

The Rehabilitation Complexity Scale for Specialist Nursing Homes (RCS-SNH)

PATIENT IDENTIFICATION															
Name:		Hospital No:	Date of score:...../...../.....												
For each subscale, circle highest level applicable															
BASIC CARE AND SUPPORT NEEDS		RISK for safety													
or (Score highest of Care OR Risk)															
Describes the approximate level of intervention required for basic self-care or safety monitoring (risk) in walking wounded pts.															
C 0	Largely independent in basic care activities	R 0	No risk – maintains own safety, summons help if needed.												
C 1	Requires help from 1 person for <u>most</u> basic care needs	R 1	Low risk – standard precautions for safety monitoring												
C 2	Requires help from 2 people for <u>majority</u> basic care needs	R 2	Medium risk – additional safety measures eg alarms, tagging, or extra supervision some of the time.												
C 3	Requires help from >2 people for basic care needs OR Requires constant 1:1 monitoring	R 3	High risk – risk of wandering /absconding Requires continuous 1:1 supervision												
SKILLED NURSING NEEDS															
Describes the level of intervention required from qualified or highly skilled nursing home staff															
N 0	No needs for skilled nursing – needs can be met by trained care staff only														
N 1	Requires intervention from a qualified nurse (e.g. for monitoring, medication, dressings etc)														
N 2	Requires intervention from skilled nursing staff trained in complex disability management														
N 3	Requires highly specialist nursing care (e.g. for ventilator, behavioural management, end of life support etc)														
THERAPY NEEDS															
Describes the approximate level of input that is required from therapy disciplines															
Disciplines: State number of different therapy disciplines required to be <u>actively</u> involved in <u>treatment</u>															
TD 0	0 therapy disciplines	Tick therapy disciplines involved: <table border="0"> <tr> <td>Physio</td> <td>Psychology/Counselling</td> <td>Orthotics</td> </tr> <tr> <td>O/T</td> <td>Chiropody</td> <td>Prosthetics</td> </tr> <tr> <td>SLT</td> <td>Music/art therapy</td> <td>Rehab Engineer</td> </tr> <tr> <td>Dietetics</td> <td>Aromatherapy</td> <td>Other:</td> </tr> </table>		Physio	Psychology/Counselling	Orthotics	O/T	Chiropody	Prosthetics	SLT	Music/art therapy	Rehab Engineer	Dietetics	Aromatherapy	Other:
Physio	Psychology/Counselling			Orthotics											
O/T	Chiropody			Prosthetics											
SLT	Music/art therapy			Rehab Engineer											
Dietetics	Aromatherapy	Other:													
TD 1	1 disciplines only														
TD 2	2-3 disciplines														
TD 3	≥4 disciplines														
Intensity: State overall intensity of therapy intervention required															
TI 0	No therapy intervention required – any rehab needs met entirely by nursing/care staff or self-exercise programme														
TI 1	Low level – maintenance therapy (eg programme provided by care staff with therapist review every 6-8 wks)														
TI 2	Moderate – active goal-orientated therapy programme (delivered by care team, but with frequent therapist review eg every 1-2 weeks)														
TI 3	High level – intensive goal-orientated therapy programme - primarily delivered by therapists.														
MEDICAL NEEDS															
Describes the approximate level of medical care environment required for medical/surgical management															
M 0	No active medical intervention (Occasional review by GP when requested by care staff)														
M 1	Primary care monitoring / treatment – delivered through routine ward rounds by GP/nursing home doctor (eg requiring regular review for active monitoring of anticoagulation, BP or seizure control etc)														
M 2	Specialist medical or neuropsychiatric care (Requiring review, input or intervention from visiting specialist, in addition to GP monitoring)														
M 3	Acutely sick or potentially unstable medical condition - or intensive end-of-life support (Requiring intensive medical intervention/review, ie on a daily basis or almost every day)														
EQUIPMENT NEEDS															
Describes the requirements for personal equipment or special facilities															
E 0	None	Basic equipment Standard wheelchair Standard walking aids Off the shelf orthotics Low tech pressure relief Shared equipment eg suction, manual standing frame Other:	Specialist Special seating eg tilt-in-space with supports Bespoke orthotics High tech pressure relief Own suction etc Electric standing frame, tilt table etc FES /TNS machine Other:												
E 1	Basic equipment – off the shelf or shared equipment														
E 2	Specialist equipment														
E 3	Highly specialist customised personal equipment														
E 3	Highly specialist customised personal equipment		Highly specialist Ventilator Highly customised seating or other equipment Bespoke sleep system ECU Communication aid Other:												
TOTAL	[C: R:]	C/R:	N:	T (TD+TI):	M:	E:	Summed score: /18								

Further instructions for application - For each subscale, circle highest level applicable

