

# A Community Demographics

Completed by: \_\_\_\_\_

Title: \_\_\_\_\_

Date Started: \_\_\_\_\_ Date Completed: \_\_\_\_\_

**PURPOSE**

To provide insight into existing levels of need and future needs of the community.

**DIRECTIONS**

Include all members for whom you are responsible.

**1. What is the total number of members in your Community ?**

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**2. Age range of community members:** List the number of members in your community within the following age ranges as of (date):

<b>a.</b>	20-29:	30-39:	40-49:	50-59:	60-69:
<b>b.</b>	70-79:	80-89:	90 +:		

**3. Do you employ lay staff to assist with your daily operations or your ministry?**

**4. Do you orient or train your lay staff in your Mission and Values?**

**In the table on the next page:**

- List all the locations where your community members reside.
- Specify the type of living establishment (i.e., an apartment, private house, convent, parish house, or provincial house). (Second column)
- Indicate the number of community members at each location. (Third column)
- Indicate the level of care that can be provided. The type of care can be independent living, assisted living, skilled care or infirmary. If the location does not offer any care, you can leave the column blank or write non-applicable (NA). (Fourth column)

**Level of Care Definitions**

**1. Independent Living**  
Individual can meet his or her needs with some assistance from others to help with ADLs; can live independently.

**2. Assisted Living**  
Individual needs some assistance to meet his or her needs. It is important to know if your community can provide the needed assistance for this individual to live safely in his or her current residence. If the answer is no, than other arrangements need to be explored.

**3. Skilled Care**  
Individual requires professional assistance 24/7 to meet his/her needs.

**4. Infirmary**  
A house or portion of a building where care for the sick or injured is provided. Care in an infirmary can be minimal or independent care through skilled care.

**5. Other**  
List other types of care areas you may have.

**A — COMMUNITY DEMOGRAPHICS**

<b>Location</b>	<b>Establishment</b>	<b>Alone</b>	<b>2-8</b>	<b>9-20</b>	<b>21 +</b>	<b>Care Level</b>

# C Level of Care

Individual being Assessed:	_____		
Age:	_____		
Completed by:	_____		
Title:	_____		
Date Started:	_____	Date Completed:	_____
Determined Level of Care:	_____		

### PURPOSE

To evaluate one member of the community who may need additional care and assistance and to determine the optimal living arrangement for the member evaluated.

### DIRECTIONS

Read the scoring definition for each assessment area then score the community member based on the definition that best describes his or her ability today. Enter the score for the assessment area in the far right column.

After completing the assessment, total the score. That score will help identify an appropriate level of care needed to provide the resources to keep the person at optimal function and safety.

### SCORING GUIDELINES

There are four categories that members may score under. Please note that there are two options for scores between 0-18.

**HELPFUL HINT**  
Have each community member complete his/her own assessment and compare this with the information gathered by the assessment team. What may be a challenge for the community may not be for the person and vice versa.

### DEFINITIONS

**Instrumental Activities of Daily Living or IADLs**  
Include use of telephone, shopping, food preparation, housekeeping, laundry, transportation, medication administration, and personal finances

**Activities of Daily Living or ADLs**  
Include bathing, dressing, toileting, transferring, mobility (ambulation or via wheelchair), and continence.

The ability to perform IADL and ADL tasks independently or with assistance will determine the type of living arrangement that ensures the provision of resources needed to keep the individual at optimal function.

**CODING KEY**

- 0 = Independent, no assistance, manages circumstances independently.
- 1 = Supervision or set-up only, guidance, stand-by assistance.
- 2 = Requires physical assistance, member participates.
- 3 = Total dependence or no participation.

