

Nursing Home Database

This document is to be used in conjunction with the NursingHomes database for the 2015 License Renewal Application for Nursing Homes.

The database contains 10 tables and the relationships are indicated in the **pdf document titled 'nhrel'**.

This data is in-process working data for the internal use of the Healthcare Planning and Certificate of Need Section. It may be changed or revised over time. There is no assurance or representations as to its accuracy and any user of the data assumes the risk of errors or inaccuracy.

All tables and their associated fields are listed on the following pages.

Table 1: tblAdultCareSupplement

Field Name	Data Type	Definition
intACHSupplementID	AutoNumber	Primary key
intNursingHomeID	Number	Establishes table relationships
IngACHMI18-20	Number	Number of MI residents 18-20
IngACHMRDD18-20	Number	Number of MRDD residents 18-20
IngACHAlz18-20	Number	Number of Alzheimer's/Related dementia residents 18-20
IngACHMI21-34	Number	Number of MI residents 21-34
IngACHMRDD21-34	Number	Number of MRDD residents 21-34
IngACHAlz21-34	Number	Number of Alzheimer's/Related dementia residents 21-34
IngACHMI35-54	Number	Number of MI residents age 35-54
IngACHMRDD35-54	Number	Number of MRDD residents age 35-54
IngACHAlz35-54	Number	Number of Alzheimer's/related dementia residents age 35-54
IngACHMI55-64	Number	Number of MI residents age 55-64
IngACHMRDD55-64	Number	Number of MRDD residents age 55-64
IngACHAlz55-64	Number	Number of Alzheimer's/Related dementia residents 55-64
IngACHMI65-74	Number	Number of MI residents age 65-74
IngACHMRDD65-74	Number	Number of MRDD residents age 65-74
IngACHAlz65-74	Number	Number of Alzheimer's/related dementia residents age 65-74
IngACHMI75-84	Number	Number of MI residents age 75-84
IngACHMRDD75-84	Number	Number of MRDD residents age 75-84
IngACHAlz75-84	Number	Number of Alzheimer's/related dementia residents age 75-84
IngACHMI85+	Number	Number of MI residents age 85+
IngACHMRDD85+	Number	Number of MRDD residents age 85+
IngACHAlz85+	Number	Number of Alzheimer's residents age 85+
IngACHMITotal	Number	Total number of MI residents
IngACHMRDDTotal	Number	Total number of MRDD residents
IngACHAlzTotal	Number	Total number of Alzheimer's/related dementia residents
IngACHBasicHomeCare	Number	Number of AC residents receiving Medicaid reimbursed Basic ACH Personal Care
IngACHEnhancedHomeCare	Number	Number of AC residents receiving Medicaid reimbursed Enhanced ACH Personal Care
IngACHStateCountyAssistance	Number	Number of adult care residents on state/county special assistance
IngACHPrivatePay	Number	Number of private pay adult care residents
curACHPrivateRoomRate	Currency	Total monthly private pay charge for private room
curACHSemiPrivateRate	Currency	Total monthly private pay charge for semi-private room
curACHNonPrivateRate	Currency	Total monthly charge for 3 or more beds per room
ysnACHAlzUnit	Yes/No	Do you have an Alzheimers Special Care Unit?
intACHAlzUnitBeds	Number	Number of beds in the Alzheimers Special Care Unit

Table 2: tblLocations

Field Name	Data Type	Definition
IngLocationID	Number	Unique identifier of the locations
strLocation	Text	The locations
ysnNCCounty	Yes/No	Identifies the North Carolina counties

