

CERTIFIED HEALTH PROFESSIONAL LIFE CARE PLANNER

Handbook for Candidates



PROFESSIONAL TESTING CORPORATION® 1350 BROADWAY • SUITE 800 • NEW YORK, NY 10018

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This handbook, though subject to change from time to time, contains essential information regarding current pathways and processes for obtaining the Certified Health Professional Life Care Planner (CHLCP™) Certification. Candidates are responsible for reading and following the instructions contained herein.

This handbook outlines important information regarding the application process for the Certified Health Professional Life Care Planner Portfolio Examination.

Certification through Portfolio Examination is designed to objectively assess the Candidate's ability to apply their specialized knowledge, understanding, and expertise in professional practice through review of an industry relevant case scenario and arrival at supportable recommendations and a credible report.

Candidates seeking initial certification must meet all eligibility requirements, submit a completed portfolio, and pay all applicable fees. All applications for certification will be audited by the Universal Life Care Planner Certification Board Application Committee, consisting of the Certification Board Chairperson, Certification Board Co-Chairperson, and the Certification Board Secretary, to determine that all required supporting documentation has been submitted. The Candidate will be notified and have an opportunity to submit any missing eligibility documentation within a specifically-determined timeframe.

Completed Portfolio Examinations will be reviewed and scored by specialty-trained appraisers utilizing psychometrically sound principles determined by Professional Testing Corporation (PTC). The appraisers identify and document specific evidence in the portfolio that adheres to relevant criteria elements listed in the Content Outline.

Successful Candidates will be awarded the Certified Health Professional Life Care Planner (CHLCP™) credential. CHLCP™ certification through Portfolio Examination is valid for a period of five (5) years and must then be renewed.

The policies and procedures adopted by the Universal Life Care Planner Certification Board to construct and review items and examination forms for the CHLCP™ portfolio assessment process are consistent with guidelines recommended by the American Educational Research Association, the American Psychological Association, and the National Council on Measurement in Education (AERA, APA, NCME; 2014), as well as other industry standards including: Standards for the Accreditation of Certification Programs (National Commission for Certifying Agencies, 2014) and Conformity assessment – General requirements for bodies operating certification of persons (ISO/IEC 17024).

It is the policy of the Universal Life Care Planner Certification Board Members and Staff to comply with all applicable laws that prohibit discrimination in employment or service provision. No individual shall be excluded from the opportunity to participate in the CHLCP™ program on the basis of age, sex, race, color, religion, national origin, ethnicity, disability, marital status, sexual orientation, gender identity, or any other protected characteristic. All publicly available materials, including the CHLCP™ Certification by Portfolio Examination and the Handbook for Candidates, are reviewed for bias and sensitivity.

CERTIFICATION

Entry-level certification in life care planning demonstrates achievement of a basic level of knowledge within this specialized area of practice.

The Universal Life Care Planner Certification Board endorses voluntary certification for all life care planners who meet the eligibility requirements.

PURPOSE OF CERTIFICATION

Certification in life care planning provides:

1. Formal recognition and authorization to utilize the CHLCP™ credential for those individuals who have met the eligibility requirements determined by the Universal Life Care Planner Certification Board and passed the Portfolio Examination for life care planners.
2. Criteria for continued personal and professional growth in the practice of life care planning through certification maintenance requirements.
3. Assurance to employers, the public, and members of the healthcare professions of the individual's basic requisite level of knowledge in the specialty of life care planning.

ADMINISTRATION

The Certification Program is sponsored by the Universal Life Care Planner Certification Board. The certification examination process for life care planners is administered by the Universal Life Care Planner Certification Board in conjunction with a testing entity, currently, Professional Testing Corporation (PTC), located at 1350 Broadway, Suite 800, New York, New York, 10018, (212) 356-0660, www.ptcny.com.

Questions concerning the examination process should be referred to Professional Testing Corporation.



CERTIFICATION PORTFOLIO EXAMINATION

ELIGIBILITY REQUIREMENTS

Candidates must meet the following eligibility criteria at the time of application:

1. **Licensure:**

Proof of current, active, and unrestricted licensure in healthcare (or a health and human services discipline) or its equivalent in other countries, for a minimum of the prior two (2) years immediately preceding application. The scope of the license (e.g., medical/osteopathic doctor, registered nurse/nurse practitioner, chiropractor, physical therapist, occupational therapist, speech therapist, psychologist, neuropsychologist, licensed social worker) must allow independent Patient/Client assessment.

