

VALIDATED LEVEL OF CARE TOOL

Child's Name: _____

Staffing Date: _____

1. STABILITY OF THE CHILD IN A HOME SETTING			
A. The child is at risk for or is experiencing infrequent and predictable changes in medical needs. The child is considered at risk if one or more of the following conditions is present: The child has a history of changes in medical needs; The child does not have an established regimen to manage their medical needs; or The interventions that the child receives pose a risk to the child.	B. The child is experiencing frequent and predictable or infrequent and unpredictable changes in medical needs.	C. The child is experiencing frequent and unpredictable changes in medical needs.	D. The child's medical stability in a home setting does not present as a current concern.

2. TOLERANCE TO DELAY AND TASK ERROR BY CAREGIVER (Impact and severity of consequences of a delay or task error in the child's medical needs)			
A. The child could experience a mild change in the outcome of their health care status.	B. The child could experience a decrease in functioning, an acute illness or a decline in general health care status.	C. The child could experience the loss of functioning or life.	D. The child's tolerance to delay and task error does not present as a current concern in the outcome of the child's health care status.

3. INTERVENTIONS (See Sample Interventions by Category on back of page)				
A. The child's current medical needs require simple interventions by the caregiver. The child's needs require the caregiver to perform simple tasks and use in-home equipment and supplies.	B. The child's current medical needs require the caregiver to perform one or more complex interventions or treatments.	C. The child's current medical needs require complex interventions that involve a series of instructions or steps. The child's current medical needs require quick independent decisions made by the caregiver, without awaiting instruction by a health care professional, and the skills required to maintain life or to prevent or respond to life threatening events.	D. The child's current medical needs require 24-hour monitoring, intervention or treatments and documentation by a trained caregiver. The interventions are required to maintain functioning and to prevent or respond to life threatening events.	E. The child's interventions do not present as a current concern.

4. OBSERVATION, ASSESSMENT, AND DOCUMENTATION			
A. Child's current medical needs require the caregiver to provide observation and limited assessment.	B. Child's current medical needs require the caregiver to provide frequent observation, comprehensive assessment that requires interpretation of information to formulate a plan of action, and detailed documentation.	C. Child's current medical needs require the caregiver to provide ongoing observation, comprehensive assessment that requires interpretation of information to formulate and implement a plan of action, and detailed documentation.	D. Observation, assessment and documentation does not present as a current concern.

5. PERSONAL CARE (Required care due to the child's clinical condition)			
A. Child's personal care needs are chronologically age appropriate but require more time or must be done more frequently.	B. Child's personal care needs are not chronologically age appropriate and require some care assistance with ADLs.	C. Child's personal care needs are significantly chronologically delayed and require total care for majority of all ADLs.	D. The child's personal care needs are chronologically age appropriate and completed within expected time frames.

LEVEL OF CARE SCORING: Points by Category: (See Level of Care definitions on back of page)

		Child's Score	Child's Total Score
1. Stability of the Child in a Home Setting	A=5 B=10 C=15 D=0	_____	_____
2. Tolerance to Delay and Task Error	A=1 B=5 C=10 D=0	_____	
3. Interventions	A=5 B=10 C=15 D=20 E=0	_____	Child's Level of Care
4. Observation, Assessment, and Documentation	A=1 B=5 C=10 D=0	_____	
5. Personal Care	A=5 B=10 C=15 D=0	_____	

Refer to LOR Terms / Definitions for clarification

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SAMPLE INTERVENTIONS BY CATEGORY / EXAMPLES BUT NOT LIMITED TO: (Check all interventions in each category that apply to the child.)

