

**Niagara Special Needs Resource Agencies
Level of Service Tool- Indicator Summary Sheet**

Name of Child : _____

Name of Centre (if applicable): _____

PERFORMANCE AREAS

	CHILD	DATE:				
1C	Physical Health/Medical Issues					
2C	Feeding					
3C	Social					
4C	Emotional					
5C	Behaviour					
6C	Play Skills					
7C	Attention					
8C	Cognitive Skills					
9C	Communication/Language					
10C	Fine-Motor					
11C	Gross-Motor					
12C	Self-Help (toileting, dressing, etc.)					
13C	Sleeping					
14C	Safety					
15C	Sensory Systems and Processing					
16C	Child Stressors					
	Total Child Score:					

	CHILD CARE CENTRE	DATE:				
1CC	Scheduling is consistent with child's abilities					
2CC	Curriculum is consistent with child's abilities					
3CC	System in place to monitor goal achievement					
4CC	Team functioning					
5CC	Communication within classroom team (incl. supervisor)					
6CC	Staff knowledge					
7CC	Environment					
8CC	Safety					
9CC	Centre Stressors					
	Total Centre Score:					
	+ Child Score					
	=Total Score:					

	FAMILY	DATE:				
	Total Negative Responses					

Recommended Visit/Unit Range per month	DATE:				
Recommended Total Hours of service range per month					
Recommended Direct Contact Hours range per month					
Recommended Family Contact Hours per month					

Instructions for Calculating Visits/Hours of Service

Note: Each Child will be allocated an initial 3 visits/units of service until the level of service tool can be completed and actual units of service calculated

1. Level of Service tool is to be used for all children who are determined to be eligible for RT/C supports. This includes children receiving in-home service and half day JK-SK school/child care.
2. Complete Child and Centre (if applicable) Level of Service tools.
3. Transfer scores to Indicator Summary Sheet.
4. Based on score, calculate visit/unit range, total hours of service range and direct contact hour range as per following chart:

Service Hours Recommended:

Total Score	Visits/Units of Service per month *		Total Hours of Service per month		Direct Contact Hours with Child/Family per month	
	(1 visit/unit equals 3 Hours)		(includes travel and documentation)			
	Min	Max	Min	Max	Min	Max
0 - 9	1	3	3	9	1.5	4.5
10 - 19	3	5	9	15	4.5	7.5
20 - 32	5	7	15	21	7.5	10.5
33 - 50	7	10	21	27	10.5	13.5

*One unit of service is considered one visit. For each visit staff are allotted 3 hours This 3 hours includes: travel to and from the visit, direct contact with the child or family, documentation, follow up phone calls etc.

5. Complete Family Indicator Checklist , determine Family Contact Hours per month based on following:

Number of Negative (No) Responses	Family Contact Hours
0 - 5	1 Hour of Contact with Family per month
6 - 10	2 Hours of Contact with Family per month
11 - 16	3 Hours of Contact with Family per month

6. Transfer Visit Range to Service Agreement Form

General Guidelines for Determining Specific Number of Visits/Hours:

Ranges of service have been provided to allow for flexibility and changing circumstances with children, centres and families. In determining the specific number of visits/ hours of service a child/family/centre may receive please consider the following:

1. Total Child/Centre Scores

Scores at lower end of range (ie 0-3; 10-13; 20-25; 33-40): Calculate Visits/Hours at minimum amounts

Scores in middle range (4-6; 14-16; 25-28; 41-45): Calculate Visits/Hours at mid amounts

Scores at upper end of range (7-9; 17-19; 29-32; 46-50): Calculate Visits/hours at maximum amounts

2. Family Contact Hours are not to be added to total Direct Contact Hours per month but will generally be factored into the total number of contact hours within a specific range. The exception would be for children where child/centre total scores are at upper end of range and family contact hours are also at higher level.

Example:

Child A – Child/Centre Scores scores are 14-16 (mid range of 3-5 visit/units per month: 4.5-7.5 hours of direct contact per month). Family score indicates 1 hour of family contact. Child would be allocated 4 visits per month and 6 hours of Direct Contact with one hour of that being with the Family.

Child B – Child/Centre scores are 19 (high end of 3-5 visits/units; 4.5-7.5 hours of contact) Family score indicates 2 hours of contact. Child would be allocated 5 visits per month, 7.5 hours of contact and an additional 2 hours of contact would be allocated for the family.