2. **Experience:**

Verification of a minimum of two (2) years/four thousand (4,000) hours paid or billable professional healthcare experience that requires licensure and involves determination of Patient/Client needs within the five (5) years immediately preceding application.

3. **Education/Skills:**

OPTION 1

Completion of one hundred twenty (**120**) *continuing education units** relating to life care planning, or in *equivalent areas* (see the Content Outline on page 12) that can be applied to the development of life care plans or pertain to the *service delivery* applicable to life care planning within the five (5) years immediately preceding application.

** There must be a minimum of ten (10) hours specific to a basic orientation, methodology, and standards of practice relevant to life care planning process/principles contained within the continuing education curriculum.*

OPTION 2

Verification* of **two (2) years/four thousand (4000) hours paid or billable life care planning experience** that incorporates the life care planning process and skill set inherent to the assessment and determination of treatment needs and their respective costs, across the continuum of care, within the past five (5) years immediately preceding the application.

**Verification of experience must be authenticated by an employer or a minimum of two referral sources. Candidate may upload the completed verification form to the online application.*

Checklist for CHLCP™ Initial Certification Application by Portfolio submission:

- A completed Application for the CHLCP™ Portfolio Examination.
- A copy of a current, unrestricted professional license or computer-generated document from the Candidate's State licensing board demonstrating active **unrestricted** licensure.
- The Candidate's resume or curriculum vitae.

- Proof of completion of 120 continuing education units* relating to life care planning or in equivalent areas that can be applied to the development of a life care plan, or pertain to the service delivery applicable to life care planning, within the five (5) years immediately preceding application, **OR** verification indicative of two (2) years full time, paid, professional work experience in the field of life care planning or a variant thereof, as described above in Option 2.
- Full payment of the current required fee(s).

It should be noted that if ambiguity exists in terms of pathway interpretation/qualification, a final decision will be made by the Universal Life Care Planner Certification Board Application Committee, consisting of the Certification Board Chairperson, Certification Board Co-Chairperson, and the Certification Board Secretary.

PLEASE NOTE: Regarding Portfolio Examination Preparation Products

1. The Universal Life Care Planner Certification Board does not offer a practice test for the CHLCP™ certification Portfolio Examination, nor is it necessary in order to be eligible to submit a portfolio.
2. The use of practice examinations and/or examination preparation materials does not imply successful performance on the CHLCP™ Portfolio Examination.
3. The Universal Life Care Planner Certification Board has no association with vendors of examination preparation products and does not endorse those products. Any claims to knowledge of the CHLCP™ examination contents are false. A vendor's use of the Certified Health Professional Life Care Planner Certification Board's mark (CHLCP™) does not indicate Certification Board endorsement of its products.
4. The use of practice examinations and/or examination preparation materials does not provide an advantage over candidates who do not choose to use them.
5. The use of practice examinations and/or examination preparation materials is not the only or preferred route to adequate preparation for the CHLCP™ certification Portfolio Examination.

ATTAINMENT OF CERTIFICATION AND RECERTIFICATION

CRITERIA

Candidates who pass the Certified Health Professional Life Care Planner Portfolio Examination are eligible to use the designation CHLCP™ after their names. They will receive emailed certificates from the testing entity on behalf of the Universal Life Care Planner Certification Board. A registry of Certified Health Professional Life Care Planners will be maintained by the Universal Life Care Planner Certification Board and may be reported in its publications.

The Certified Health Professional Life Care Planner (CHLCP™) certification is recognized for a period of five (5) years, at which time the Candidate must resubmit and pass the current Certified Health Professional Life Care Planner Portfolio Examination or meet the requirements* in effect at the time in order to retain certification.

**See the Educational Requirements section below for further details.*

Applications for Recertification, along with appropriate documentation supporting the completion of the Universal Life Care Planner Certification Board recertification criteria, must be submitted in accordance with the following:

1. Completed application and recertification fees must be received no later than the first day of the month immediately preceding the expiration date on the certificate.
2. Continuing education credits must be verified by inclusion of a provider certificate of course completion that includes the: name and provider number of the course presenter, course title, course description, date, location, and number of course hours.
3. Candidate must have maintained unrestricted active professional licensure, throughout the certification period of five years.
4. Candidates are responsible for maintenance of their own continuing education file, including Certificates of Attendance/Course Completion and all documentation of continuing education units or points of credit for five (5) years from the date of their certification/recertification.

