fr	BE de	BE nl	BG	CY	CH	DE	EL	ES	FR	IT	RO
Starting age (in years) of guaranteed ECEC place	2½	3	2½	5	4.7	4	1	4	3	3	-	-

Explanatory note: The Figure shows the earliest age from which a place in ECEC is guaranteed for all children. In the table, a legal entitlement is shown in black, while compulsory ECEC is marked in bold dark red.

Country-specific notes

Greece: Compulsory ECEC attendance is being gradually implemented until 2020/21.

France: ECEC attendance will become compulsory from age 3 on 1st September 2019 (final parliamentary discussion in progress).

Cyprus: 4.7 years correspond to 4 years 8 months.

Weekly ECEC hours, by type of guarantee, 2018/19

	BE fr	BE de	BE nl	BG	CY	CH	DE	EL	ES	FR	IT	RO
Legal entitlement	23	23	23	-	-	-	*	50	25	24	-	-
Complulsory ECEC	-	-	-	15-17	26	10-20	-	25	-	-	-	-

** no top-level regulations*

Explanatory note: When the number of hours or the type of guarantee (legal entitlement/compulsory ECEC) varies by age, the earliest age threshold is shown in the figure. When the number of hours varies by region or by type of guarantee, the lowest number is taken into account.

Country-specific notes

Belgium: 28 periods of 50 minutes.

Bulgaria: 5-year-olds: 15-22 hours; 6-year-olds: 17-24 hours.

Germany: Top-level legislation states that the extent of daily care is based on the child's individual need −10 of the 16 Länderhave specifications ranging from a guaranteed 4 hours a day up to 10 hours. The higher levels are in the eastern Länder(Schreyer and Oberhuemer, 2017).

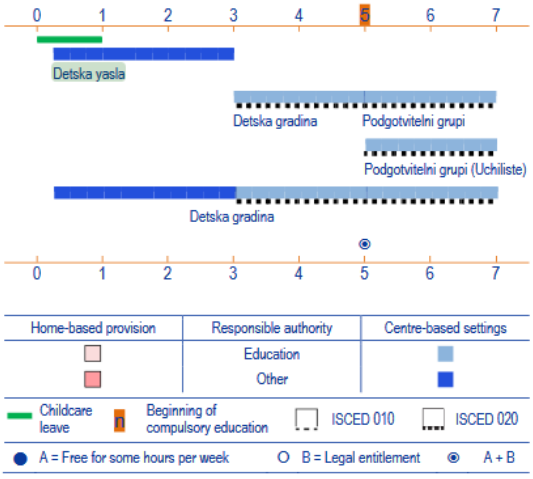
Switzerland: Cantonal regulations vary. In some cantons, the number of weekly hours exceeds 20.

ECEC Organization per country - Reference year 2018/19

Available at: https://eacea.ec.europa.eu/national-policies/eurydice/sites/eurydice/files/ec0319375enn_0.pdf

Bulgaria

Diagram



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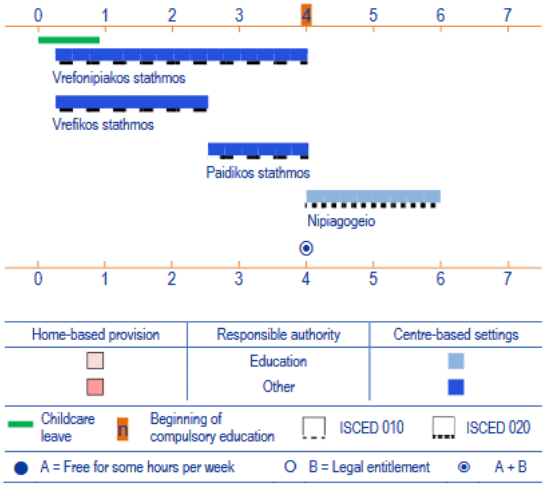
Greece

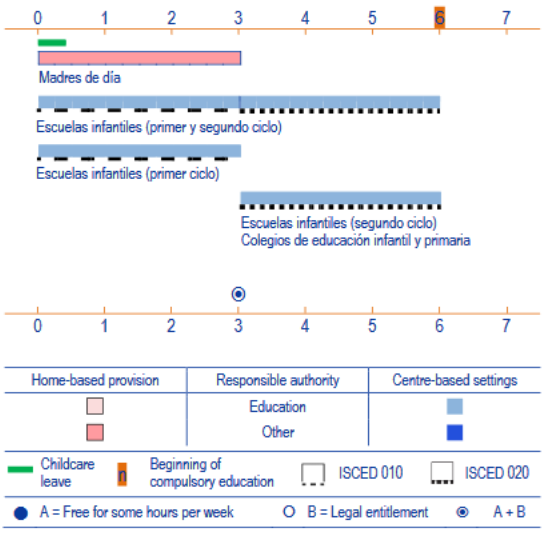
Diagram



(page 174)

Spain

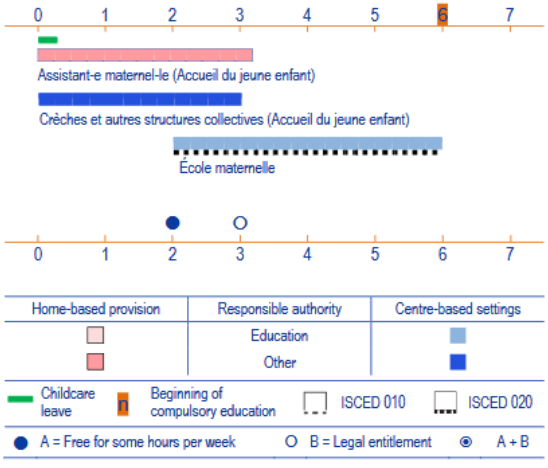
Diagram



(page 175)

France

Diagram



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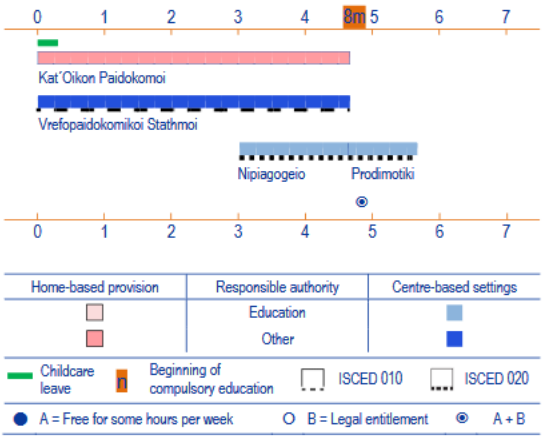
Cyprus

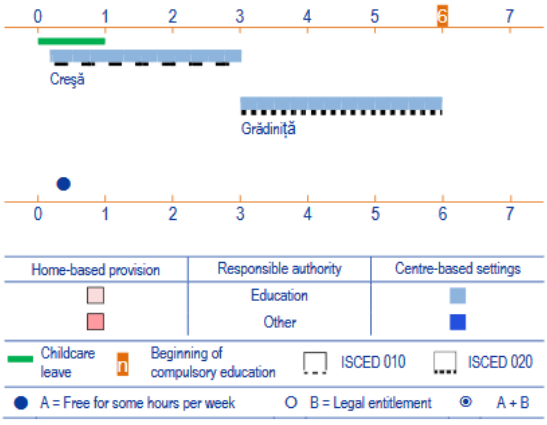
Diagram



(page 179)

Romania

Diagram



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WORKING FILE 6. MANDATORY AND RECOMMENDED VACCINATIONS

[Related to I3_B_3.01] Omissions < Medical neglect < **failure to provide preventive health care** < **vaccinations**

National adaptation according to "Modality of implementation of childhood vaccination programme by country"[37]

	Belgium	Bulgaria	Cyprus	France	Germany	Greece	Italy	Romania	Spain
Diphtheria	RA	MA	RA	MA/MR/RA[1]	RA	MA	MA[2]	MA	RA
Haemophilus influenzae type B	RA	MA	RA	RA	RA	RA	RA	MA	RA
Hepatitis A	RR	RR	RR	RR	RR	RA	A[3]	RR	RR/RA[6]
Hepatitis B	MR/RA[4]	MA	RA	MR/RA[4]	RA	MA[5]	MA	MA	RA
Human Papillomavirus a	R	R	A	R	R	R	R	R	R
Influenza	RR	RR	RR	RR	RR	RR	RR	RR	RR
Invasive disease caused by Neisseria meningitides group C	RA	A	RA	RA	RA	RA	RA/RR[6]	RA	RA
Invasive pneumococcal disease	RA	MA/RA[7]	RA	RA	RA	RA	RA/RR[6]	A	RR/RA[6]
Measles-mumps-Rubella	RA	MA	RA	RA	RA	RA	RA	MA	RA
Pertussis	RA	MA	RA	RA	RA	RA	RA	MA	RA
Polio	MA	MA	RA	MA/MR/RA[8]	RA	MA[5]	MA	MA	RA
Rotavirus	RA	RA	A	A	A	A	A	A	A
Tetanus	RA	MA	RA	MA/MR/RA[1]	RA	MA	MA	MA	RA
Tuberculosis (with Bacillus Calmette-Guérin)	A	MA	RR	MR/RR[4]	A	RA	RR	MA	A[9]
Varicella	RR	A	RA/RR	RR	RA	RA	RA/RR[6]	A	RA/RR

MA: mandatory for all
MR: mandatory for people at risk
RA: recommended for all
RR: recommended for people at risk
R: recommended
A: absence of recommendation

1. MA: children up to 18 months of age./ MR: healthcare workers./ RA: bolder than 13 years of age.
2. One of 20 regions does not have any mandatory vaccination as of 2008.
3. RA: only in one region.
4. Mandatory for healthcare workers.
5. No penalty exists for non-compliance.
6. Regional variability.
7. RA: children born prior to 2010 and younger than five years of age.
8. MA: children up to 13 years of age. MR: healthcare workers. RA: older than 13 years of age.

