

Referral Process

Our Children and Clinical Staff

Almost Home Kids (AHK) provides individualized 24/7 Registered Nursing care to children ages 0-21, with complex medical needs. Our medical directors direct the care of our children in collaboration with the child's primary care physician and specialists. Our experienced Registered Nurses are certified in Pediatric Advanced Life Support, ventilator care and cardiopulmonary resuscitation. Staffing ratios are 3 children to 1 RN. Support staffing is provided by nurse's aides who are state certified and current in cardiopulmonary resuscitation.

Transitional Care Program: Admission from an acute care setting for an extended period of time based on individual needs.

Children, who are clinically stable, are discharged from an acute care facility to AHK with their medical plan of care and home care equipment. Our RN's will reinforce training that was implemented in the hospital and will continue to build upon the training based on the changing needs of the child and the educational needs of the guardians. Two identified caregivers will be trained to independently care for their child before discharge to home can occur.

Caregivers are expected to participate in the care of their child from admission through discharge. Following completion of training, both guardians will be responsible for the complete care of their child for 48 hours under nursing supervision prior to the child's discharge to home.

Caregivers learn to manage their child's medical care, pharmaceuticals, equipment and supplies. Guardians become competent in the management of the home ventilator, apnea monitors, pulse oximetry, tracheostomy tubes, gastrostomy tubes, PICC lines, medication administration, troubleshooting alarms, ordering of equipment as well as many other aspects of their child's care.

Please contact Layenie Anderson with any questions regarding the referral process: landerson@almosthomekids.org or call 630.271.9155 option 2 to talk to a Case Manager.

Since opening in 1999, the *Almost Home Kids'* 12-bed facilities in Naperville and Chicago, Illinois have served more than 2,250 children who are medically complex and/or technology assisted and their parents/caregivers.

Care is delivered by a team of round-the-clock medical experts specialized in the pediatric care of children who are medically complex. Our pediatric medical director performs rounds twice a week and meets with families to discuss their children's care weekly.

AHK is affiliated with Ann & Robert H. Lurie Children's Hospital of Chicago and receives referrals from over 30 hospitals.



Aiden, 7 months old, arrived from Lurie Children's Hospital for Transition Care. Mom learned his care at AHK and is delighted to have him home. AHK is now a safety net in the continuum of care for Aiden.

Referral Process (continued)

We also help the guardians navigate unfamiliar systems such as transportation systems for follow up appointments, early intervention, public school system, medical equipment companies, public aid, insurance companies, pharmaceuticals, and home nursing agencies.

Respite Care Program: Admission from home for an identified period of time, usually overnight to 2 weeks. Admissions are individualized based on bed availability, funding, and family circumstance. Many families take the opportunity during their child's respite stay to focus on their personal health or the health of a family member, spend focused time with other children or their spouse or to just catch up on much needed sleep.

Transportation Program: AHK will provide round trip transportation from home to our center for children admitted for respite care. A registered nurse will travel to the home to assess and admit the child, review the plan of care with the guardian, ensure that all the medications are current, and that all equipment is functional. Upon discharge the nurse will accompany the child home and give a thorough report to the caregiver.

Examples of admission criteria:

- Children, under age 22, may have special health care needs that require private duty nursing care or continuous medical monitoring.
- Children must be clinically stable and ready for discharge from hospital to home but home or caregivers are not able to receive the child.
- Respiratory support needs such as frequent suctioning, tracheostomy tube, or ventilator.
- Nutritional support needs such as gastrostomy tube feedings or hyperalimentation.
- Administration of antibiotics via PICC line or port-a-cath.
- Other medical issues that may cause safety concerns if the child is unattended.
- Parents/caregivers are in need of additional education, training and clinical support.
- Home nursing is not available.
- Home modifications are necessary before the child can safely return.
- Caregiver may have personal or emergency health care needs.
- Social circumstances may prevent the discharge to home



Marques, 5 years old, came from Lurie Children's Hospital for Transition Care in 2013. He will come back for Respite Care in the near future.



Christopher, 17 years old. Since 2008 he has received periodic respite care.

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