**C — LEVEL OF CARE**

* IADL Assessment Area	0	1	2	3	Score
<b>Use of Telephone</b>	Independently looks up numbers, dials numbers and initiates calls	Independently dials familiar numbers	Answers telephone but cannot dial	Does not use telephone at all	
<b>Shopping</b>	Independently takes care of all shopping needs	Independently can make small purchases	Needs to be accompanied for any shopping	Unable to shop	
<b>Food Preparation</b> (score 0 if not applicable for this individual)	Independently plans, prepares and serves adequate meals	Prepares adequate meals if supplied with ingredients	Heats, serves and prepares meals but does not maintain adequate diet	Needs to have meals prepared and served to maintain adequate nutrition and hydration	
<b>House-keeping</b>	Maintains living space alone or with occasional assistance for heavy domestic work	Performs light daily tasks such as dish washing and bed making	Performs light daily tasks but cannot maintain acceptable level of cleanliness	Does not participate in any housekeeping tasks	
<b>Laundry</b>	Independently does personal laundry completely	Independently launders some small items such as socks or underwear	Launders some small items such as socks or underwear with assistance	All laundry done by others	
<b>Transportation</b>	Travels independently on public transportation or drives own car	Arranges own travel via car service; travels on public transportation when accompanied	Travel limited to taxi, van or automobile with assistance of another	Does not travel at all	
<b>Medication Administration</b>	Independently orders, prepares and takes medications in correct dose at correct time	Independently takes all medications that are set up daily or weekly by another	Can self administer prepared oral meds, but assistance needed all other medications	Incapable to taking own medications	
<b>Finances</b> (score 0 if not applicable for this individual)	Independently handles all personal finances	Manages day to day finances independently	Manages day to day purchases but needs help with banking and major purchases	Incapable of handling financial matters	
<b>Page 1 Total Score:</b>					

**C — LEVEL OF CARE**

<b>+ ADL Assessment Area</b>	<b>0</b>	<b>1</b>	<b>2</b>	<b>3</b>	<b>Score</b>
<b>Bathing</b>	Independently bathes self completely	Needs minimal assistance with single part of body such as, back, genital area or disabled extremity	Assistance needed bathing more than one part of body; getting in or out of tub or shower	Requires total assistance with bathing	
<b>Dressing</b>	Independently selects and obtains and puts on clothing	Assistance with selecting or obtaining clothes; can dress self	Participates but needs some assistance removing and putting on clothing	Needs to be dressed by other	
<b>Toileting</b>	Independently goes to toilet; gets on and off toilet, adjusts clothes, cleans genital area without help	Requires some assistance getting onto or off toilet; otherwise independent	Needs reminders to toilet; needs cuing to complete toileting routine	Dependent on others to transfer to toilet (bedpan or commode) or use urinal, clean genital area, and adjust clothing	
<b>Continence</b>	Exercises complete control over urination and defecation	Incontinent of urination or defecation less than once a week	Incontinent of urination or defecation less than once a day	Totally incontinent of bowel and bladder	
<b>Transferring</b>	Independently moves in and out of bed or chair with or without assistive devices	Moves in and out of bed or chair independently, but there are safety concerns	Requires assistance of one to transfer safely in and out of bed or chair	Requires total assistance to transfer safely in or out of bed or chair	
<b>Feeding</b>	Independently feeds self	If food is cut up and containers opened by another, can get food from plate to mouth without assistance	Some hands on assistance required to get food to mouth or cuing required	Requires total assistance with feeding or requires intravenous or tube feeding	
<b>Mobility (ambulation or wheelchair)</b>	Independently and safely can mobilize self to desired destination with or without an assistive device	Requires standby assistance to assure safe movement from room to room	Requires hands on assistance of one to safely move from room to room	Requires assistance of another to mobilize from room to room	
<b>Page 2 Total Score:</b>					

## C — LEVEL OF CARE

Other Assessment Areas	0	1	2	3	Score
<b>Behavior</b>	Interact within acceptable social standards	Interacts appropriately after cued	Unsafe without supervision: responds to redirection, may be resistive related to disorientation, hallucinations, obsessive compulsive disorder, wandering, or withdrawal	Unsafe without supervision: staff intervention required related to verbal or physical abuse to self or others, destruction of property, resistive to redirection	
<b>Case (Care) Management</b>	Independently can manage own care needs	Nurse or case manager needed monthly to process MD orders, laboratory results or assessments	Nurse or case manager needed weekly to process MD orders, laboratory results or assessments	Nurse needed more than weekly to process MD orders, lab results or assessments; dressing changes, injections, vital signs	
<b>General Health Status</b>	Stable	Stable condition with less than monthly exacerbation	More than monthly exacerbations	Hospice or terminal condition	
<b>Page 3 Total Score:</b>					

### INTERPRETING THE FINDINGS

Add the scores from each page to find the individual's total score. Use the scoring guidelines on the next page to determine the individual's level of care.