Table 3: tblNursingHomes

Field Name	Data Type	Definition
IngNursingHomeID	AutoNumber	Establishes table relationships
intNursingType	Number	Identifies the type of nursing home. 1: Free standing nursing home 2: Nursing Care facility that is part of a hospital
strFacilityID	Text	Unique identifier from Master Facility File
strLicenseNumber	Text	License number of the nursing home
strLegalIdentity	Text	Full legal name of corporation, partnership, etc
strDBA	Text	Doing Business As
strName	Text	Primary name of the facility
strOtherName1	Text	Alternate name of the facility
strOtherName2	Text	Alternate name of the facility
strMailStreetAddress	Text	Facility Mailing Address: Street/PO Box
strMailCity	Text	Facility Mailing Address: City
strMailState	Text	Facility Mailing Address: State
strMailZip	Text	Facility Mailing Address: Zip
strSiteStreetAddress	Text	Facility Site Address: Street
strSiteCity	Text	Facility Site Address: City
strSiteSt	Text	Facility Site Address: State
strSiteZip	Text	Facility Site Address: Zip
IngCounty	Number	Facility Site Address: County
strTelephone	Text	Facility Site Address: Telephone
strFax	Text	Facility Site Address: Fax
strAdminEmail	Text	Email address of the administrator
strNPI	Text	National provider identifier
ysnEntireYear	Yes/No	Was this facility in operation throughout the entire 12-month reporting period ending September 30, 2013?
dtmPartialYearBegin	Date/Time	If not in operation for the entire period, alternate starting date
dtmPartialYearEnd	Date/Time	If not in operation for the entire period, alternate ending date
memPartialYearReason	Memo	For what reason was the facility not in full operation during this period
ysnOwnerChange	Yes/No	Change of ownership between October 1, 2012 and September 30, 2013
dtmOwnerChangeDate	Date/Time	What was the date of the change of ownership?

Field Name	Data Type	Definition
strOwnerName	Text	What is the name of the legal entity with ownership responsibility and liability?
strOwnerFedEmpNum	Text	Not currently used
strOwnerAdd	Text	Owner street address
strOwnerCity	Text	Owner city
strOwnerST	Text	Owner state
strOwnerZip	Text	Owner zip code
strOwnerTelephone	Text	Owner telephone number
strOwnerFax	Text	Owner fax number
strOwnerEmail	Text	Owner email address
strSeniorOfficer	Text	Owner senior officer
ysnForProfit	Yes/No	Is the legal entity for profit?
ysnCorporation	Yes/No	Is the legal entity a corporation?
ysnProprietorship	Yes/No	Is the legal entity a proprietorship?
ysnLLC	Yes/No	Is the legal entity a LLC?
ysnLLP	Yes/No	Is the legal entity a LLP?
ysnGovernmentUnit	Yes/No	Is the legal entity a government unit?
ysnPartnership	Yes/No	Is the legal entity a partnership?
ysnReligiousFraternal	Yes/No	Is the legal entity a religious or fraternal agency?
ysnLease	Yes/No	Does the legal entity lease the building from which services are offered?
strBuildingOwner	Text	Name of the building owner
ysnManagementContract	Yes/No	Is the business operated under a management contract?
strMgmtCompName	Text	Management Company: Name
strMgmtCompAdd	Text	Management Company: Street
strMgmtCompCity	Text	Management Company: City
strMgmtCompST	Text	Management Company: State
strMgmtCompZip	Text	Management Company: Zip
strMgmtCompTelephone	Text	Management Company: Telephone
strParentCompanyName	Text	Parent Company: Name
strParentCompanyAdd	Text	Parent Company: Street
strParentCompanyMailAdd	Text	Parent Company: Mailing
strParentCompanyCity	Text	Parent Company: City
strParentCompanyST	Text	Parent Company: State
strParentCompanyZip	Text	Parent Company: Zip
strParentCompanyTelephone	Text	Parent Company: Telephone
strParentCompanyFax	Text	Parent Company: Fax
strParentCompanySeniorOfficer	Text	Parent Company: Senior Officer

