

Functional Limitation Levels Applied to Services and Personnel

Level of functional limitation	Service goals	Services for which people at each level would become eligible	Personnel required
<p>Little or none (0 ADL, up to 1 IADL)</p>	<p>Health promotion, preventive care, maintaining vitality</p>	<p>No caregiver services required, health promotion/prevention</p>	<p>Health educators, physical trainers, therapists</p>
<p>Moderate (1 ADL or 2 or more IADLs)</p> <p>This category represents entry level functional limitations and requires assistance usually consistent with remaining in one's home.</p>	<p>Supportive services to aid persons in remaining in own homes. Train and support informal providers and buffer them with respite and contact services for a range of possible tasks.</p>	<ul style="list-style-type: none"> • Informal care – w/supports • Chronic disease management • Home- and community-based: <ul style="list-style-type: none"> –Day/night care* –Durable medical equipment* –Home health care* –Homemaker services* –Physical therapy –Occupational therapy –Medication assistance* –Speech therapy –Mental health services –Transportation services* –Nutritional services* –Personal care* –Respite care* <p>*Requires local providers</p>	<ul style="list-style-type: none"> • Family and friends • Trainers for informal caregivers • Facility staff – LPN/CNA • Home- and community-based staff <ul style="list-style-type: none"> –RN, LPN, CNA, PT, OT –Cleaning and chore assistance –PT, PT aides, tele-health –OT, OT aides, tele-health –Medication aide –Speech therapist –Psychologist, psychiatrist, psychiatric social worker –Van driver –Dietician, aide –Trained attendants –Trained respite providers or institutional site
<p>Moderately severe (2 ADLs)</p> <p>This level of care represents an increase in frailty. People with two ADL limitations are often candidates for assisted living or institutional care designed to provide care for people with moderate needs for assistance.</p>	<p>The goal for this level of care is to provide housekeeping and meals along with a modest level of oversight. People may contract for additional services from agencies providing home- and community-based services which are then provided in their assisted living apartment.</p>	<p>In addition to the above services individuals become eligible for:</p> <ul style="list-style-type: none"> • Congregate care • Basic care facilities • Assisted living 	<p>Institutional staff as required by state regulations.</p> <p>All of the home- and community-based staff in the above list may also apply at this level.</p>
<p>Severe (3 or more ADLs)</p> <p>With three or more ADL limitations, this level includes prime candidates for skilled nursing care. They represent care needs with relatively high levels of acuity.</p>	<p>Skilled nursing care is the most fully institutional and is reserved for those with medical needs at higher levels of acuity that may necessitate a level of care best met by access to 24 hour-a-day professional care.</p>	<p>In addition to the above services individuals become eligible for:</p> <ul style="list-style-type: none"> • Skilled nursing care 	<p>Institutional staff as required by state regulations.</p>
<p>End of life care (as special category)</p>	<p>End of life care occurs at all points on the above continuum of functioning, but is likely to be concentrated at the higher levels of limitation. At this point, palliative care is sought with a goal of optimizing physical and emotional comfort, but not providing curative care.</p>	<p>In addition to the above services individuals become eligible for:</p> <ul style="list-style-type: none"> • Hospice care 	<p>Hospice volunteers and coordinator.</p> <p>Educators for informal caregivers (family and friends).</p>