[37] Haverkate M, D'Ancona F, Giambi C, Johansen K, Lopalco PL, Cozza V, Appelgren E, on behalf of the VENICE project gatekeepers and contact points. Mandatory and recommended vaccination in the EU, Iceland and Norway: results of the VENICE 2010 survey on the ways of implementing national vaccination programmes. Euro Surveill. 2012;17(22):pii=20183. Available online: http://www.eurosurveillance.org/ViewArticle.aspx?ArticleId=20183

9. RA: from 2011.

Available at: https://www.eurosurveillance.org/images/dynamic/EE/V17N22/DAncona_tab1-rev2.jpg

TABLE 1

Modality of implementation of childhood vaccination programme by country, the European Union countries, Iceland and Norway, 2010 (n=29)*

Country	Diphtheria	*Haemophilus influenzae* type B	Hepatitis A	Hepatitis B	Human papillomavirus[a]	Influenza	Invasive disease caused by *Neisseria meningitides* group C	Invasive pneumococcal disease	Measles-mumps-rubella	Pertussis	Polio	Rotavirus	Tetanus	Tuberculosis (with Bacillus Calmette-Guérin)	Varicella
Austria	RA	RA	RR	RA	R	RR	RA	RA	RA	RA	RA	RA	RA	A	RR
Belgium	RA	RA	RR	MR/RA[b]	R	RR	RA	RA	RA	RA	MA	RA	RA	A	RR
Bulgaria	MA	MA	RR	MA	R	RR	A	MA/RA[c]	MA	MA	MA	RA	MA	MA	A
Cyprus	RA	RA	RR	RA	A	RR	RA	RA	RA	RA	RA	A	RA	RR	RA/RR
Czech Republic	MA	MA	MR	MA	R	RR	RR	MR	MA	MA	MA	A	MA	MR	RR
Denmark	RA	RA	RR	RR	R	RR	RR	RA/RR[d]	RA	RA	RA	A	RA	A	RR
Estonia [6]	RA	RA	RA[e]	RA	R[e]	RA[e]	RR[e]	RR[e]	RA	RA	RA	RR[e]	RA	RA	RR[e]
Finland	RA	RA	RR	RR	A	RA	A	RA	RA	RA	RA	RA	RA	RR	A
France	MA/MR/RA[f]	RA	RR	MR/RA[b]	R	RR	RA	RA	RA	RA	MA/MR/RA[g]	A	MA/MR/RA[f]	MR/RR[b]	RR
Germany [7]	RA	RA	RR	RA	R	RR	RA	RA	RA	RA	RA	A	RA	A	RA
Greece	MA	RA	RA	MA[h]	R	RR	RA	RA	RA	RA	MA[h]	A	MA	RA	RA
Hungary	MA	MA	MR	MA	A	RR	A	RA	MA	MA	MA	A	MA	MA	A
Iceland	RA	RA	RR	RR	A	RR	RA	RR/RA[i]	RA	RA	RA	A	RA	A	RR
Ireland	RA	RA	RR	RA	R	RR	RA	RA	RA	RA	RA	A	RA	RA	RR
Italy	MA[j]	RA	A[j]	MA	R	RR	RA/RR[k]	RA/RR[k]	RA	RA	MA	A	MA	RR	RA/RR[k]
Latvia	RA	RA	RR	RA	RA	RR	RR	RA	RA	RA	RA	RA	RA	RA	RA
Lithuania	RA	RA	RR	RA	A	RR	RR	RR	RA	RA	RA	A	RA	RA	RR
Luxembourg [8]	RA	RA	RR	RA	R	RR	RA	RA	RA	RA	RA	RA	RA	RR	RA
Malta	MA	RA	RR	RA	A	RA	A	RR[e]	RA[m]	RA	MA	A	MA	RA	RR
The Netherlands [9]	RA	RA	RR	RR	R	RR	RA	RA	RA	RA	RA	A	RA	RR	A
Norway	RA	RA	A	RR	R	RR	A	RA	RA	RA	RA	A	RA	RR	A
Poland	MA	MA	RR	MA	R	RR	RR	MR	MA	MA	MA	RA	MA	MA	RR
Portugal	RA/MR	RA	A	RA	R	RR	RA	RR	RA	RA	RA	A	RA/MR	RA	A
Romania	MA	MA	RR	MA	R	RR	A	A	MA	MA	MA	A	MA	MA	A
Slovakia	MA	MA	MR/RR[o]	MA	R	MR/RR[o]	RR	MA	MA	MA	MA	A	MA	MA	A
Slovenia	MA	MA	RR	MA	R	RR	RR	RR	MA	MA	MA	RA	MA	RR	RR
Spain	RA	RA	RR/RA[k]	RA	R	RR	RA	RA/RR[k]	RA	RA	RA	A	RA	A[l]	RA/RR[k]
Sweden	RA	RA	A	RR	R	RR	A	RA	RA	RA	RA	A	RA	RR	A
United Kingdom	RA	RA	RR	RR	R	RR	RA	RA	RA	RA	RA	A	RA	RR	RR

A: absence of recommendation, MA: mandatory for all; MR: mandatory for people at risk; R: recommended; RA: recommended for all; RR: recommended for people at risk.

[a] Mostly recommended for girls 10-17 years of age.

[b] Mandatory for healthcare workers.

[c] RA: children born prior to 2010 and younger than five years of age.

[d] RA: conjugated vaccine to children younger than two years of age.
RR: polysaccharide vaccine to older persons.

[e] Not included in the national immunisation programme, but recommended by the Ministry of Social Affairs [10].

[f] MA: children up to 18 months of age.
MR: healthcare workers.
RA: older than 13 years of age.

[g] MA: children up to 13 years of age.
MR: healthcare workers.
RA: older than 13 years of age.

[h] No penalty exists for non-compliance.

[i] RA: from 2011.

[j] One of 20 regions does not have any mandatory vaccination as of 2008.

[k] Regional variability.

[l] RA: only in one region.

[m] Rubella: mandatory for girls by the age of 14.

[n] RR: for children under two years of age.

[o] MR: social care facilities.
RR: children six months to 12 years, elderly, for some diagnoses, for some professions.

[p] MR: direct contact with infectious person, some professions.
RR: chronic liver disease, children two years of age living in bad conditions, some professions.

WORKING FILE 7. Secondary Data for Mandatory reporting of CAN

(Professional) group	Mandated for report CAN	Related law
1.		
2.		
. ….		
n.		

Example: Greece

(Professional) group	Mandated for report CAN	Related law
1. Teachers (private and public schools, primary and secondary education)	Mandated to report CAN to Public Prosecutor	L 3500/2006, para. 23 (1,2) requires that any teacher working in public or private educational institution, or Unit of Preschool education who is realize or is informed that a crime of domestic violence against a minor has been committed, has the obligation to notify the Principal of the School and the Principal has the obligation to report the information to the Prosecutor or the Police immediately. This is the only case where the obligation of professionals to submit reports for CAN cases is legally mandated –even though no penalty is provisioned in case of non-reporting.
2. Medical doctors, mental health professionals, social workers etc. in public services	Mandated to report CAN to appropriate authorities (prosecutor, police)	Under general law provisions for public officers **Code of Criminal Procedure, Article 36.1**: The Investigators who have been informed about an offense prosecuted ex officio (i.e. including CAN case) should immediately to announce it to the Public Prosecutor. **Article 36.2**: All civil servants, including those in which assigned temporary public service, have the same obligation in regards to the offenses they were informed during the performance of their duties. **Article 40.1**: Even civilians who perceived themselves an offense prosecuted ex officio are obliged to announce it to the Public Prosecutor or any other Investigator. **Penal Code, Article 232.1**: criminal offence also constitutes the concealment of a felony that someone was informed about that already happened or is planned (such as serious injury of a minor, intended bodily harm, rape, incest, child abuse in lasciviousness, child seduction, pimping, lewdness with a minor fee). **Code of Criminal Procedure, Article 42.1:** Everyone has the right to complain for offenses prosecuted ex officio and not only the person who was wronged.
. ….		
n.		

WORKING FILE 8. NATIONAL OMBUDSPERSONS

National Ombudspersons (http://www.ombudsman.europa.eu/en/atyourservice/nationalombudsmen.faces)

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WORKING FILE 9. Matcing of CAN-MDS with existing systems (DSM-V, ICD-10 and ICD-9)

DSM-5 Diagnoses and ICD-9-CM and ICD-10-CM Codes, Numerical ICD-10-CM Listing and CAN-MDS coding

This is a listing of the DSM-5 diagnoses with ICD-10-CM codes and ICD-9-CM codes (this listing includes the corrections dated 6/20/13)

DSM-IV-TR codes are (a subset of) ICD-9-CM codes and so can probably be found in the ICD-9-CM column.

CAN-MDS-related	Sub-code	DSM-5 diagnoses: Disorder, condition, or problem	ICD-10-CM	ICD-9-CM
I3_B_2.01 I3_A_2.2	I3_B_2.01 I3_A_2.2.03 I3_A_2.2.09	Overweight or obesity	E66.9	278.00
I3_A_1	I3_A_1.02	*Alcohol use disorder mild*	*F10.10*	*305.00*
	I3_A_1.02	*Alcohol use disorder moderate or severe*	*F10.20*	*303.90*
	I3_A_1.02	*Amphetamine-type substance use disorder, Mild*	*F15.10*	*305.70*
	I3_A_1.02	*Amphetamine-type substance use disorder, Moderate or Severe*	*F15.20*	*304.40*
	I3_A_1.02	*Cannabis use disorder, Mild*	*F12.10*	*305.20*
	I3_A_1.02	*Cannabis use disorder, Moderate or severe*	*F12.20*	*304.30*
	I3_A_1.02	*Cocaine use disorder, Mild*	*F14.10*	*305.60*
	I3_A_1.02	*Cocaine use disorder, Moderate or severe*	*F14.20*	*304.20*
	I3_A_1.02	*Inhalant use disorder, Mild*	*F18.10*	*305.90*
	I3_A_1.02	*Inhalant use disorder, Moderate or severe*	*F18.20*	*304.60*
	I3_A_1.02	*Opioid use disorder, Mild*	*F11.10*	*305.50*
	I3_A_1.02	*Opioid use disorder, Moderate or severe*	*F11.20*	*304.00*
	I3_A_1.02	*Other (or unknown) substance use disorder, Mild*	*F19.10*	*305.90*
	I3_A_1.02	*Other (or unknown) substance use disorder, Moderate or severe*	*F19.20*	*304.90*
	I3_A_1.02	*Other hallucinogen use disorder, Mild*	*F16.10*	*305.30*
	I3_A_1.02	*Other hallucinogen use disorder, Moderate or severe*	*F16.20*	*304.50*
	I3_A_1.02	*Other or unspecified stimulant use disorder, Mild*	*F15.10*	*305.70*
	I3_A_1.02	*Other or unspecified stimulant use disorder, Moderate or severe*	*F15.20*	*304.40*
	I3_A_1.02	*Phencyclidine use disorder, Mild*	*F16.10*	*305.90*
	I3_A_1.02	*Phencyclidine use disorder, Moderate or severe*	*F16.20*	*304.60*
	I3_A_1.02	*Sedative, hypnotic, or anxiolytic use disorder, Mild*	*F13.10*	*305.40*
	I3_A_1.02	*Sedative, hypnotic, or anxiolytic use disorder, Moderate or severe*	*F13.20*	*304.10*

	I3_A_1.02	*Tobacco use disorder, Mild*	*Z72.0*	*305.1*
	I3_A_1.02	*Tobacco use disorder, Moderate or severe*	*F17.200*	*305.1*
I3_A_1	I3_A_1.01	Anorexia nervosa, Restricting type	F50.01	
	I3_A_1.01	Anorexia nervosa, Binge-eating/purging type	F50.02	
	I3_A_1.01	Bulimia nervosa	F50.2	307.51
	I3_A_1.01	Avoidant/restrictive food intake disorder	F50.8	307.59
	I3_A_1.01	Binge-eating disorder	F50.8	307.51
	I3_A_1.01	Other specified feeding or eating disorder	F50.8	307.59
	I3_A_1.01	Unspecified feeding or eating disorder	F50.9	307.50
DE_F3	F3_03	Gender dysphoria in adolescents and adults	F64.1	302.85
DE_C2	C2_03	Gender dysphoria in children	F64.2	302.6
DE_C2 DE_F3	C2_03 F3_03	Other specified gender dysphoria	F64.8	302.6
DE_C2 DE_F3	C2_03 F3_03	Unspecified gender dysphoria	F64.9	302.6
I3_A_3.1	I3_A_3.1.05	Exhibitionistic disorder **(of perpetrator)**	F65.2	302.4
I3_A_3.1	I3_A_3.1.07	Voyeuristic disorder **(of perpetrator)**	F65.3	302.82
I3_A_3.1	I3_A_3.1.88	Pedophilic disorder **(of perpetrator)**	F65.4	302.2
I3_A_2.3	I3_A_2.3.01 I3_A_2.3.02 I3_A_2.3.03	Frotteuristic disorder **(of caregiver)**	F65.81	302.89
I3_A_2.3	I3_A_2.3.01 I3_A_2.3.02 I3_A_2.3.03	Factitious disorder **(of caregiver)**	F68.10	300.19
I3_B_4.04	I3_B_4.04	Intellectual disability (intellectual developmental disorder), Mild	F70	317
I3_B_4.04	I3_B_4.04	Intellectual disability (intellectual developmental disorder), Moderate	F71	318.0
I3_B_4.04	I3_B_4.04	Intellectual disability (intellectual developmental disorder), Severe	F72	318.1
I3_B_4.04	I3_B_4.04	Intellectual disability (intellectual developmental disorder), Profound	F73	318.2
I3_B_4.04	I3_B_4.04	Unspecified intellectual disability (intellectual developmental disorder)	F79	319
I3_B_4.04	I3_B_4.04	Speech sound disorder	F80.0	315.39
I3_B_4.04	I3_B_4.04	Childhood-onset fluency disorder (stuttering)	F80.81	315.35
I3_B_4.04	I3_B_4.04	Social (pragmatic) communication disorder	F80.89	315.39
I3_B_4.04	I3_B_4.04	Language disorder	F80.9	315.39