Table 4: tblOperatingStats

Field Name	Data Type	Definition
intOperatingStatsID	AutoNumber	Primary key
intNursingHomeID	Number	Establishes table relationships
curPrivatePayNCPrivateRoom	Currency	The customary charge of a nursing care private room
curPrivatePayNCSemiPrivate	Currency	The customary charge of a nursing care semi-private room
curPrivatePayNCWard	Currency	The customary charge of a nursing care ward
curPrivatePayACHPrivateRoom	Currency	The customary charge of an adult care home private room
curPrivatePayACHSemiPrivate	Currency	The customary charge of an adult care home semi-private room
curPrivatePayACHWard	Currency	The customary charge of an adult care home ward
strPrivatePaySpecial1Name	Text	Specify a special care unit
curPrivatePaySpecial1PrivateRoom	Currency	The customary charge of a SCU private room
curPrivatePaySpecial1SemiPrivate	Currency	The customary charge of a SCU semi-private room
curPrivatePaySpecial1Ward	Currency	The customary charge of a SCU ward
strPrivatePaySpecial2Name	Text	Specify a special care unit
curPrivatePaySpecial2PrivateRoom	Currency	The customary charge of a SCU private room
curPrivatePaySpecial2SemiPrivate	Currency	The customary charge of a SCU semi-private room
curPrivatePaySpecial2Ward	Currency	The customary charge of a SCU ward
strMedicareRUG1Code	Text	The most frequent RUGS code
curMedicareRUG1Rate	Currency	The RUGS rate
strMedicareRUG2Code	Text	The most frequent RUGS code
curMedicareRUG2Rate	Currency	The RUGS rate
strMedicareRUG3Code	Text	The most frequent RUGS code
curMedicareRUG3Rate	Currency	The RUGS rate
curMedicaidQ1Rate	Currency	The rate for Medicaid in nursing care for the first quarter
curMedicaidQ2Rate	Currency	The rate for Medicaid in nursing care for the second quarter
curMedicaidQ3Rate	Currency	The rate for Medicaid in nursing care for the third quarter
curMedicaidQ4Rate	Currency	The rate for Medicaid in nursing care for the fourth quarter
strMedicaidNCSpecial1Name	Text	Specify a special care unit
curMedicaidNCSpecial1Rate	Currency	The rate for a SCU
strMedicaidNCSpecial2Name	Text	Specify a special care unit
curMedicaidNCSpecial2Rate	Currency	The rate for a SCU
curStateCountyAssistanceACHRate	Currency	The rate for an ACH with state or county special assistance
strStateCountyAssistanceSpecial1Name	Text	Specify a special care unit
curStateCountyAssistanceSpecial1Rate	Currency	The rate for a SCU with state or county special assistance
strStateCountyAssistanceSpecial2Name	Text	Specify a special care unit
curStateCountyAssistanceSpecial2Rate	Currency	The rate for a SCU with state or county special assistance
curAlzCareAddCost	Currency	Alzheimer's/Dementia Special Care Unit: additional cost

Table 5: tblOperations

Field Name	Data Type	Definition
IngOperationID	AutoNumber	Primary key
IngNursingHomeID	Number	Establishes table relationships
strAdministratorName	Text	Administration: Name
dtmAdministratorDateHired	Date/Time	Administration: Date Hired
strAdministratorLicenseNumber	Text	Administration: NC License Number
strNursingDirectorName	Text	Nursing: Name
dtmNursingDirectorDateHired	Date/Time	Nursing: Date Hired
strNursingDirectorLicenseNumber	Text	Nursing: NC License Number
strMedicalDirectorName	Text	Medical Director: Name
dtmMedicalDirectorDateHired	Date/Time	Medical Director: Date Hired
strMedicalDirectorStreet	Text	Medical Director: Street
strMedicalDirectorCity	Text	Medical Director: City
strMedicalDirectorST	Text	Medical Director: State
strMedicalDirectorZip	Text	Medical Director: Zip
ysnCultureChangeProgram	Yes/No	Currently practicing a formalized culture change process/program?
ysnCultureChangeEnhancements	Yes/No	Currently implementing enhancements?
ysnCultureChangeCats	Yes/No	Have you implemented cats?
ysnCultureChangeDogs	Yes/No	Have you implemented dogs?
ysnCultureChangeBirds	Yes/No	Have you implemented birds?
ysnCultureChangeBathing	Yes/No	Have you implemented bathing?
ysnCultureChangeChildren	Yes/No	Have you implemented children?
ysnCultureChangePlants	Yes/No	Have you implemented plants?
ysnCultureChangeGardens	Yes/No	Have you implemented gardens?
ysnCultureChangeTeams	Yes/No	Have you implemented teams?
ysnCultureChangeStaffEmpowerment	Yes/No	Have you implemented staff empowerment?
ysnCultureChangeNeighborhoods	Yes/No	Have you implemented neighborhoods?
ysnCultureChangeOtherAnimals	Yes/No	Have you implemented other animals?
ysnCultureChangeAromaTherapy	Yes/No	Have you implemented aroma therapy?
ysnCultureChangeBuildingDesign	Yes/No	Have you implemented residential building design?
ysnCultureChangeDiningEnhancements	Yes/No	Have you implemented residential dining enhancements?
ysnCultureChangeSnoezelen	Yes/No	Have you implemented sensory room?
ysnCultureChangeOther	Yes/No	Have you implemented other enhancements?
memCultureChangeSpecify	Memo	Please specify the other enhancements
strCultureChangePhilosophy	Text	Indicate the culture change philosophy being practiced