Page 1 Score:		<b>Level of Care:</b>
Page 2 Score:		
Page 3 Score:		
<b>Total Score:</b>		

## Level of Care Scoring Guidelines

Score	Level of Care
Between 0 — 18	<p><b>Independent Living</b></p> <p>These individuals are capable of taking care of their own activities of daily living, are competent in decision making, and are able to carry out the normal problem-solving activities of daily life.</p>
Between 0 — 18	<p><b>Independent with Services</b></p> <p>These are individuals who are capable of taking care of the majority of their own activities of daily living, but may require assistance with meal preparation, house-keeping, laundry services, transportation, etc. Many of these individuals would be likely to live with others.</p>
Between 19 — 36	<p><b>Assisted Living</b></p> <p>Care is provided for individuals who require some assistance in the activities of daily living. Examples of assisted living services are meal preparation, house-keeping and laundry services, assistance with bathing, monitoring and distributing medications, and assistance with scheduling of physician appointments. Many of these individuals would be likely to live in larger, congregate settings. This care level may eventually lead to Skilled Care in settings where nursing care is provided.</p>
Greater than 36	<p><b>Skilled Care</b></p> <p>Care is provided for individuals with long-term illnesses or disabilities whose needs are met by appropriate health care personnel under the direction of a registered nurse. These individuals would normally be found in a nursing home setting.</p>

### Sources

\* IADL Assessment adapted from the Lawton-Brody Instrumental Activities of Daily Living Scale: Source: Best Practices in Nursing Care to Older Adults, The Hartford Institute for Geriatric Nursing, New York University, College of Nursing, [www.hartfordign.org](http://www.hartfordign.org).

+ ADL Assessment adapted from Katz Index for Independence in Activities of Daily Living: Source: Best Practices in Nursing Care to Older Adults, The Hartford Institute for Geriatric Nursing, New York University, College of Nursing, [www.hartfordign.org](http://www.hartfordign.org).

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### NOTES/COMMENTS

*Use the space below to identify any additional concerns not included in the assessment. Add paper if needed.*

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## DEFINITIONS

**Counseling:** a professional relationship that empowers diverse individuals, families, and groups to accomplish mental health, wellness, education, and career goals (www.counseling.org, 20/20 Consensus Definition of Counseling, American Counseling Association, 2013).

**Eldercare:** care that maintains or improves wellness and quality of life for the aged; care to meet the physical, social, mental, emotional and spiritual needs of the aged.

**Home Health Aid:** person trained to provide individualized care in a home or healthcare setting at the direction of a healthcare professional; care includes but not limited to services provided by a homemaker/ companion, as well as personal care such as bathing, dressing, feeding, transfers from one surface to another (example bed to chair), toileting, ambulation assistance, simple dressing changes, and monitoring and reporting changes in health status.

**Home maker/ companion:** person trained to provide socialization, light housekeeping, simple but nutritious meal preparation, transportation to and from medical appointments or shopping, and help with pet care.

**Hospice care:** physical, social, mental, emotional and spiritual care provided by a team of professionals that focus on the palliation of a terminally ill or seriously ill individual's symptoms.

**Medication management:** overall management of obtaining, preparing, and taking all prescribed medications in the correct dose, via the correct route of administration and at the correct time.

**Nursing Care:** provide support services to your loved ones by assisting them in maintaining their independence and quality of life in the comfort of their own home or life care community.

**PACE:** The Program of All-Inclusive Care for the Elderly: Provides comprehensive long term services and supports to Medicaid and Medicare enrollees. An interdisciplinary team of health professionals provides individuals with coordinated care. For most

participants, the comprehensive service package enables them to receive care at home rather than receive care in a nursing home.

**Palliative care:** is a philosophy of care and an organized highly structured system for delivering care.

**Psychiatric services:** a clinical program staffed by psychiatrists (physicians specializing in the diagnosis and treatment of mental health problems).

**Psychiatric services:** services provided by a psychiatrist, psychologist, master prepared social worker, or psychiatric nurse practitioner that provide psychotherapy, research, assessment, diagnosis, treatment, and prevention of mental illnesses.

**Respite care:** temporary institutional care of a dependent elderly, ill, or handicapped individual, providing relief for the usual caregivers.

**Senior services:** a program dedicated to providing low-cost, high-quality services and programs to older adults.

**Social work:** service provided or coordinated by a social worker to an individual, family, community, or organization; services include obtaining needed resources or services, facilitating interactions among an individual or group and the living environment, and problem solving resource management.

**Therapy (Occupational, Physical, Speech, Respiratory):** literally means “curing, healing” and is the attempted remediation of a health problem, usually following a diagnosis.

**Physical Therapy:** a health profession that uses specific exercises and equipment to assess and treat individuals who have experienced physical decline due to a medical problem (such as following a stroke, congenital defect, injury), surgical intervention (such as knee replacement, hip replacement, etc), or lack of use.

**Occupational Therapy:** a health profession that uses treatments to develop, recover, or maintain the daily living and work skill of individuals with a physical, mental or developmental condition.