I3_B_4.04	I3_B_4.04	Unspecified communication disorder	F80.9	307.9
I3_B_4	I3_B_4.04	Specific learning disorder, With impairment in reading	F81.0	315.00
I3_B_4	I3_B_4.04	Specific learning disorder, With impairment in mathematics	F81.2	315.1
I3_B_4	I3_B_4.04	Specific learning disorder, With impairment in written expression	F81.81	315.2
I3_B_4 I3_B_3	I3_B_4.04 I3_B_3.02	Developmental coordination disorder	F82	315.4
I3_B_4 I3_B_3	I3_B_4.04 I3_B_3.02	Autism spectrum disorder	F84.0	299.00
I3_B_4 I3_B_3	I3_B_4.04 I3_B_3.02	Global developmental delay	F88	315.8
I3_B_4 I3_B_3	I3_B_4.04 I3_B_3.02	Other specified neurodevelopmental disorder	F88	315.8
I3_B_4 I3_B_3	I3_B_4.04 I3_B_3.02	Unspecified neurodevelopmental disorder	F89	315.9
I3_B_4 I3_B_3	I3_B_4.04 I3_B_3.02	Attention-deficit/hyperactivity disorder, Predominantly inattentive presentation	F90.0	314.00
I3_B_4 I3_B_3	I3_B_4.04 I3_B_3.02	Attention-deficit/hyperactivity disorder, Predominantly hyperactive/impulsive presentation	F90.1	314.01
I3_B_4 I3_B_3	I3_B_4.04 I3_B_3.02	Attention-deficit/hyperactivity disorder, Combined presentation	F90.2	314.01
I3_B_4 I3_B_3	I3_B_4.04 I3_B_3.02	Other specified attention-deficit/hyperactivity disorder	F90.8	314.01
I3_B_4 I3_B_3	I3_B_4.04 I3_B_3.02	Unspecified attention-deficit/hyperactivity disorder	F90.9	314.01
I3_B_4 I3_B_3	I3_B_4.04 I3_B_3.02	Conduct disorder, Childhood-onset type	F91.1	312.81
I3_B_4 I3_B_3	I3_B_4.04 I3_B_3.02	Conduct disorder, Adolescent-onset type	F91.2	312.82
I3_B_4 I3_B_3	I3_B_4.04 I3_B_3.02	Oppositional defiant disorder	F91.3	313.81
I3_B_4 I3_B_3	I3_B_4.04 I3_B_3.02	Other specified disruptive, impulse-control, and conduct disorder	F91.8	312.89
I3_B_4 I3_B_3	I3_B_4.04 I3_B_3.02	Conduct disorder, Unspecified onset	F91.9	312.89
I3_B_4 I3_B_3	I3_B_4.04 I3_B_3.02	Unspecified disruptive, impulse-control, and conduct disorder	F91.9	312.9
I3_B_4	I3_B_4.04	Separation anxiety disorder	F93.0	309.21

I3_B_3	I3_B_3.02			
I3_B_4 I3_B_3	I3_B_4.04 I3_B_3.02	Selective mutism	F94.0	313.23
I3_B_4 I3_B_3	I3_B_4.04 I3_B_3.02	Reactive attachment disorder	F94.1	313.89
I3_B_4 I3_B_3	I3_B_4.04 I3_B_3.02	Disinhibited social engagement disorder	F94.2	313.89
I3_B_4 I3_B_3	I3_B_4.04 I3_B_3.02	Provisional tic disorder	F95.0	307.21
I3_B_4 I3_B_3	I3_B_4.04 I3_B_3.02	Persistent (chronic) motor or vocal tic disorder	F95.1	307.22
I3_B_4 I3_B_3	I3_B_4.04 I3_B_3.02	Tourette's disorder	F95.2	307.23
I3_B_4 I3_B_3	I3_B_4.04 I3_B_3.02	Other specified tic disorder	F95.8	307.20
I3_B_4 I3_B_3	I3_B_4.04 I3_B_3.02	Unspecified tic disorder	F95.9	307.20
I3_B_4 I3_B_3	I3_B_4.04 I3_B_3.02	Enuresis	F98.0	307.6
I3_B_4 I3_B_3	I3_B_4.04 I3_B_3.02	Encopresis	F98.1	307.7
I3_A_1	*I3_A_1.01*	Rumination disorder	F98.21	307.53
I3_A_1	*I3_A_1.01*	Pica, In children	F98.3	
I3_A_4.3	I3_A_4.3.01.2	Spouse or partner neglect, Confirmed, Initial encounter	T74.01XA	995.85
I3_A_4.3	I3_A_4.3.01.2	Spouse or partner neglect, Confirmed, Subsequent encounter	T74.01XD	995.85
I3_B		Child neglect, Confirmed, Initial encounter	T74.02XA	995.52
I3_B		Child neglect, Confirmed, Subsequent encounter	T74.02XD	995.52
I3_A_4.3	I3_A_4.3.01.2	Spouse or partner violence, Physical, Confirmed, Initial encounter	T74.11XA	995.81
I3_A_4.3	I3_A_4.3.01.2	Spouse or partner violence, Physical, Confirmed, Subsequent encounter	T74.11XD	995.81
I3_A_2		Child physical abuse, Confirmed, Initial encounter	T74.12XA	995.54
I3_A_2		Child physical abuse, Confirmed, Subsequent encounter	T74.12XD	995.54
I3_A_4.3 I3_A_3.1	I3_A_4.3.01.2 I3_A_3.1.10	Spouse or partner Violence, Sexual, Confirmed, Initial encounter	T74.21XA	995.83
I3_A_4.3 I3_A_3.1	I3_A_4.3.01.2 I3_A_3.1.10	Spouse or partner Violence, Sexual, Confirmed, Subsequent encounter	T74.21XD	995.83

I3_A_3		Child sexual abuse, Confirmed, Initial encounter	T74.22XA	995.53
I3_A_3		Child sexual abuse, Confirmed, Subsequent encounter	T74.22XD	995.53
I3_A_4.3	I3_A_4.3.01.2	Spouse or partner abuse, Psychological, Confirmed, Initial encounter	T74.31XA	995.82
I3_A_4.3	I3_A_4.3.01.2	Spouse or partner abuse, Psychological, Confirmed, Subsequent encounter	T74.31XD	995.82
I3_A_4		Child psychological abuse, Confirmed, Initial encounter	T74.32XA	995.51
I3_A_4		Child psychological abuse, Confirmed, Subsequent encounter	T74.32XD	995.51
I3_A_4.3	I3_A_4.3.01.2	Spouse or partner neglect, Suspected, Initial encounter	T76.01XA	995.85
I3_A_4.3	I3_A_4.3.01.2	Spouse or partner neglect, Suspected, Subsequent encounter	T76.01XD	995.85
I3_B		Child neglect, Suspected, Initial encounter	T76.02XA	995.52
I3_B		Child neglect, Suspected, Subsequent encounter	T76.02XD	995.52
I3_A_4.3	I3_A_4.3.01.2	Spouse or partner Violence, Physical, Suspected, Initial encounter	T76.11XA	995.81
I3_A_4.3	I3_A_4.3.01.2	Spouse or partner Violence, Physical, Suspected, Subsequent encounter	T76.11XD	995.81
I3_A_2		Child physical abuse, Suspected, Initial encounter	T76.12XA	995.54
I3_A_2		Child physical abuse, Suspected, Subsequent encounter	T76.12XD	995.54
I3_A_4.3	I3_A_4.3.01.2	Spouse or partner Violence, Sexual, Suspected, Initial encounter	T76.21XA	995.83
I3_A_4.3	I3_A_4.3.01.2	Spouse or partner Violence, Sexual, Suspected, Subsequent encounter	T76.21XD	995.83
I3_A_3		Child sexual abuse, Suspected, Initial encounter	T76.22XA	995.53
I3_A_3		Child sexual abuse, Suspected, Subsequent encounter	T76.22XD	995.53
I3_A_4.3	I3_A_4.3.01.2	Spouse or partner abuse, Psychological, Suspected, Initial encounter	T76.31XA	995.82
I3_A_4.3	I3_A_4.3.01.2	Spouse or partner abuse, Psychological, Suspected, Subsequent encounter	T76.31XD	995.82
I3_A_4		Child psychological abuse, Suspected, Initial encounter	T76.32XA	995.51
I3_A_4		Child psychological abuse, Suspected, Subsequent encounter	T76.32XD	995.51
I3_B_4	I3_B_4.88	Academic or educational problem	Z55.9	V62.3
I3_B_2	I3_B_2.04	Homelessness	Z59.0	V60.0
I3_B_2	I3_B_2.04	Inadequate housing	Z59.1	V60.1
I3_B_5	I3_B_5.01.2	Discord with neighbor, lodger, or landlord	Z59.2	V60.89
I3_A_2 I3_A_3	I3_A_2.1 I3_A_2.5 I3_A_2.88 I3_A_3.88	Problem related to living in a residential institution	Z59.3	V60.6