Table 6: tblPatientCensus

Field Name	Data Type	Definition
IngPatientCensusID	AutoNumber	Primary key
IngNursingHomeID	Number	Establishes table relationships
intNumNHPatients	Number	Number of nursing home patients in facility
intNumACHPatients	Number	Number of adult care patients
intNumPatientsNursingMale18-20	Number	Number of Male Nursing Home Patients Age 18-20
intNumPatientsNursingFemale18-20	Number	Number of Female Nursing Home Patients Age 18-20
intNumPatientsNursingMale21-34	Number	Number of Male Nursing Home Patients Age 21-34
intNumPatientsNursingFemale21-34	Number	Number of Female Nursing Home Patients Age 21-34
intNumPatientsNursingMale35-54	Number	Number of Male Nursing Home Patients Age 35-54
intNumPatientsNursingFemale35-54	Number	Number of Female Nursing Home Patients Age 35-54
intNumPatientsNursingMale55-64	Number	Number of Male Nursing Home Patients Age 55-64
intNumPatientsNursingFemale55-64	Number	Number of Female Nursing Home Patients Age 55-64
intNumPatientsNursingMale65-74	Number	Number of Male Nursing Home Patients Age 65-74
intNumPatientsNursingFemale65-74	Number	Number of Female Nursing Home Patients Age 65-74
intNumPatientsNursingMale75-84	Number	Number of Male Nursing Home Patients Age 75-84
intNumPatientsNursingFemale75-84	Number	Number of Female Nursing Home Patients Age 75-84
intNumPatientsNursingMale85+	Number	Number of Male Nursing Home Patients Age 85+
intNumPatientsNursingFemale85+	Number	Number of Female Nursing Home Patients Age 85+
intNumPatientsNursingMaleTotal	Number	Total number of Male Nursing Home Patients
intNumPatientsNursingFemaleTotal	Number	Total number of Female Nursing Home Patients
sngNumHoursNursing	Number	Number of nursing hours worked on September 30, 2013
intNumPatientsAdultCareMale0-34	Number	Number of Male Adult Care Home Residents under 35
intNumPatientsAdultCareFemale0-34	Number	Number of Female Adult Care Home Residents under 35
intNumPatientsAdultCareMale35-64	Number	Number of Male Adult Care Home Residents Age 35-64
intNumPatientsAdultCareFemale35-64	Number	Number of Female Adult Care Home Residents Age 35-64
intNumPatientsAdultCareMale65-74	Number	Number of Male Adult Care Home Residents Age 65-74
intNumPatientsAdultCareFemale65-74	Number	Number of Female Adult Care Home Residents Age 65-74
intNumPatientsAdultCareMale75-84	Number	Number of Male Adult Care Home Residents Age 75-84
intNumPatientsAdultCareFemale75-84	Number	Number of Female Adult Care Home Residents Age 75-84
intNumPatientsAdultCareMale85+	Number	Number of Male Adult Care Home Residents Age 85+
intNumPatientsAdultCareFemale85+	Number	Number of Female Adult Care Home Residents Age 85+
intNumPatientsAdultCareMale	Number	Total number of Male Adult Care Home Residents
intNumPatientsAdultCareFemale	Number	Total number of Female Adult Care Home Residents

