

## NDBS Care Coordination (CC) Pilot: Complexity Levels

The NDBS Care Coordination Pilot is for children with a neurodevelopmental diagnosis (specifically ASD, developmental disability and/or intellectual disability) who are between the ages of 2 and 8.

- 1) Use this form to identify and assess the level of CC need for enrolled children and families
- 2) This will typically be done after the care coordination visit during a huddle with the clinician and coordinator.
- 3) Review the 5 domains below describing different levels of need/support: 1) health services, 2) family support services, 3) behavioral/mental health services, 4) educational services, and 5) special issues.
- 4) Calculate a total score between 5 and 15 and transfer onto the child's "Care Coordination Monthly Measure" form
- 5) Scores will occur at visit and again at the 3-month conclusion of the care coordination period.

<b>Dimension</b>	<b>1 Minimal Need</b>	<b>2 Moderate Need</b>	<b>3 Extensive Need</b>
<b>1. Health &amp; Services</b>	Health status is stable, care is routine /preventive, child may see a specialist annually	Health status is generally stable; regular office visits are to review management; periodic consultation occurs with 1 or more specialist	Health status is unstable +/-or frequent office visits occur; many hospitalizations & ER visits; frequent consultations with 1 or more specialists
<b>2. Family Support</b>	Family status stable; no major environmental stresses; traditional social supports present and utilized	One or more stressors may be present, family requires occasional support from office and other community resources	Multiple major stressors are present, family resources are strained, extensive community support needed +/-or major concerns about care giving environment
<b>3. Behavioral and Mental Health</b>	Behavioral health status is stable, routine anticipatory guidance	Regular office visits to review care management or regular consultation & counseling with mental health providers	Behavioral health status is unstable, extensive supports from office and community professionals; may require day treatment program or in-patient treatment
<b>4. Education</b>	Routine monitoring of developmental/school progress, in regular classroom with minimal support	Child needs or has an <i>IFSP, IEP or 504</i> plan, most of child's needs are met in a regular classroom, may require 1 special health procedure at school	Extensive support required, full-time aide or special class for most of the day, +/-or multiple special health procedures in educational setting
<b>5. Special Issues</b>	Child and family follow recommendations readily, there is limited need for decision supports; no or few cultural factors impact care, child/family proactively manage care	Child and family require extra time to understand healthcare recommendations with regular need for decision supports; translator required for appointments or occasional missed visits	Extensive need for decision supports and care reminders; cultural issues are major barriers to care, limited capacity for self-management, or major disagreements with the plan of care

*(Italicized words are explained on reverse page).*

### Level of Need Descriptions

Total Score \_\_\_\_\_ [5-15 Range]

**Level 1: Basic/Minimal** At this level, families are informed of care coordination opportunities and services and are assisted in how and when they choose to take advantage of them. Level 1 can be viewed as an “information and referral” transaction, but the services rendered should still be integrated into a comprehensive care plan.

**Level 2: Moderate** At this level, a care coordination plan is developed with families. It details needs, short- and long-term goals, and related strategies and clarifies how care coordination services will be delivered. Skills, knowledge, and increasing responsibility for care coordination are transferred to children and families, as appropriate. Transactions at this level involve communication among various stakeholders; integration of information into a care plan is essential.

**Level 3: Extensive** At this level, care coordination needs to be longitudinal and far-reaching. The members of the care team and family determine methods of communication and intervals for the coordination of care, as well as assessments of progress and outcomes

[Level descriptions taken from Antonelli, McAllister and Popp, Making Care Coordination a critical component of the pediatric health system: a multidisciplinary framework, Commonwealth Fund, 2009.]

### **Terms and Acronyms**

ER Emergency room

IEP Individual Education Plan

IFSP Individual Family Service Plan

504 Section 504 of the Rehabilitation Act of 1973 is a federal civil rights law, which prohibits discrimination against individuals with disabilities. It applies to any school, which receives federal funds. The intent of this law is to provide students with disabilities equal access to educational programs, services, and activities. Students with disabilities may not be denied participation in school programs and activities solely on the basis of disability.