I3_A_4 I3_B	I3_A_4.88			
I3_B_2	I3_B_2.01	Lack of adequate food or safe drinking water	Z59.4	V60.2
I3_B		Extreme poverty	Z59.5	V60.2
I3_B		Low income	Z59.6	V60.2
I3_B_2 I3_B_3	I3_B_2.88 I3_B_3.88	Insufficient social insurance or welfare support	Z59.7	V60.2
I3_B_2	I3_B_2.04	Unspecified housing or economic problem	Z59.9	V60.9
I3_B_6 I3_B_7	I3_B_6.88 I3_B_7.88	Problem related to living alone	Z60.2	V60.3
I3_B_4	I3_B_4.88	Acculturation difficulty	Z60.3	V62.4
I3_A_4.1	I3_A_4.1.07	Social exclusion or rejection	Z60.4	V62.4
I3_A_4.1	I3_A_4.1.01 I3_A_4.1.02 I3_A_4.1.03	Target of (perceived) adverse discrimination or persecution	Z60.5	V62.4
I3_A_4.1		Unspecified problem related to social environment	Z60.9	V62.9
I3_B_7		Upbringing away from parents	Z62.29	V61.8
I3_A_2		Personal history (past history) of physical abuse in childhood	Z62.810	V15.41
I3_A_3		Personal history (past history) of sexual abuse in childhood	Z62.810	V15.41
I3_A_4		Personal history (past history) of psychological abuse in childhood	Z62.811	V15.42
I3_B		Personal history (past history) of neglect in childhood	Z62.812	V15.42
I3_B_1 I3_A_4.1	I3_B_1.01 I3_B_1.02 I3_B_1.03 I3_B_1.88 I3_A_4.1.88	Parent-child relational problem	Z62.820	V61.20
I3_A_4.3 I3_A_4.1	I3_A_4.3.01 I3_A_4.1.88	Sibling relational problem	Z62.891	V61.8
I3_B		Child affected by parental relationship distress	Z62.898	V61.29
I3_A_4	I3_A_4.88	Disruption of family by separation or divorce	Z63.5	V61.03
I3_A_4	I3_A_4.88	High expressed emotion level within family	Z63.8	V61.8
I3_B	I3_B_1 I3_B_2 I3_B_3 I3_B_5 I3_B_7	Problems related to unwanted pregnancy	Z64.0	V61.7

	I3_B_88			
I3_B	I3_B_88	Problems related to multiparity	Z64.1	V61.5
S2_A	S2_A_02 S2_A_04	Discord with social service provider, including probation officer, case manager, or social services worker	Z64.4	V62.89
I3_A_4.2	I3_A_4.2.01 I3_A_4.2.05	Conviction in civil or criminal proceedings without imprisonment	Z65.0	V62.5
I3_A_1	*I3_A_1.88*	Imprisonment or other incarceration	Z65.1	V62.5
I3_A_1	*I3_A_1.88*	Problems related to other legal circumstances	Z65.3	V62.5
I3_A_2 I3_A_3 I3_A_4	I3_A_2.3	Victim of crime	Z65.4	V62.89
I3_A_2.5		Victim of terrorism or torture	Z65.4	V62.89
I3_A_4.3	I3_A_4.3.02 I3_A_4.3.88	Exposure to disaster, war, or other hostilities	Z65.5	V62.22
I3_A_4.3	I3_A_4.3.88	Other problem related to psychosocial circumstances	Z65.8	V62.89
I3_A_4.2	I3_A_4.2.06	Religious or spiritual problem	Z65.8	V62.89
I3_B_5	I3_B_5.02 I3_B_5.88	Unspecified problem related to unspecified psychosocial circumstances	Z65.9	V62.9
S2_01.03	S2_1.3.01 S2_1.3.03	Other circumstances related to child neglect, Encounter for mental health services for victim of child neglect by parent	Z69.010	V61.21
S2_01.03	S2_1.3.01 S2_1.3.03	Other circumstances related to child physical abuse, Encounter for mental health services for victim of child abuse by parent	Z69.010	V61.21
S2_01.03	S2_1.3.01 S2_1.3.03	Other circumstances related to child psychological abuse, Encounter for mental health services for victim of child psychological abuse by parent	Z69.010	V61.21
S2_01.03	S2_1.3.01 S2_1.3.03	Other circumstances related to child sexual abuse, Encounter for mental health services for victim of child sexual abuse by parent	Z69.010	V61.21
S2_01.03	S2_1.3.02 S2_1.3.03	Other circumstances related to child neglect, Encounter for mental health services for perpetrator of parental child neglect	Z69.011	V61.22
S2_01.03	S2_1.3.02 S2_1.3.03	Other circumstances related to child physical abuse, Encounter for mental health services for perpetrator of parental child abuse	Z69.011	V61.22
S2_01.03	S2_1.3.02 S2_1.3.03	Other circumstances related to child psychological abuse, Encounter for mental health services for perpetrator of parental child psychological abuse	Z69.011	V61.22
S2_01.03	S2_1.3.02 S2_1.3.03	Other circumstances related to child sexual abuse, Encounter for mental health services for perpetrator of parental child sexual abuse	Z69.011	V61.22
S2_01.03	S2_1.3.01 S2_1.3.03	Other circumstances related to child neglect, Encounter for mental health services for victim of nonparental child neglect	Z69.020	V61.21

S2_01.03	S2_1.3.01 S2_1.3.03	Other circumstances related to child physical abuse, Encounter for mental health services for victim of nonparental child abuse	Z69.020	V61.21
S2_01.03	S2_1.3.01 S2_1.3.03	Other circumstances related to child psychological abuse, Encounter for mental health services for victim of nonparental child psychological abuse	Z69.020	V61.21
S2_01.03	S2_1.3.01 S2_1.3.03	Other circumstances related to child sexual abuse, Encounter for mental health services for victim of nonparental child sexual abuse	Z69.020	V61.21
S2_01.03	S2_1.3.02	Other circumstances related to spouse or partner abuse, Psychological, Encounter for mental health services for victim of spouse or partner psychological abuse	Z69.11	V61.11
S2_01.03	S2_1.3.02	Other circumstances related to spouse or partner neglect, Encounter for mental health services for victim of spouse or partner neglect	Z69.11	V61.11
S2_01.03	S2_1.3.02	Other circumstances related to spouse or partner violence, Physical, Encounter for mental health services for victim of spouse or partner violence	Z69.11	V61.11
S2_01.03	S2_1.3.02	Other circumstances related to spouse or partner abuse, Psychological, Encounter for mental health services for perpetrator of spouse or partner psychological abuse	Z69.12	V61.12
S2_01.03	S2_1.3.02	Other circumstances related to spouse or partner neglect, Encounter for mental health services for perpetrator of spouse or partner neglect	Z69.12	V61.12
S2_01.03	S2_1.3.02	Other circumstances related to spouse or partner violence, Physical, Encounter for mental health services for perpetrator of spouse or partner violence	Z69.12	V61.12
S2_01.03	S2_1.3.02	Other circumstances related to spouse or partner violence, Sexual, Encounter for mental health services for perpetrator of spouse or partner violence	Z69.12	V61.12
S2_01.03	S2_1.3.02	Other circumstances related to spouse or partner violence, Sexual, Encounter for mental health services for victim of spouse or partner violence	Z69.81	V61.11
S2_01.03	S2_1.3.01	Sex counseling	Z70.9	V65.49
S2_01.03	S2_1.3.01 S2_1.3.02 S2_1.3.03	Other counseling or consultation	Z71.9	V65.40
I3_B_6	I3_B_6.02.88	Tobacco use disorder, Mild	Z72.0	305.1
I3_A_1	*I3_A_1.88*	Child or adolescent antisocial behavior	Z72.810	V71.02
I3_A_1	*I3_A_1.88*	Problem related to lifestyle	Z72.9	V69.9
S2_A	S2_A_03 S2_A_05	Unavailability or inaccessibility of health care facilities	Z75.3	V63.9
S2_A	S2_A_03 S2_A_05	Unavailability or inaccessibility of other helping agencies	Z75.4	V63.8

I3_B_3	I3_B_3.01 I3_B_3.02 I3_B_3.05 I3_B_3.88	Nonadherence to medical treatment	Z91.19	V15.81
I3_A_4		Other personal history of psychological trauma	Z91.49	V15.49
I3_A_1	*I3_A_1.04*	Personal history of self-harm	Z91.5	V15.59
I3_B_6	I3_B_6.01 I3_B_6.88	Wandering associated with a mental disorder	Z91.83	V40.31
I3_A_1	*I3_A_1.88*	Other personal risk factors	Z91.89	V15.89

Adaptation of CAN-MDS Toolkit to country specifics

why needed

The CAN-MDS promotes the usage of a standard set of variables in order to collect comprehensive, comparable and reliable data among stakeholders deriving from different sectors within and among countries.
On the other hand, however, there are given differences among countries that should be handled in order for the CAN-MDS to be feasible to be applied in practice.
First, it is not possible for the system to operate in a single language; this makes translation of the whole toolkit imperative.
In addition, there are data elements such as agencies and operators to be involved that should be developed on the basis of the reality of each country.
Next, country profile reports showed differences in terms of already available infrastructures, practices, policies and legislation in regards to CAN cases administration; adaptation taking into account such country specifics should be made in order for the data elements to target valid and reliable data collection.
Lastly, content validity of the definitions of data element should be ensured for each individual data element, without however to modify the structure of the MDS. Instructions and definitions should be appropriate for all target groups (i.e. CAN-MDS operators with different professional backgrounds and responsibilities in the route of CAN cases administration), in order useful data to be collected and the collected data to be useful for all stakeholders.

which parts should be adapted in which way

Operator's Manual, e- application and Data collection protocol are the main components of CAN-MDS Toolkit. Supportive material for the Toolkit includes the eligibility criteria for Sectors and Operators and methodology for identifying the eligible data sources, the capacity building package (training module, training material, Trainer's Guide and evaluation methodology and tools) and the country profile reports, including up-to-date information for CAN related aspects (such as available infrastructures, legislation and ethics) at a national level.
From the above mentioned material methodology for national adaptation targets in CAN-MDS Toolkit, namely the Operator's Manual, e-application and Data collection protocol. Adaptation includes translation from EN to national official languages, development of content on the basis of national data, addition of country specific information and references and cultural adaptation of content on the basis of focus group discussions.
Tables 1 and 2 below suggests detailed adaptation to be used for each individual part of the toolkit

how to adapt the CAN-MDS Toolkit into National version

Translation

World Health Organization in its document entitled *Process of translation and adaptation of instruments*[38] mentions that "*the aim of this process is to achieve different language versions of the English instrument that are conceptually equivalent in each of the target countries/cultures. That is, the instrument should be equally natural and acceptable and should practically perform in the same way. The focus is on cross-cultural and conceptual, rather than on linguistic/literal equivalence. A well-established method to achieve this goal is to use forward-translations and back-translations*".

It is noted that in the context of the project only forward translation is provisioned (in terms of financial resources); it is suggested, however, that small samples of the material to be back-translated in order to be ensured the conceptual equivalent of the national version of the toolkit to English toolkit.

[38] World Health Organization. Process of translation and adaptation of instruments Available at: http://www.who.int/substance_abuse/research_tools/translation/en/

As for the forward translation, the recommendations that included in the above mentioned document are valid also for the case of CAN-MDS Toolkit. In this case the translator should preferably be a professional familiar with terminology of the area of child maltreatment and epidemiological surveillance; s/he should be knowledgeable of the English-speaking culture but his/her mother tongue should be the primary language of the target culture. National coordinator in each country should provide the translator with instructions in regards to the approach to translate such as to emphasize conceptual rather than literal translations, as well as the need to use natural and acceptable language for the CAN-MDS groups of operators, which are in fact heterogeneous.