Table 7: tblPatientData

Field Name	Data Type	Definition
IngPatientDataID	AutoNumber	Primary key
IngNursingHomeID	Number	Establishes table relationships
intNursingPatientsBeginningCensus	Number	Number of Nursing Patients at the beginning of the reporting period
intNursingPatientsAdmissions	Number	Number of Nursing Patients admitted
intNursingPatientsDischarges	Number	Number of Nursing Patients discharged
intNursingPatientsDeaths	Number	Number of Nursing Patient deaths
intNursingPatients	Number	Calculated Number of Nursing Patients
intAdultCareResidentsBeginningCensus	Number	Number of Adult Care Patients at the beginning of the reporting period
intAdultCareResidentsPatientsAdmissions	Number	Number of Adult Care Patients admissions
intAdultCareResidentsPatientsDischarges	Number	Number of Adult Care Patients discharges
intAdultCareResidentsPatientsDeaths	Number	Number of Adult Care Patient deaths
intAdultCareResidents	Number	Calculated Number of Adult Care Patients
intInpatientDaysNCMedicare	Number	Number of Nursing Care Days reimbursed by Medicare
intInpatientDaysNCMedicaid	Number	Number of Nursing Care Days reimbursed by Medicaid
intInpatientDaysNCPrivatePay	Number	Number of Nursing Care Days reimbursed by Private Pay
intInpatientDaysNCOther	Number	Number of Nursing Care Days reimbursed by Other
intInpatientDaysNCTotal	Number	Total number of Nursing Care Days of Care
intInpatientDaysACHPrivatePay	Number	Number of ACH Days reimbursed by Private Pay
intInpatientDaysACHCountyAssistance	Number	Number of ACH Days reimbursed by County Special Assistance
intInpatientDaysACHOther	Number	Number of ACH Days reimbursed by Other
intInpatientDaysACHTotal	Number	Total number of Adult Care Home Days of Care

Table 8: tblPatientOrigin

Field Name	Data Type	Definition
intPatientOriginID	AutoNumber	Primary key
intNursingHomeID	Number	Establishes table relationships
intPatientType	Number	1: Nursing Care Patient; 2: Adult Care Home Resident
intLocationID	Number	Identifies the county of residence for the individuals prior to admission
intBeginCensus	Number	Number of patients at the beginning of the reporting period
intAdmitted	Number	Number of patients admitted during the reporting period
intTotal	Number	Total number of patients from the location during the reporting period
intMedicaid	Number	The number of patients whose care was paid for, in whole or in part, by Medicaid