Category A: Simple interventions required due to the child's clinical condition

<input type="checkbox"/> Oral or bulb suctioning;	<input type="checkbox"/> Pulse-oximeter checks that do not typically result in an intervention;
<input type="checkbox"/> Positioning as with GE-reflux, aspiration prevention and/or turning;	<input type="checkbox"/> Medications classified as simple on the CMAT Nursing Assessment
<input type="checkbox"/> Special feeding techniques;	<input type="checkbox"/> Assistance with mobilization (transfers, wheelchair);
<input type="checkbox"/> Cast care;	<input type="checkbox"/> Regular visits to a health care provider;
<input type="checkbox"/> Applying splints;	<input type="checkbox"/> Apnea monitoring with no history of alarms (Initial or since last assessment)
<input type="checkbox"/> Employing standard precautions for a contagious disease;	<input type="checkbox"/> Skin / wound care not requiring pain medication or sterile procedures;
<input type="checkbox"/> Infrequent nebulizer treatments (PRN);	<input type="checkbox"/> Other(s):

Category B: Complex interventions

<input type="checkbox"/> Ostomy care;	<input type="checkbox"/> Pharyngeal suctioning;
<input type="checkbox"/> Frequent nebulizer treatments (daily);	<input type="checkbox"/> Shunt care including monitoring or assessment;
<input type="checkbox"/> Bolus G-tube or NG-tube feeding;	<input type="checkbox"/> Administration of medications classified as complex on the CMAT Nursing Assessment;
<input type="checkbox"/> Positioning for severe contractures, scoliosis, or other physical conditions resulting in or due to immobilization of the patient;	<input type="checkbox"/> Intermittent oxygen administration & care;
<input type="checkbox"/> Chest physiotherapy;	<input type="checkbox"/> Frequent visits to providers in / out of home; (health, mental health and/or developmental)
<input type="checkbox"/> Apnea monitoring; urgent true apnea events requiring action of caregiver;	<input type="checkbox"/> if developmental - <i>child is known to Early Steps if under 3yrs</i> <input type="checkbox"/> Other(s);

Category C: Complex interventions involving series of instructions or steps

<input type="checkbox"/> Sterile procedure (trach or catheter procedures);	<input type="checkbox"/> Continuous positive airway pressure (C-PAP); BiPAP; or
<input type="checkbox"/> Skin / wound care that requires pre-medication for pain control or sterile procedures;	<input type="checkbox"/> Spontaneous Intermittent Mechanical Ventilation (SIMV);
<input type="checkbox"/> Sterile wound dressings or wounds with packing;	<input type="checkbox"/> Administration of medications classified as complex on the CMAT nursing assessment that require observation or assessment prior to administration;
<input type="checkbox"/> Infrequent tracheostomy suctioning or trach care;	<input type="checkbox"/> Taking the child to a physician or emergency room as a result of an unanticipated event related to the child's clinical condition;
<input type="checkbox"/> Feedings delivered via pump (G-tube or NG-tube);	<input type="checkbox"/> Well controlled diabetic care (stable with no episodic events for 6 months);
<input type="checkbox"/> Continuous oxygen administration;	<input type="checkbox"/> Other(s):
<input type="checkbox"/> Pulse-oximeter check that typically results in a need for oxygen administration;	

Category D: Complex interventions or treatments requiring 24-hour monitoring and documentation

<input type="checkbox"/> Ventilator management;	<input type="checkbox"/> Administration of medication requiring ongoing observation to prevent loss of life;
<input type="checkbox"/> Technology dependent interventions to sustain life;	<input type="checkbox"/> Frequent suctioning and/or tracheostomy care;
<input type="checkbox"/> Insulin dependent diabetic care; (not controlled for 6 months);	<input type="checkbox"/> Other(s):
<input type="checkbox"/> Apnea events requiring emergent interventions, CPR, etc.;	

LEVEL OF CARE DEFINITIONS

Level I: 9 to 24 points The child is at risk for or is experiencing infrequent and predictable changes in medical needs. The child's medical needs require simple interventions, medical management, reliable observation, and documentation by a trained caregiver.	Level II: 25 to 39 points The child is experiencing frequent and predictable changes in medical needs or infrequent and unpredictable changes in medical needs. The needs can be met by a caregiver that is prepared to meet both anticipated and unanticipated events.	Level III: 40 to 70 points The child is experiencing frequent and unpredictable changes in medical needs. These needs can be met in the home setting by a caregiver who is prepared to intervene when the child experiences anticipated and unanticipated events.
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