World Health Organization suggests that the following general guidelines should be considered in this process:

- *Translators should always aim at the conceptual equivalent of a word or phrase, not a word-for-word translation, i.e. not a literal translation. They should consider the definition of the original term and attempt to translate it in the most relevant way.*
- *Translators should strive to be simple, clear and concise in formulating a question. Fewer words are better. Long sentences with many clauses should be avoided.*
- *The target language should aim for the most common audience. Translators should avoid addressing professional audiences such as those in medicine or any other professional group. They should consider the typical respondent for the instrument being translated and what the respondent will understand when s/he hears the question.*
- *Translators should avoid the use of any jargon. For example, they should not use:*
  - *technical terms that cannot be understood clearly; and*
  - *colloquialism, idioms or vernacular terms that cannot be understood by common people in everyday life.*
- *Translators should consider issues of gender and age applicability and avoid any terms that might be considered offensive to the target population.*

Related sources:
World Health Organization (1991). Guidelines for Translation & Adaptation of the Manual "Training in the Community for People with Disabilities". WHO/RHB/91.1. Geneva
CAMH. Culture Counts: A Guide to Best Practices for Developing Health Promotion Initiatives in Mental Health and Substance Use with Ethnocultural Communities. Culture Counts: A Roadmap to Health Promotion
Chavez, L.M., Canino, G., (2005). Toolkit on translating and adapting instruments. Human Services Research Institute, Cambridge.[39]

[39] Available at: http://www.hsri.org/files/uploads/publications/PN54_Translating_and_Adapting.pdf

Development of National CAN-MDS Toolkit

	Translation	Content (FG)	Country specific info	Completion/inclusion of new information
e-CAN-MDS	**Translation (based on excel file)**			

	Translation	Content (FG)	Country specific info	Completion/inclusion of new information
Data Collection Protocol	**Translation**		**Where needed**	**Screenshots of translated e-CAN-MDS**

Operator's Manual	Translation	Content (FG)	Country specific info	Completion/inclusion of new information
PART 1: Introducing the CAN-MDS	Translation	-	-	-
Introductory Note	Translation	-	1st paragraph-If needed	-
Background	Translation	-	-	-
Child maltreatment data collection – a common necessity worldwide	Translation	-	-	-
Documenting the necessity for CAN-MDS implementation in [COUNTRY]	-	-	Based on country profile report	Country name
Further reading	Translation	-	Link to country profile report	Country name/ reference/ link
Coordinated Response to Child Abuse & Neglect via a Minimum Data Set - *at a glance*	Translation	-	-	-
CAN-MDS v1.0 - *aim and objectives*	Translation	-	-	-
CAN-MDS Toolkit - *at a glance*	Translation	-	-	-
Structure of the CAN-MDS Toolkit	Translation	-	-	-

Operator's Manual	Translation	Content (FG)	Country specific info	Completion/inclusion of new information
CAN-MDS Operators: *eligibility criteria, prerequisites & roles*	Translation	-	-	-
Who can become a CAN-MDS Operator and How?	Translation	-	-	-
Eligibile professional backgrounds	Translation	-	Modify-if needed	Inventory of eligible operators
Prerequisites for an eligible professional to become CAN-MDS Operator	Translation	-	-	-
Roles of stakeholders as defined by the assigned Level of Access to CAN-MDS	Translation	-	Modify Table 1.2 Operators' Groups -if needed	Working file 4 (national administrator)
What a CAN-MDS Operator can contribute to CAN-MDS	Translation	-	-	-
What CAN-MDS can provide to a CAN-MDS Operator	Translation	-	-	-
Eligible incidents for CAN-MDS - *case definitions*	Translation	-	-	-
Child Maltreatment Incident	Translation	-	-	-
Child (alleged) victim	Translation	-	-	-
Defining Child Maltreatment	Translation	-	-	-
Means to overcome the definitions-related obstacle	Translation	-	-	-
Use of common conceptual definitions	Translation	-	-	-
Operationalization of conceptual definitions	Translation	-	-	-
Training of Professionals before they become Operators	Translation	-	-	-
Content of the Training workshops	Translation	-	-	-
Learning objectives	Translation	-	-	-
Ethics in CAN-MDS - *privacy and confidentiality considerations*	Translation	-	-	GDPR
Existing CAN surveillance mechanisms	-	-	according to country specifics and working file 9, iff appicable	-
Privacy of personal data: national Legislation	-	-	Define according to country specifics	GDPR ToR of National Administrative Authority & ToR of Administrator
CAN-MDS Stakeholders, Operations, Tasks and Responsibilities	Translation	-	-	-

Operator's Manual	Translation	Content (FG)	Country specific info	Completion/inclusion of new information
	of Figure 1.2			
		-		
PART 2: the Operator's Guide	Translation	-	-	-
Guide for Operators - *purpose and structure*	Translation	-	-	-
CAN-MDS v1.0 - *axes*	Translation	-	-	-
Axis: RECORD	Translation	-	-	-
Axis: INCIDENT	Translation	-	-	-
Axis: CHILD	Translation	-	Modify definition-if needed- for individuals>18	-
Axis: FAMILY	Translation	-	Define family according to national law	-
Axis: SERVICES	Translation	-	-	-
CAN-MDS v1 - *data collection and data reporting*	Translation	-	-	-
Entering new data in the CAN-MDS	Translation	-	-	-
CAN-MDS data entry	Translation	-	-	-
CAN-MDS data reporting	Translation	-	-	-
CAN-MDS data extraction	Translation	-	-	-
CAN-MDS Flowchart	Translation	-	-	-
Data elements in the Operator's Guide - *outline of presentation*	Translation	-	-	-
Attributes per data element (DE)	Translation	-	-	-
Agency's ID	Translation	-	-	Develop national Agencies' IDs: Guide for Administrators, Step 2 (and 1 for editing) and working files 1, 2, 3
Operator's ID	Translation	-	-	Develop national operators' IDs: Guide for

Operator's Manual	Translation	Content (FG)	Country specific info	Completion/inclusion of new information
				Administrators, Step 3 (and 4 for editing) and working files 1, 2, 3, 4
Date of Record	Translation	-	-	-
Source of Information	Translation	-	"definitions": to be indicated who are mandate to report working file 7	"definitions": all codes involving "personnel" to be nationaly defined, working file 8
Incident ID	Translation	-	-	-
Date of Incident	Translation	-	-	-
Form(s) of maltreatment	Translation	-	-	-
Location of Incident	Translation	-	-	-
Child's ID	Translation	-	Modify format & values, if needed	Off-line database 1
Child's Sex	Translation	-	Modify format & values, if needed	-
Child's Date of Birth	Translation	-	-	-
Child's Citizenship Status	Translation	-	part "definitions": to be adapted according to national law	-
Family Composition	Translation	-	-	-
Type of family	Translation	-	-	-
Family members	Translation	-	-	-
Number of members per identity	Translation	-	-	-
Indication of Primary caregiver(s)	Translation	-	-	-
Primary Caregiver(s)' Relationship to Child	Translation	-	-	-

Operator's Manual	Translation	Content (FG)	Country specific info	Completion/inclusion of new information
Primary Caregiver(s)' Sex	Translation	-	Modify format & values, if needed	-
Primary Caregiver(s)' Date of Birth	Translation	-	-	-
Institutional Response	Translation	-	-	-
Referral(s) to Services	Translation	-	-	sub-list per type of service will auto-created upon the creation of agencies' IDs
Focus of Referral	Translation	-	-	-
Services' Response	Translation	-	nationaly defined time period, e.g. two-week	-
Overview of DE attributes	Translation	-	-	-
CAN-MDS - *feedback to the Operator*	Translation	-	-	-
PART 3: CAN-MDS technical specifications	Translation	-	-	-
CAN-MDS Data Dictionary	Translation	-	-	-
Introductory note	Translation	-	-	-
Structure of the CAN-MDS Data-Dictionarry	Translation	-	-	-
Limitations	Translation	-	-	-
CAN-MDS V.01 Data Dictionary – *description of DE permissible values*	Translation	-	-	-
RECORD	Translation	-	-	-
DE_R1	Translation	-	-	for develop IDs see Guide for Administrator Step 2 (1)
DE_R2	Translation	-	-	for develop IDs see Guide for Administrator Step 3 (4)
DE_R3	Translation	-	-	-

	Translation	Content (FG)	Country specific info	Completion/inclusion of new information
DE_R4	Translation	-	-	-
INCIDENT	Translation	-	-	-
DE_I1	Translation	-	-	-
DE_I2	Translation	-	-	-
DE_I3	Translation	I3_A_2.1 (law(s) on corporal punishment) I3_A_2.5 (law(s) on institutional/detention measures) I3_A_3 (legal age of consensual sexual activities) I3_A_3.1 (law(s) on sexual crimes) I3_A_3.2 (law(s) on children's sexual exploitation) I3_A_4.2.02 (law(s) on legal age for salaried work) I3_A_4.3.01 (law(s) on domestic violence)		
DE_I4	Translation	I3_B_3 (provisions for parental rights to refuse/ withhold medical care for religious/ cultural reasons) I3_B_3.01 (provisions for vaccinations) See working file 3 (vaccinations) I3_B_4 (provisions for mandatory school attendance) See working file 4 (school attendance)		
CHILD	Translation	-	-	Off-line database 1
DE_C1	Translation	-	-	-
DE_C2	Translation	-	-	-
DE_C3	Translation	-	C3_02, C3_03, C3_04 (country specific)	-
DE_C4	Translation	-	C4_01, C4_01.1, 2 (country specific)	-
FAMILY	-	-	Country specific definition	-
DE_F1	Translation	-	-	-
DE_F1.A	Translation	-	-	-
DE_F1.B1	Translation	-	-	-
DE_F1.B2	Translation		-	-

Operator's Manual	Translation	Content (FG)	Country specific info	Completion/inclusion of new information
DE_F1.C	Translation	-	-	-
DE_F2	Translation	-	-	-
DE_F3	Translation	-	-	-
DE_F4	Translation	-	-	-
SERVICES	Translation	-	-	-
DE_S1	Translation	-	-	-
DE_S2	Translation	-	-	Off-line database 2 (& Inventory of eligible agencies)
DE_S2.1	Translation	-	-	-
DE_S2_A	Translation	-	description of standards for services' provision	
CAN-MDS V.01 -*terms and definitions*	See **Table 2** below			
References	-	-	-	addition of references
ANNEXES	Translation	-	-	-
Annex 1: List of Agencies contributing to CAN-MDS	-	-	National CAN-MDS agencies' network (ongoing)	To be developed on the basis of working file 6
Annex 2: National Administrative Authority of CAN-MDS	-	-	National administrator	To be developed on the basis of working file 7