Table 9: tblPatientServices

Field Name	Data Type	Definition
IngPatientServicesID	AutoNumber	Primary key
IngNursingHomeID	Number	Establishes table relationships
ysnLicensedCCRC	Yes/No	Is the facility licensed by the Dept. of Insurance as a CCRC?
ysnCCRCOwnOrOperate	Yes/No	Not currently used
ysnAdultDayCare	Yes/No	Not currently used
IngMaxAdultDayCareClients	Number	Not currently used
ysnHospice	Yes/No	Not currently used
ysnAdultRespite	Yes/No	Not currently used
ysnLicensedBedChange	Yes/No	Was their a change to the licensed bed capacity?
dtmLicensedBedChangeDate	Date/Time	What was the effective date of the change?
IngLicensedBedPrevNF	Number	The previous number of licensed nursing home beds
IngLicensedBedPrevAdult	Number	The previous number of licensed adult care beds
ysnOutpatientRehabTherapy	Yes/No	Not currently used
ysnCombinationFacility	Yes/No	Is the facility a combination facility, thereby incorporating licensed ACH beds?
ysnNHRules	Yes/No	Does the facility apply NH rules to the ACH beds?
ysnACHRules	Yes/No	Does the facility apply ACH rules to the ACH beds?
intBedsNFTotal	Number	Total number of Nursing Facility beds
intBedsNFGeneral	Number	Number of General Nursing Facility beds
intBedsNFAIz	Number	Number of Alzheimer's Special Care Unit Beds
intBedsNFIHIV	Number	Not currently used
intBedsNFBraInJury	Number	Number of Traumatic Brain Injury Resident Beds
intBedsNFVentilator	Number	Number of Ventilator Dependent Resident Beds
intBedsNFBariatric	Number	Number of Bariatric Resident Beds
ysnBedsNFBariatric	Yes/No	Are you equipped to accommodate bariatric residents?
strBedsNFOtherSpecify	Text	Not currently used
intBedsNFOther	Number	Not currently used
intBedsACHTotal	Number	Total number of Adult Care Home Beds
intBedsACHGeneral	Number	Number of General Adult Care Home Beds
intBedsACHAIz	Number	Number of Alzheimer's Special Care Unit Beds
intBedsACHBariatric	Number	Not currently used
ysnBedsACHBariatric	Yes/No	Are you equipped to accommodate bariatric residents?
intBedsTotal	Number	Total number of Licensed Beds
intBedsOnlyMedicare	Number	Number of beds certified for Medicare only
intBedsDual	Number	Number of beds dually certified for both Medicare & Medicaid
intBedsOnlyMedicaid	Number	Number of beds certified for Medicaid only
intNHOpBeds	Number	Total Operational Beds on Sept 30: Nursing
intACOpBeds	Number	Total Operational Beds on Sept 30: ACH

Table 10: tblStaff

Field Name	Data Type	Definition
intStaffID	AutoNumber	Primary key
intNursingHomeID	Number	Establishes table relationships
dtmPayrollDate	Date/Time	Date employees on payroll
sngStaffRNTotalFTE	Number	Total facility FTEs that are registered nurses.
sngStaffRNTotalHours	Number	Total facility annual consulting hours of registered nurses.
sngStaffLPNTotalFTE	Number	Total facility FTEs that are licensed practical nurses.
sngStaffLPNTotalHours	Number	Total facility annual consulting hours of licensed practical nurses.
sngStaffNurseAidesTotalFTE	Number	Total facility FTEs that are certified nurse aides
sngStaffNurseAidesTotalHours	Number	Total facility annual consulting hours of certified nurse aides
sngStaffMedicalDirectorTotalFTE	Number	Total facility FTEs that are medical director
sngStaffMedicalDirectorTotalHours	Number	Total facility annual consulting hours of medical director
sngStaffDirectorNursesTotalFTE	Number	Total facility FTEs of director of nurses
sngStaffDirectorNursesTotalHours	Number	Total facility annual consulting hours of director of nurses
sngStaffAsstDirectorNursesTotalFTE	Number	Total facility FTEs that are assistant director of nurses
sngStaffAsstDirectorNursesTotalHours	Number	Total facility annual consulting hours of assistant director of nurses
sngStaffDevCoorTotalFTE	Number	Total facility FTEs of staff development coordinator
sngStaffDevCoorTotalHours	Number	Total facility annual consulting hours of staff development coordinator
sngStaffWardSecTotalFTE	Number	Total facility FTEs that are ward secretaries
sngStaffWardSecTotalHours	Number	Total facility annual consulting hours of ward secretaries
sngStaffMedicalRecsTotalFTE	Number	Total facility FTEs of medical records
sngStaffMedicalRecsTotalHours	Number	Total facility annual consulting hours of medical records
sngStaffPharmConsultTotalFTE	Number	Total facility FTEs of pharmacy consultants
sngStaffPharmConsultTotalHours	Number	Total facility annual consulting hours of pharmacy consultants
sngStaffAdminTotalFTE	Number	Total facility FTEs of administrators
sngStaffAdminTotalHours	Number	Total facility annual consulting hours of administrators
sngStaffAsstAdminTotalFTE	Number	Total facility FTEs of assistant administrators
sngStaffAsstAdminTotalHours	Number	Total facility annual consulting hours of assistant administrators
sngStaffOtherOfficeTotalFTE	Number	Total facility FTEs of other office personnel
sngStaffOtherOfficeTotalHours	Number	Total facility annual consulting hours of other office personnel
sngStaffDieticianTotalFTE	Number	Total facility FTEs of dietician
sngStaffDieticianTotalHours	Number	Total facility annual consulting hours of dieticians
sngStaffFoodServiceTotalFTE	Number	Total facility FTEs of food service supervisors
sngStaffFoodServiceTotalHours	Number	Total facility annual consulting hours for food service supervisors
sngStaffCooksTotalFTE	Number	Total facility FTEs of cooks
sngStaffCooksTotalHours	Number	Total facility annual consulting hours of cooks
sngStaffDietaryAidesTotalFTE	Number	Total facility FTEs of dietary aides