BASIC CARE AND SUPPORT NEEDS					
Includes washing, dressing, hygiene, toileting, feeding and nutrition, maintaining safety etc.					
C 0	Largely independent. Manages basic self-care tasks largely by themselves. May have incidental help just to set up /complete	R 0	No risk – able to maintain safety and summon help appropriately as required.		
C 1	Help from 1 person for <u>most</u> basic care needs May have incidental help from a 2 nd person	R 1	Low risk – standard precautions for safety monitoring, eg intermittent checks		
C 2	Requires help from 2 people for <u>the majority</u> of their basic care needs	R 2	Medium risk – additional safety measures eg alarms, tagging, or extra supervision some of the time.		
C 3	Requires help from >2 people for basic care needs OR Requires constant 1:1 monitoring	R 3	High risk – risk of wandering /absconding Requires continuous 1:1 supervision		
SKILLED NURSING NEEDS					
Describes the level of skilled nursing intervention					
N 0	No needs for skilled nursing – needs can be met by trained care assistants only				
N 1	Requires intervention from a qualified nurse (e.g. medication, IM/SC injections, wound/stoma care, nursing obs, catheter care)				
N 2	Requires intervention from skilled nursing staff who are trained and experienced in complex disability management (eg for postural management programme, psychological support, tracheostomy management, enteral feeding, etc)				
N 3	Requires highly specialist nursing care e.g. for very complex needs such as <ul style="list-style-type: none"> • Management of challenging behaviour / psychosis / complex psychological needs • Highly complex postural, cognitive or communication needs • Vegetative or minimally responsive states, locked-in syndromes • Complex end-of-life support / palliative care • Management of complex tracheostomy/ventilator 				
THERAPY NEEDS					
Describes the a) number of different <u>therapy</u> disciplines required and b) intensity of treatment					
Includes individual or group based session runs by therapists, but <u>not</u> rehab input from nursing staff which is counted in N2.					
No of disciplines					
T 0	No formal <u>therapy</u> involvement – any rehab needs met entirely by nursing/care staff or self-exercise programme				
TD 1	1 discipline only	Each discipline must be actively involved (eg ≥ 1hr/ month)	Physio O/T SLT Dietetics	Psychology/Counselling Chiropody Music/art therapy Aromatherapy	Orthotics Prosthetics Rehab Engineer Other:
TD 2	2-3 disciplines				
TD 3	≥4 disciplines				
Intensity					
TI 0	No formal <u>therapy</u> involvement – any rehab needs met entirely by nursing/care staff or self-exercise programme				
TI 1	Low level – maintenance therapy (eg programme provided by care staff with therapist review every 6-8 wks) OR attends Group therapy only (eg weekly group run by therapist)				
TI 2	Moderate – active goal-orientated therapy programme (eg programme delivered by care staff but closely monitored by trained therapist(s) - with frequent review of staged goals (eg every 1-2 weeks) and adjustment of treatment approach in the light of progression).				
TI 3	High level – intensive therapy (eg active goal-orientated programme delivered primarily by therapists – eg hands on/face-to-face treatment by trained therapist(s) at least 2-3 times a week)				
Total	Total T score (TD + TI):				
MEDICAL NEEDS					
Describes the approximate level of medical care environment for medical/surgical management					
M 0	No active medical intervention (Occasional review by GP when requested by care staff)				
M 1	Primary care monitoring / treatment – eg delivered in the course of routine GP ward rounds (Eg Under regular review by GP for active monitoring – eg of anticoagulation, BP or seizure control etc)				
M 2	Specialist medical or neuropsychiatric care (Requiring review, input or intervention from visiting specialist in addition to GP monitoring) i.e. requires more complex investigations, or specialist medical advice				
M 3	Acutely sick or potentially unstable medical condition - or intensive end-of-life support (Requiring intensive medical intervention/review ie on a daily basis or almost every day)				
EQUIPMENT NEEDS					
Describes the requirements for personal equipment / special facilities etc standing frame, suction etc					
E 0	No needs for equipment				
E 1	Requires basic equipment (off the shelf or shared equipment/facilities)				
E 2	Requires specialist equipment (eg special seating, bespoke orthotics, high-tech pressure relief, own suction)				
E 3	Requires highly specialist customized personal equipment (eg electronic assistive technology (EAT) or highly customized equipment (eg Matrix seating, sleep system etc), ventilator)				

RCS-SNH Service Summary Sheet

(This form is designed to assist with routine RCS data collection in the course of a clinical meeting or ward round, for services wishing to collect cross sectional data.)

CENTRE DETAILS										
Name of centre										
No of neurodisability beds										
Type of service		Slow stream rehabilitation facility								
		Specialist nursing home: Level 1 or 2.....								
		General nursing home								
Sample of patients		All current in-patients Selected cross sectional sample								
REHABILITATION COMPLEXITY SCORES for current in-patients: Date..../..../....										
No	Patient ID	C or R Rate <i>only the highest</i>		N score	T score Rate <i>both</i>		M score	E score	Total Score	Weekly cost to Payer
		C	R		TD	TI				
1										
2										
3										
4										
5										
6										
7										
8										
9										
10										
11										
12										
13										
14										
15										
16										
17										
18										
19										
20										
21										
22										
23										
24										
25										
26										
27										
28										
29										
30										

Photocopy if necessary to include further patients.