Table 2: Suggested adaptation for Operator's Manual Part III

term	Suggested adaptation (translation/ modification/ addition of information and/or reference) Supporting working files and reports (where applicable)	modification of definition (if needed) and/or additional national information (if applicable) and/or secondary data (where applicable)
abandoned child	translation	
abandonment	translation+reference to respective law (if applicable)	
abduction-related acts	translation+reference to respective law (if applicable)	
access to CAN-MDS	translation+adaptation (if needed) - for more information see D3.2	modify definition (if needed)
access	translation	
action taken -court or equivalent authority involvement	translation+adaptation (if needed) and additional information (if applicable)	modify definition (if needed) and add description - if specific procedures are provisioned
action taken -no court involvement	translation+adaptation (if needed) and additional information (if applicable)	modify definition (if needed) and add description - if specific procedures are provisioned
active professional	translation	
acts (of maltreatment) committed	translation+reference to respective law (if applicable)	
acts involving penetration	translation+additional information (if applicable) and reference to respective law (if applicable)	age for consensual sexual activities/ provisions for sexual activities between children
acts of life threatening maltreatment (with intention)	translation+reference to respective law (if applicable)	
actual suicide	translation	
administering unnecessary invasive medical procedures and non prescribed substances to child	translation	
administrator	translation	
adoption	translation+reference to respective law (if applicable)	
adoptive family	translation	
adoptive parent	translation	
agencies related to CAN	translation+adaptation (if needed)	modify definition (if needed)
agency	translation	
agency's ID	translation+additional information (if applicable) and reference to respective law (if applicable) and secondary data-working file 6 (see also working file 1)	develop agencies' IDs and list the agencies (at least those where the core group's professionals working in Annex (Annex I)

term	Suggested adaptation (translation/ modification/ addition of information and/or reference) Supporting working files and reports (where applicable)	modification of definition (if needed) and/or additional national information (if applicable) and/or secondary data (where applicable)
		Secondary data (working file 6) [Agency's Name]; [Postal_Address (street number; street name; postal code)]; [Phone_Number]; [Email_Address]
alcohol use by the child	translation+additional information (if applicable) and reference to respective law (if applicable)	national legislation-if exists (e.g. for selling alcohol to persons<18)
amputation	translation	
anonymous source of information	translation	
anorexia nervosa	translation+note "for informational reasons only"	
apparent harm	translation	
assessment by child protection /social welfare services	translation+adaptation (if needed) and additional information (if applicable)	modify definition (if needed) and add information - if specific practices are in place
association	translation+additional information (if applicable)	provide examples of well-known associations
attempted sexual abuse	translation	
avoidant/restrictive food intake disorder	translation+note "for informational reasons only"	
beating	translation	
binding	translation	
binge eating disorder	translation+note "for informational reasons only"	
biological family	translation	
biting	translation	
blood relation	translation+adaptation (if needed)	modify definition (if needed)
blood relative	translation	
boarder	translation	
boxing ear	translation	
branding	translation	
bulimia nervosa	translation+note "for informational reasons only"	
bullying	translation	
burning	translation	
by-law relative	translation	
caning	translation	
CAN-MDS administrator	translation	Working file 8

term	Suggested adaptation (translation/ modification/ addition of information and/or reference) Supporting working files and reports (where applicable)	modification of definition (if needed) and/or additional national information (if applicable) and/or secondary data (where applicable)
CAN-MDS axis	translation	
CAN-MDS short training	translation (and for more information see D4.1, D4.2, D4.5, D4.6)	
CAN-MDS	translation (and for more information see D2.1, D2.2, D5.4, D5.6)	
caregiver	translation	
child (alleged) victim	Translation (and secondary data -see also working file 7)	**Secondary data (working file 7)** Child's personal data [Child's Surname, Name, Middle name, Parents' Name, date of birth]; [Postal_Address]; [Phone Number]: Shared: sent by the Operators to CAN-MDS Administrator
child maltreatment	translation+reference to respective law (if applicable)	
child protection services or social welfare services emergency protection procedures	translation+additional information (if applicable)	if specific procedures are provisioned
child	translation+adaptation (if needed) and reference to respective law (if applicable)	modify definition (if needed) - for example, if existing legislation for individuals >18 treated as children
child's caregiver	translation	
child's citizenship status	Translation (and secondary data)	**Secondary data** Country legislation of citizenship status
child's date of birth (DoB)	translation	
child's emergency placement	translation+additional information (if applicable)	if specific procedures are provisioned
child's ID	translation+additional information (if applicable)	specific format of child pseudonym (if you decide a different way than the suggested)
child's sex	translation+adaptation (if needed)	modify definition (if needed) - especially in regards to the codes related to intersex and transgender
children's home/residential institution	translation+additional information (if applicable) and reference to respective law (if applicable)	you may provide some examples of residential care
choking	translation	
chronic inattention to the child	translation	
chronic truancy	translation+additional information (if applicable) and reference to respective law (if applicable) (see also working file 4)	country specific information on the number of unjustified absenses allowed according to child's age
citizenship	translation+additional information (if applicable) and reference to respective law (if applicable)	country provisions

term	Suggested adaptation (translation/ modification/ addition of information and/or reference) Supporting working files and reports (where applicable)	modification of definition (if needed) and/or additional national information (if applicable) and/or secondary data (where applicable)
close confinement	translation	
code of ethics	translation+additional information (if applicable)	provide examples of professions subjected to code of ethics
code of practice	translation+additional information (if applicable)	provide examples of professions subjected to code of ethics
coincidental identification of child maltreatment incident	translation	
community agency personnel	translation+adaptation (if needed) and secondary data (working file 10)	modify definition (if needed) **Secondary data [working file 10]** whehter the *source of information* is mandated to report CAN or not
community agency	translation+adaptation (if needed) and additional information (if applicable)	modify definition (if needed) and provide examples of well-known community agencies
complulsory school	translation+reference to respective law (if applicable); see also working file 4	
corporal punishment and "disciplines"	translation+reference to respective law (if applicable)	
corruption	translation	
court order for perpetrator(s) to leave the home or to prosecute perpetrator(s)	translation+additional information (if applicable)	if specific procedures are provisioned
court	translation+adaptation (if needed)	modify definition (if needed) according to what is applicable in your country (e.g. family court exists or not)
custodial parent	translation+reference to respective law (if applicable)	
custody refusal and abandonment	translation+adaptation (if needed)	modify definition (if needed)
cyber-bullying	translation	
date of birth (DoB)	translation	
date of incident	translation	
date of record	translation	
date	translation	
day care institution	translation+adaptation (if needed) and additional information (if applicable) and reference to respective law (if applicable)	modify definition (if needed) - provide examples of day-care institutions

term	Suggested adaptation (translation/ modification/ addition of information and/or reference) Supporting working files and reports (where applicable)	modification of definition (if needed) and/or additional national information (if applicable) and/or secondary data (where applicable)
day-care service personnel	translation+adaptation (if needed) and secondary data (working file 10)	modify definition (if needed) **Secondary data [working file 10]** whehter the *source of information* is mandated to report CAN or not
day-care	translation+adaptation (if needed)	modify definition (if needed)- adapt according to what is applicable in your country
degrading conditions of detention	translation+additional information (if applicable) and reference to respective law (if applicable)	standards for detention conditions for persons <18 (if applicable
deliberate infliction of disabilities	translation	
dental care neglect	translation+additional information (if applicable)	standards for dental care (if applicable)
denying emotional responsiveness	translation	
designated professional-CAN-MDS operator	translation	
detention or correctional institution	translation+additional information (if applicable) and reference to respective law (if applicable)	provide examples of detention/correctional institutions
diagnosed feeding and eating disorder	translation+note "for informational reasons only"	
disability support services personnel	translation+additional information (if applicable) and reference to respective law (if applicable) and secondary data-working file 10	provide examples of disability support services **Secondary data [working file 10]** whehter the *source of information* is mandated to report CAN or not
disability	translation+adaptation (if needed)	modify definition (if needed)
dowry-related violence or death	translation	
dropped out	translation+additional information (if applicable) and reference to respective law (if applicable) (see also working file 4)	provisions for mandatory schooling
drugs use by the child	translation+additional information (if applicable)	provisions for drugs/ alcohol use for persons <18
eating and feeding disorder	translation+note "for informational reasons only"	
educational institution	translation+additional information (if applicable)	provide examples of out-of-school educational institutions
educational neglect	translation (see also working file 4)	
education-related professions	translation	
elder abuse	translation+reference to respective law (if applicable)	

term	Suggested adaptation (translation/ modification/ addition of information and/or reference) Supporting working files and reports (where applicable)	modification of definition (if needed) and/or additional national information (if applicable) and/or secondary data (where applicable)
eligibility criterion for operators	translation (and for more information, see D3.1)	
eligible CAN-MDS operator	translation (and for more information, see D3.1)	
eligible professional groups for CAN-MDS	translation+adaptation (if needed) - for more information, see D3.2	modify definition (if needed)
emotional neglect	translation	
ethics in the CAN-MDS	translation (and for more information, see D4.1, D4.5 and D4.6)	
ethics	translation (and for more information, see D4.5 and D4.6)	
exorcism after accusations of "witchcraft"	translation	
exposure to a violent environment outside household	translation	
exposure to any kind of violence in the family	translation+reference to respective law (if applicable)	
exposure to risk	translation	
exposure to violence via electronic means	translation+additional information (if applicable) and reference to respective law (if applicable)	description of standards for non-exposure to violence (e.g. television)
failure to provide with basic medical care	translation	
family abduction	translation+reference to respective law (if applicable)	
family composition	translation	
family friend	translation	
family members	translation	
family	translation+adaptation (if needed)	modify definition (if needed) - define according to national law
fattening	translation	
female genital mutilation	translation+reference to respective law (if applicable)	
female	translation	
flogging	translation	
focus of referral	translation	
follow-up	translation+additional information (if applicable)	description, if specific procedures are provisioned
forced circumcision	translation	

term	Suggested adaptation (translation/ modification/ addition of information and/or reference) Supporting working files and reports (where applicable)	modification of definition (if needed) and/or additional national information (if applicable) and/or secondary data (where applicable)
forced feeding	translation	
forced marriage and early marriage	translation+additional information (if applicable) and reference to respective law (if applicable)	mention legal marriage age
forced sterilization	translation	
forcing child to beg	translation	
forcing child to exposed in pornography	translation	
forcing child to get married	translation	
forcing child to involve in pornography	translation+reference to respective law (if applicable)	
forcing child to participate in a violent political event	translation+adaptation (if needed)	modify definition (if needed)
forcing child to participate in religious ritual	translation+adaptation (if needed)	modify definition (if needed)
forcing child to undertake adult's responsibilities	translation	
forcing child to undertake criminal behaviour	translation	
forcing child to witness sexual violence against mother	translation+reference to respective law (if applicable)	
forcing of child to prostitution	translation+reference to respective law (if applicable)	
forcing to ingest spicy food	translation	
forms of maltreatment	translation	
foster care	translation+reference to respective law (if applicable)	
foster family	translation	
foster parent	translation	
friend's family	translation	
full access	translation	
full view access (level 1)	translation+adaptation (if needed)	modify definition (if needed)
gender	translation	
grabbing	translation	

term	Suggested adaptation (translation/ modification/ addition of information and/or reference) Supporting working files and reports (where applicable)	modification of definition (if needed) and/or additional national information (if applicable) and/or secondary data (where applicable)
grandparent(s)	translation	
has not attended school at all	translation+adaptation (if needed) - see also working file 4	modify definition (if needed)
health care organization	translation+additional information (if applicable)	provide examples of health organizations
health related professions	translation	
health services personnel	translation+additional information (if applicable) and reference to respective law (if applicable) and secondary data-working file 10	indicate if mandatory reporting **Secondary data [working file 10]** whehter the *source of information* is mandated to report CAN or not
health services	translation	
helpline personnel	translation+adaptation (if needed) and additional information (if applicable) and secondary data (see working file 10)	modify definition (if needed) - indicate if mandatory reporting **Secondary data [working file 10]** whehter the *source of information* is mandated to report CAN or not
helpline	translation+additional information (if applicable)	provide examples of well-known national helplines
hitting on head	translation	
hitting on the soles of the feet	translation	
hitting with an object	translation	
home	translation	
hospitalization of child in mother/child shelter	translation+additional information (if applicable)	provide examples of well-known child-mother shelters
humiliation	translation	
ICT	translation	
ID (identification)	translation	
identified incident	translation+additional information (if applicable)	if specific procedures of routine screening are provisioned
ignoring	translation	
illegal transfers of custody	translation+adaptation (if needed) and reference to respective law (if applicable)	modify definition (if needed)
immediate intervention	translation+additional information (if applicable)	if specific internentions are provisioned other than the ones mentioned below