Field Name	Data Type	Definition
sngStaffDietaryAidesTotalHours	Number	Total facility annual consulting hours of dietary aides
sngStaffSSDirectorTotalFTE	Number	Total facility FTEs of social services director
sngStaffSSDirectorTotalHours	Number	Total annual consulting hours of social services director
sngStaffSSAssistTotalFTE	Number	Total facility FTEs of social services assistant
sngStaffSSAssistTotalHours	Number	Total facility annual consulting hours of social services assistant
sngStaffActivityDirTotalFTE	Number	Total facility FTEs of activity director
sngStaffActivityDirTotalHours	Number	Total facility annual consulting hours of activity director
sngStaffActivityAssistTotalFTE	Number	Total facility FTEs of activity assistant
sngStaffActivityAssistTotalHours	Number	Total facility annual consulting hours of activity assistant
sngStaffHousekeepingSupTotalFTE	Number	Total facility FTEs of housekeeping supervisor
sngStaffHousekeepingSupTotalHours	Number	Total facility annual consulting hours of housekeeping supervisor
sngStaffLaundrySupTotalFTE	Number	Total facility FTEs of laundry supervisor
sngStaffLaundrySupTotalHours	Number	Total facility annual consulting hours of laundry supervisor
sngStaffHousekeepingAidesTotalFTE	Number	Total facility FTEs of housekeeping aides
sngStaffHousekeepingAidesTotalHours	Number	Total facility annual consulting hours of housekeeping aides
sngStaffLaundryAidesTotalFTE	Number	Total facility FTEs of laundry aides
sngStaffLaundryAidesTotalHours	Number	Total facility annual consulting hours of laundry aides
sngStaffMaintSupTotalFTE	Number	Total facility FTEs of maintenance supervisor
sngStaffMaintSupTotalHours	Number	Total facility annual consulting hours of maintenance supervisor
sngStaffJanitorsTotalFTE	Number	Total facility FTEs of janitors
sngStaffJanitorsTotalHours	Number	Total facility annual consulting hours of janitors
sngStaffPhysTherTotalFTE	Number	Total facility FTEs of physical therapist
sngStaffPhysTherTotalHours	Number	Total facility annual consulting hours of physical therapist
sngStaffRehabAidesTotalFTE	Number	Total facility FTEs of rehabilitation aides
sngStaffRehabAidesTotalHours	Number	Total facility annual consulting hours of rehabilitation aides
sngStaffRespTherTotalFTE	Number	Total facility FTEs of respiratory therapist
sngStaffRespTherTotalHours	Number	Total facility annual consulting hours of respiratory therapist
sngStaffOccTherTotalFTE	Number	Total facility FTEs of occupational therapist
sngStaffOccTherTotalHours	Number	Total facility annual consulting hours of occupational therapist
sngStaffSHTherTotalFTE	Number	Total facility FTEs of speech/hearing therapist
sngStaffSHTherTotalHours	Number	Total facility annual consulting hours of speech/hearing therapist
sngTotalTotalFTE	Number	Total facility FTEs
sngTotalTotalHours	Number	Total facility annual consulting hours