

## Constant Visual Observation Needs Assessment (CVONA)

Center Number: \_\_\_\_\_ Subject Number: \_\_\_\_\_

Rater Initials: \_\_\_\_\_ Date: \_\_\_\_\_ Time: \_\_\_\_\_

**Scoring:**

**1 = absent:** the behavior is not present

**2 = present to a slight degree:** the behavior is present but does not prevent the conduct of other, contextually appropriate behavior. (The individual may redirect spontaneously, or the continuation of the agitated/unsafe behavior does not disrupt appropriate behavior.)

**3 = present to a moderate degree:** the individual needs to be redirected from an agitated/unsafe behavior to an appropriate behavior, but benefits from such cueing.

**4 = present to an extreme degree:** the individual is not able to engage in appropriate/safe behavior even when external cueing or redirection is provided.

**CIRCLE SCORE. DO NOT LEAVE BLANKS** (Note: Bold = 14 ABS items)

<b>Physical</b>				
<b>Pulling at tubes, restraints, etc.</b>	1	2	3	4
<b>Rocking, rubbing, moaning or other self stimulating behavior</b>	1	2	3	4
<b>Self-abusiveness, physical and/or verbal</b>	1	2	3	4
<b>Wandering from treatment areas</b>	1	2	3	4
<b>Restlessness, pacing, excessive movement</b>	1	2	3	4
Poor/unpredictable balance	1	2	3	4
History of falls < 30 days. (1 if no known history /4 if <u>any</u> falls within last 30 days)	1	2	3	4
History of elopement	1	2	3	4
Dizziness	1	2	3	4
Incontinence	1	2	3	4
Inability to toilet self	1	2	3	4
<b>Cognitive/Communication</b>				
<b>Short attention span, easily distractible, inability to concentrate</b>	1	2	3	4
<b>Rapid, loud, or excessive talking</b>	1	2	3	4
Confused, disoriented	1	2	3	4
Delusional and/or hallucinating	1	2	3	4
Poor or no short term memory	1	2	3	4
Lack of awareness of deficits	1	2	3	4
No or inconsistent ability to use call light to summon help	1	2	3	4
Perseveration	1	2	3	4
Confabulation	1	2	3	4
Aphasia, inability to express needs	1	2	3	4
<b>Behavioral/Emotional</b>				
<b>Impulsive, impatient, low tolerance for pain or frustration</b>	1	2	3	4
<b>Sudden changes of mood</b>	1	2	3	4
<b>Uncooperative, resistant to care, demanding</b>	1	2	3	4
<b>Repetitive behaviors, motor and/or verbal</b>	1	2	3	4
<b>Easily initiated or excessive crying and/or laughter</b>	1	2	3	4
<b>Explosive and/or unpredictable anger</b>	1	2	3	4
<b>Violent and/or threatening toward people or property</b>	1	2	3	4
History of aggression	1	2	3	4

Center Number: \_\_\_\_\_ Subject Number: \_\_\_\_\_

Rater Initials: \_\_\_\_\_ Date: \_\_\_\_\_ Time: \_\_\_\_\_

## SUPERVISION RATING SCALE (SRS)

### Independent

01=Alone, Independent

02=Unsupervised at night, sometimes during day

--	--

### Overnight supervision

03=Supervised only at night

### Part Time supervision

04=Supervised at night and selected day times.

05=Supervised at night and part-time during day; not supervised during working hours (full time)

06=Supervised at night and most of day except for few unsupervised hours.

07=Only unsupervised for periods less than one hour at a time.

### Full-time indirect supervision

08=Full time indirect supervision; does not check more than once every 30 minutes

09=Same as 08, and requires overnight safety precautions (lock, etc.)

### Full time direct supervision

10=Full time direct supervision; checked more than once every thirty minutes

11=Full time direct supervision in confined, controlled setting.

12=Same as 11, but with constant visual watch

13=Person is in physical restraints.

--	--

## LEVEL of RISK (LoR)

**I -No known safety risk** (no need for CVO, standard nursing staffing assignment)

**II -Slight safety risk** (no need for CVO, use interventions such as bed and chair alarms, specialized beds, frequent room checks, Secure Care/Wanderguard system)

**III -High safety risk** (probable need for CVO, daily interdisciplinary team review of need for CVO, implement Level II safety measures, consider use of more restrictive measures including approved restraints)

**IV-Extreme safety risk** (definite need for CVO; daily interdisciplinary team review of ongoing need for CVO, implement Level II safety measures, consider use of more restrictive measures including approved restraints)