term	Suggested adaptation (translation/ modification/ addition of information and/or reference) Supporting working files and reports (where applicable)	modification of definition (if needed) and/or additional national information (if applicable) and/or secondary data (where applicable)
imposing of death sentence	translation+reference to respective law (if applicable)	
inadequate or inappropriate clothing	translation	
inadequate or inappropriate nutrition	translation	
inadequate or inappropriate personal hygiene	translation	
inadequate or inappropriate shelter	translation	
inadequate supervision	translation	
inappropriately advanced expectations	translation	
incident ID	translation	
incident of child maltreatment	translation	
incident	translation	
inflicting scars/scarring	translation	
initiation of court measures	translation+adaptation (if needed) and additional information (if applicable) and reference to respective law (if applicable)	modify definition (if needed) - if specific procedures are provisioned
initiation of forensic evaluation	translation+additional information (if applicable) and reference to respective law (if applicable)	if specific procedures are provisioned
institutional and system violations of child rights	translation+additional information (if applicable) and reference to respective law (if applicable)	age that children are subjected to detention penalties
institutional response	translation+additional information (if applicable)	mention the time period normally required for a service to be provided
intentional poisoning	translation	
intersex or intermediate	translation+adaptation (if needed)	modify definition, if needed (e.g. the case that this code is not applicable)
intimate partner violence (IPV)	translation+reference to respective law (if applicable)	
irregular school attendance	translation+additional information (if applicable) and reference to respective law (if applicable) (see also working file 4)	according to what provisioned by the education-related laws
isolation	translation	
justice-related professions	translation+adaptation (if needed)	modify definition (if needed)
kicking	translation	
kindergarden	translation+adaptation (if needed)	modify definition - if different for your country

term	Suggested adaptation (translation/ modification/ addition of information and/or reference) Supporting working files and reports (where applicable)	modification of definition (if needed) and/or additional national information (if applicable) and/or secondary data (where applicable)
kinship care	translation+reference to respective law (if applicable)	
labour/economic exploitation	translation+additional information (if applicable) and reference to respective law (if applicable)	legal age for entering into labour market (salaried work)
lack of supervision	translation	
law enforcement related professions	translation+adaptation (if needed)	modify definition, if needed (e.g. in Italy there also i carabineri)
law enforcement services	translation+adaptation (if needed)	modify definition (if needed)
law enformcement	translation	
learning difficulty	translation+note "for informational reasons only"	
leisure	translation	
level of access	translation (and for more information, see D3.2)	
limited access (level 2)	translation (and for more information, see D3.2)	
limited access (level 3)	translation (and for more information, see D3.2)	
location of incident	translation	
locking up	translation	
majority	translation	
male	translation	
mandatory vaccination	translation (see also working file 3)	
medical neglect	translation	
mental health exam(s)	translation+additional information (if applicable)	if specific mental health exams are provisioned
mental health professions	translation	
mental health service	translation+additional information (if applicable)	provide examples of well-known mental health services
mental health services personnel	translation+additional information (if applicable) and reference to respective law (if applicable) and secondary data-working file 10	indicate if mandatory reporting **Secondary data [working file 10]** whehter the *source of information* is mandated to report CAN or not
minimum data set (MDS)	translation	
Munchausen Syndrome by Proxy	translation+note "for informational reasons only"	

term	Suggested adaptation (translation/ modification/ addition of information and/or reference) Supporting working files and reports (where applicable)	modification of definition (if needed) and/or additional national information (if applicable) and/or secondary data (where applicable)
national CAN-MDS administrator	translation+additional information (if applicable) + secondary data - working file 8)	[Name-to be completed] **Secondary data [working file 8]** Legal status of the administrator's agency]; and [Field where the administrator's agency belongs]; contact details: telephone number(s): [to be completed]; email(s): [to be completed]
national ombudsman	translation+additional information (if applicable) and reference to respective law (if applicable); see also working file 5	if applicable (also for deputy obmudsman for children's rights)
NGO	translation+additional information (if applicable)	provide examples of well-known NGOs
NGOs/association personnel	translation+adaptation (if needed) and secondary data (working file 10)	modify definition (if needed) **Secondary data [working file 10]** whehter the *source of information* is mandated to report CAN or not
non compulsory school	translation+adaptation (if needed) - see also working file 4	modify definition (if needed)
noncustodial parent	translation	
non-family abduction	translation	
ombudsman personnel	translation+adaptation (if needed) and secondary data (working file 10) and see also working file 5	modify definition if needed (and if applicable) **Secondary data [working file 10]** whehter the *source of information* is mandated to report CAN or not
omission	translation	
omissions	translation	
online sexual stalking and harassment	translation	
operator	translation	
operator's ID	translation (and secondary data-see working file 8) (see also working file 2)	**Secondary data (working file 11)** [Operator's Name]; [profession]; [Phone_Number]; [Email_Address]
ordinary/juvenile court and related services personnel	translation+adaptation (if needed) and secondary data (working file 10)	modify definition (if needed) **Secondary data [working file 10]** whehter the *source of information* is mandated to report CAN or not
other not-related household member	translation	

term	Suggested adaptation (translation/ modification/ addition of information and/or reference) Supporting working files and reports (where applicable)	modification of definition (if needed) and/or additional national information (if applicable) and/or secondary data (where applicable)
other relative(s)	translation	
other relevant professionals	translation+adaptation (if needed)	modify definition (if needed)
other specified feeding or eating disorders	translation+note "for informational reasons only"	
other substance misuse by the child	translation+note "for informational reasons only"	
out of home placement	translation+reference to respective law (if applicable)	
overprotection	translation	
parent(s)' partner(s)	translation	
parent	translation	
persistent failure to register the child at the school	translation (see also working file 4)	
persistent ignoring of the child's emotional needs	translation	
personnel	translation	
physical bullying	translation	
physical medical exam(s)	translation	
physical neglect	translation	
physical violence acts	translation+reference to respective law (if applicable)	
pica	translation+note "for informational reasons only"	
pinching	translation	
planning of intervention	translation+additional information (if applicable)	if specific procedures are provisioned
playground	translation	
police emergency protection procedures	translation+adaptation (if needed) and additional information (if applicable)	modify definition (if needed) and add information if specific procedures are provisioned
police intervention (immediate interventions)	translation+adaptation (if needed) and additional information (if applicable)	modify definition (if needed) and add information if specific procedures are provisioned
police or other law enforcement services personnel	translation+adaptation (if needed) and secondary data (working file 10)	modify definition (if needed) **Secondary data [working file 10)** whehter the *source of information* is mandated to report CAN or not
police	translation	

term	Suggested adaptation (translation/ modification/ addition of information and/or reference) Supporting working files and reports (where applicable)	modification of definition (if needed) and/or additional national information (if applicable) and/or secondary data (where applicable)
preschool	translation+additional information (if applicable)	if needed according to country specifics
primary caregiver	translation	
primary caregiver's date of birth	translation	
primary caregiver's relationship to child	translation	
primary caregiver's sex	translation+adaptation (if needed)	modify definition (if needed)
primary health care services	translation+additional information (if applicable)	provide example of primary health care services
private schools/institutions	translation+additional information (if applicable)	provide well-known examples
professional licence/certification	translation+additional information (if applicable)	provide examples of professions requiring license/ certification
providing child with sexually explicit material	translation	
pseudonymization	translation (see also ISO/TS 25237:2008. Health informatics – Pseudonymization)	
psychological violence acts	translation	
psychologically "unavailable" caregivers	translation	
public place	translation	
public schools/institutions	translation+additional information (if applicable)	provide examples of public schools/ institutions
public transportation mean	translation+adaptation (if needed)	modify definition (if needed) according to what is applicable in your country
pulling hair	translation	
pushing	translation	
recommended vaccination	translation+adaptation (if needed) - see also working file 3	modify definition (if needed) according to what is applicable in your country
re-composed family	translation	
recreational area	translation+additional information (if applicable)	provide examples of well-known recreational areas
recreational or leisure area or a playground	translation	
referral of child to child protection /welfare services	translation	
referral to service	translation	

term	Suggested adaptation (translation/ modification/ addition of information and/or reference) Supporting working files and reports (where applicable)	modification of definition (if needed) and/or additional national information (if applicable) and/or secondary data (where applicable)
referral	translation+additional information (if applicable) and reference to respective law (if applicable)	provisions related to mandatory reporting of CAN (e.g. for specific professional groups, public officials and the general public) (working file 10)
refusal of child's custody	translation	
refusal or failure to provide preventive health care	translation+adaptation (if needed)	modify definition if needed (if, for example, it is permitted to caregivers to not provide specific health care due to religious or cultural reasons)
refusal to allow /provide needed medical care for diagnosed health condition/ impairment	translation+adaptation (if needed)	modify definition if needed (if, for example, it is permitted to caregivers to not provide specific health care due to religious or cultural reasons)
refusal to allow needed attention to special educational needs	translation	
refusal to attend special educational needs	translation	
refusal to provide needed attention to special educational needs	translation	
rejection	translation	
relation by law	translation+adaptation (if needed)	modify definition (if needed)
relative's family	translation	
removal of parent(s)' rights	translation+additional information (if applicable) and reference to respective law (if applicable)	provisions for removal of parental rights
residential care institution	translation+additional information (if applicable) and reference to respective law (if applicable)	provide examples of well-known residential care institutions
restraining in cloth sacks	translation	
retribution violence	translation	
right of blood	translation+adaptation (if needed)	modify definition /provide information of whether this is applicable in your country
right of the soil	translation+adaptation (if needed)	modify definition /provide information of whether this is applicable in your country
routine screening	translation+additional information (if applicable) and reference to respective law (if applicable)	if specific routine screening is applied
rumination disorder	translation+note "for informational reasons only"	

term	Suggested adaptation (translation/ modification/ addition of information and/or reference) Supporting working files and reports (where applicable)	modification of definition (if needed) and/or additional national information (if applicable) and/or secondary data (where applicable)
runaway	translation+adaptation (if needed)	modify definition according to what is applicable in your country (e.g. after how many hours a child is considered that runaway)
sale child for sexual purposes	translation+reference to respective law (if applicable)	
scalding	translation	
school/kindergarten/preschool personnel	translation+adaptation (if needed) and secondary data (working file 10)	modify definition if needed, according to what is applicable in your country **Secondary data [working file 10]** whehter the *source of information* is mandated to report CAN or not
school	translation	
scratching	translation	
screening tool	translation+additional information (if applicable)	if specific screening tool is applied please mention AND annex
secondary health care services	translation+additional information (if applicable)	provide example of secondary health care services
sectors related to CAN	translation+adaptation (if needed)	modify definition (if needed)
self-harm actions	translation	
self-inflicted injuries	translation	
service's response	translation+additional information (if applicable)	describe standards (set by the organization itself) for service provision in terms of quantity [: for example, the number of councelling sessions or medical interventions than needed] and timeliness [: within the normal time for the provision of the specific service by the specific agency];
services for people with disabilities	translation+additional information (if applicable)	provide example of services for people with disabilities
sex	translation	
sexual exploitation acts	translation	
sexual harassment	translation	
sexual luring via ICT	translation	

term	Suggested adaptation (translation/ modification/ addition of information and/or reference) Supporting working files and reports (where applicable)	modification of definition (if needed) and/or additional national information (if applicable) and/or secondary data (where applicable)
sexual slavery	translation	
sexual violence acts	translation	
sexually explicit material	translation	
shaking baby syndrom	translation+note "for informational reasons only"	
shaking	translation	
shooting	translation	
showing genitals to child	translation	
sibling(s)	translation	
slapping	translation	
smacking	translation	
social bullying	translation	
social services	translation+adaptation (if needed) and reference to respective law (if applicable)	modify definition/ adapt the description of what is applicable in your country (e.g. if CPS are in place)
social welfare (public) system personnel	translation+adaptation (if needed) and secondary data (working file 10)	modify definition (if needed) **Secondary data [working file 10]** whehter the *source of information* is mandated to report CAN or not
source of information	translation	
spanking	translation	
specific incident of child maltreatment	translation	
sports-athletics	translation	
stabbing	translation	
staying in uncomfortable positions	translation	
step parent	translation	
stoning	translation	
substance	translation+adaptation (if needed) and reference to respective law (if applicable)	modify definition/ adapt content if needed (legal/ illegal substances) according to country specifics
substance use/abuse by the child	translation+reference to respective law (if applicable)	

term	Suggested adaptation (translation/ modification/ addition of information and/or reference) Supporting working files and reports (where applicable)	modification of definition (if needed) and/or additional national information (if applicable) and/or secondary data (where applicable)
substance use/abuse	translation	
substanstiation status of maltreatment	translation+additional information (if applicable)	if specific procedures/ classification of substantiation is applied in your country
suicidal thoughts	translation	
suicide attempt(s)	translation	
supportive intervention for current caregivers	translation+additional information (if applicable)	if specific supportive interventions are provisioned
suspected maltreatment	translation	
terrorization	translation	
tertiary health care services	translation+additional information (if applicable)	provide example of tertiary health care services
threatened sexual abuse	translation	
threatening with a knife or with a gun	translation	
threats of maltreatment	translation	
throwing	translation	
torture	translation+reference to respective law (if applicable)	
touching genitals	translation	
trafficking	translation+reference to respective law (if applicable)	
trained professional as CAN-MDS operators	Translation (and secondary data-see also working file 9)	**Secondary data [working file 9]** Name, Profession, Agency, Address, Telephone, email (personal)
transgender	translation+adaptation (if needed)	add note that this is applicable or not in your country
travel and tourism sexual exploitation	translation+reference to respective law (if applicable)	
twisting ears	translation	
tying up or tying to something	translation	
type of family	translation	
unborn	translation+additional information (if applicable) and reference to respective law (if applicable)	describe provisions for rights of unborns and/or abuse of unborns (if applicable)
unjustified delay to seek medical care	translation	
unstable custody arrangements	translation+reference to respective law (if applicable)	

term	Suggested adaptation (translation/ modification/ addition of information and/or reference) Supporting working files and reports (where applicable)	modification of definition (if needed) and/or additional national information (if applicable) and/or secondary data (where applicable)
use the child in commercial sexual exploitation	translation+reference to respective law (if applicable)	
uvulectomy	translation	
vaccination related neglect	translation (see also working file 3)	
verbal assaulting	translation	
verbal bullying	translation	
violence in the guise of treatment	translation	
violence	translation	
violent acts against self	translation	
violent acts known also as harmful practices	translation+reference to respective law (if applicable)	
violent acts related to child's exploitation	translation+reference to respective law (if applicable)	
violent acts related to child's exposure	translation+reference to respective law (if applicable)	
violent acts with or without obvious consequences	translation	
violent and degrading initiation rites, "hazing"	translation+additional information (if applicable)	if country specific types of hazing are applicable
virginity testing	translation	
vision care neglect	translation+additional information (if applicable)	if specific vision care procedures are provisioned
voyeurism	translation	
welfare related professions	translation	
withholding essential medical care	translation+adaptation (if needed)	add note if, for example, it is permitted to caregivers to not provide specific health care due to religious or cultural reasons

ANNEX I: Off line databases_templates (.xlsx file)

ANNEX II: Tool for Definition of Eligibility Criteria for CAN-MDS Operators (.xlsx file)

ANNEX III: Focus Group Protocol & Discussion Guide

To take place after piloting of the system (OPTIONAL)

Suggested Methodology for modifications and further cultural adaptation of CAN-MDS Toolkit

Focus Group Discussions

AIM: *to assess content validity, quality and feasibility of each individual element in CAN-MDS*

- 2 groups * 10 Operators / country
  - *Professional specialties of Operators should represent all eligible professional groups and sectors*

Planning the Focus Groups

- *Preparing Invitation letters**
- *Define the venue & the dates*

Focus group results

- *Reporting*
  - *Considering revision of the national version of the Toolkit according to FG results*

*** Invitation for participation to the Focus Groups Discussions**

- Invitation letter is suggested to include
  - a brief description of the objectives of discussion group and of the procedure
  - instructions to Operatrors to prepare in advance their notes/observations for any issue they would like to discuss.

Overview of FGs

	Suggested Process & Organization
Method	Group session
Group size	10 participants + 2 moderators
Number of Groups	2 groups (at least) /country * 6 countries
Session duration	120 min
Time	After the end of pilot phase
Place	TBD per country
Participants	Professionals who participated in CAN-MDS piloting as Operators
Recruitment of participants	Written invitations and further communication via phone where needed
Participants preparation	Preparation of notes and observations in advance
Group synthesis	Professional specialites of operators to represent all relevant sectors
Moderator(s)	National Administrator and Local coordinators or Researcher Moderator: coordinate the discussion Co-moderator: keeping the minutes of the discussion
Moderators' discussion guide	Document including the issues to be discussed, instructions for moderating the discussion, time to be devoted per topic
Other material	Invitation letters; a copy of Toolkit; a list of CAN-MDS data elements
Data to be collected	Qualitative
Data collection	Written minutes and voice recording
Analysis of data	Descriptive analysis of repeated issues, comments and suggestions Presentation of selected quotations (words, sentences, expressions)
Reporting	Brief description of aim and method of FG Presentation of results and references for any specific part of the Toolkit suggested to be modified A list of the modifications suggested for the national CAN-MDS

FOCUS GROUP DISCUSSION CAN-MDS Toolkit (after piloting – optional) [120 MIN PER GROUP]

Opening of the Discussion

TOPIC 1: CONTENT OF the Toolkit **[10 min]**

As the participants get prepared for the discussion, the moderator asks the following questions:

1. Do you think that the way the content is presented meet the objectives of the CAN-MDS?
   a) *As for the content of the Toolkit, is there any point that you don't agree with?*

TOPIC 2: STRUCTURE & FUNCTIONALITY OF Toolkit **[10 min]**

1. In general, how would you evaluate the structure of the Toolkit?
   a) Do you think that the Toolkit was useful for you as an operator of the CAN-MDS System?
   b) Is there anything that you don't understand regarding the instructions for the use of the Toolkit?

TOPIC 3: CAN-MDS Data Elements **[25 min]**

CLARITY & PRECISION

1. To your opinion, is there any data element that it is not understandable and that it requires changes/modifications?
   TIP: Use a table with the 18 data elements of the CAN-MDS in order to record how many professionals indicate each individual variable

TOPIC 4: Data Collection **[50 min]**

APPLICABILITY & USABILITY

1. Did you had the opportunity to record any CAN incidents in the CAN-MDS during the piloting?
   a) If yes, how many incidents you recorded?
   b) If no, what was the reason for this?
   c) There were cases that you could record but you decided to not do it?
      1. If yes, what was the reason?
2. Did you had any specific difficulties in the whole process? If yes, they were relevant
   a) To the online application use?
   b) To the operator's manual use?
   c) To the protocol for data collection?
   d) To the communication with the National Administrator?
   e) To other aspects of the system (such as)?
3. Is there anything you like to suggest in order to improve the system?

TOPIC 4: Closing **[15 min]**

1. In general, what's your opinion regarding the idea of developing a system, such as the CAN-MDS?
2. Do you think that your participation as a CAN-MDS operator is useful for your work?

Management and processing of results: From the focus groups' discussion a bulk of information is expected to result regarding participants' opinions and comments.

To this end, especially if the discussion has not been recorded by electronic means (such as voice recorder), it is suggested that immediately after ending each group, the moderators to meet and consolidate what they record (such as excerpts) and summarize the main points of the discussion, potential patterns observed in the answers, by identifying the topics on which there was agreement or disagreement. They should also record all alternative proposals for improvement.

The answers (qualitative data) and words- or key-phrases should be recorded and grouped into categories under general headings corresponding to the topics included in the respective discussion guide for each group. Once completing the recording of answers, the different views and attitudes and the extent to which group members agreed (they actually had the same opinion) can then be separated. Combining the common responses will result in the general pattern of responses, which will determine whether the material requires further modifications or not.

To facilitate and systematize this process, a template can be used as in the example below, in which the Discussion Guide's topics are recorded in the first column and participants' answers can be recorded in the second column.

Keeping notes from FGs. Template for the systematization of answers from a focus group with professionals

TOPIC 1: CONTENT OF the Toolkit	**Comments** (initials of professional's name based on the attendance list)
Do you think that the way the content is presented meet the objectives of the CAN-MDS?	e.g.
As for the content of the Toolkit, is there any point that you don't agree with?	A.B.

TOPIC 2: STRUCTURE & FUNCTIONALITY OF Toolkit	Comments (initials of professional's name based on the attendance list)
In general, how would you evaluate the structure of the Toolkit?	e.g. AB:
Do you think that the Toolkit was useful for you as an operator of the CAN-MDS System?	A.B.
Is there anything that you don't understand regarding the instructions for the use of the Toolkit?	

TOPIC 3: CLARITY AND PRECISION PER DATA ELEMENT	Comments (initials of professional's name based on the attendance list)	DE:
To your opinion, is there any data element that it is not understandable and that it requires changes/modifications?	e.g. AB:	

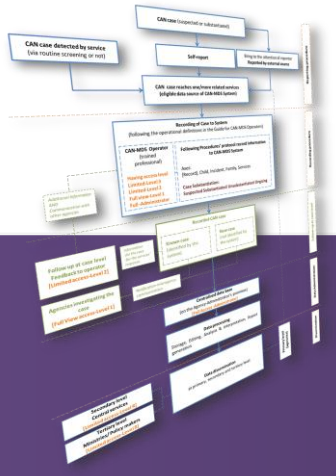
TOPIC 4: Data Collection APPLICABILITY & USABILITY	**Comments** (initials of professional's name based on the attendance list)
Did you had the opportunity to record any CAN incidents in the CAN-MDS during the piloting?	e.g. AB:
If yes, how many incidents you recorded?	A.B.

If no, what was the reason for this?	
There were cases that you could record but you decided to not do it? If yes, what was the reason?	

Did you had any specific difficulties in the whole process? If yes, they were relevant a) To the online application use? b) To the operator's manual use? c) To the protocol for data collection? d) To the communication with the National Administrator? e) To other aspects of the system (such as)?	
Is there anything you like to suggest in order to improve the system?	

TOPIC 5: CLOSING	Comments (initials of professional's name based on the attendance list)
In general, what's your opinion regarding the idea of developing a system, such as the CAN-MDS?	e.g. AB:
Do you think that your participation as a CAN-MDS operator is useful for your work?	A.B.

+



Action “Coordinated Response to Child Abuse & Neglect via Minimum Data Set: *from planning to practice*”
[REC-RDAP-GBV-AG-2017/ 810508]
[WP.2, Activity 1.1: D 2.1: Revised CAN-MDS Master Toolkit]

CAN-MDS Administrator’s Manual

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