EDUCATION REQUIREMENTS

A total of 60 points of credit are needed every five (5) years for renewal. The Universal Life Care Planner Certification Board *points of credit* renewal system is designed to encourage professional development. The system affords the CHLCP™ the latitude to select from a variety of educational activities that meet both professional and personal needs as described in the following categories:

Category 1: Continuing Education Hours: One hour (60 minutes) of approved professional continuing education pertaining to life care planning = 1 contact hour. Examples of courses that would be approved

include, but are not limited to: Life care planning relevant to SCI, TBI, amputations, burns, chronic pain, case management, nursing process, etc. Questions regarding applicability of a particular course can be determined through submission of course outlines to the Universal Life Care Planner Certification Board for review/approval of contact hours 90 days prior to the application renewal deadline.

Category 2: Academic Credit: Verification of twelve (12) academic semester credits of professional coursework related to life care planning. Course semester outlines should be submitted to the Universal Life Care Planner Certification Board for review/approval of points of credit 90 days prior to the renewal deadline.

Category 3: Presentations: Five (5) points of credit for a maximum of ten (10) within the five (5) year renewal period for each presentation, for which national or state approved continuing education units have been granted to participants. Presentation outlines should be submitted to the Universal Life Care Planner Certification Board for review/approval of points of credit 90 days prior to the application for renewal deadline.

Category 4: Publications or Research: Publications or research related to life care planning should be submitted to the Universal Life Care Planner Certification Board for review/approval of points of credit 90 days prior to the application for renewal deadline.

- **Publications:**

Five (5) Points of Credit will be awarded for one article published in a peer-reviewed journal related to life care planning. Certificant must be the author, or co-author.

Ten (10) Points of Credit will be awarded for one chapter published in a peer-reviewed book related to life care planning. Certificant must be the author, co-author, editor, co-editor, or reviewer.

- **Research:** Forty (40) Points of Credit will be awarded for an institutional review board (IRB) research project, a completed dissertation, thesis, or graduate-level scholarly project related to life care planning completed during the five (5) year certification period, for which the certificant is clearly identified as one of the primary researchers/authors.

Category 5: Participation on a professional Board/Committee or the Universal Life Care Planner Certification Board: Ten (10) points of credit per year will be granted, up to a maximum of 20 points within the five (5) year renewal period. Additional points of credit may be granted, by and at the discretion of the Universal Life Care Planner Certification Board, for non-board member participation on specialty Universal Life Care Planner Certification Board committees (e.g., role delineation survey, portfolio appraisers, certification standard setting). Documentation, with proof of participation,* should be submitted to the Universal Life Care Planner Certification Board for review/approval of point of credit 90 days prior to the application renewal deadline.

*Participation is defined as 85% involvement on/in the various activities indicated.

REVOCATION OF CERTIFICATION

Certification may be revoked by the Universal Life Care Planner Certification Board for any of the following reasons:

1. Falsification of an Application.
2. Failure to maintain an active, unrestricted professional license throughout the five-year certification period.
3. Revocation of professional license.
4. Misrepresentation of certification status.
5. Failure to apply for recertification within current Universal Life Care Planner Certification Board guidelines.

The Universal Life Care Planner Certification Board Appeals Committee provides the appeal mechanism for challenging revocation of Board certification. It is the responsibility of the individual to initiate any appeal process.

APPEALS

A. Eligibility Appeals

The appeal must be made in writing, via certified letter/US Postal Service, fax, or email correspondence, to the Universal Life Care Planner Certification Board within 30 days of notification of ineligibility. The appeal should include a written explanation for describing the grounds for the appeal, as well as any supporting documentation related to the appeal.

The Universal Life Care Planner Certification Board will respond, in writing, within 60 days of receipt of the appeal in one of the following formats: US Postal Service, fax, or email correspondence. The response will include a contact name and number for a member of the Universal Life Care Planner Certification Board.

Information regarding the submission of appeals can be found on the Universal Life Care Planner Certification Board's website www.ulpcb.org.

Decisions rendered by the Universal Life Care Planner Certification Board regarding an appeal are considered final.

B. Portfolio Examination Appeals

Candidates with reason to believe that a discrepancy exists in the scoring and/or reporting of their Portfolio Examination results may appeal within 30 days of notification of their scores via certified letter/US Postal

Service, fax, or email correspondence to the Universal Life Care Planner Certification Board. The letter must contain supporting documentation relevant to the appeal.

The Universal Life Care Planner Certification Board will respond via certified letter/US Postal Service, fax, or email correspondence within 60 days of receipt of the appeal request.

Decisions rendered by the Universal Life Care Planner Certification Board regarding an appeal are considered final.

MISREPRESENTATION AND NONCOMPLIANCE POLICY

The Universal Life Care Planner Certification Board will investigate all reported allegations concerning misconduct by Certified Health Professional Life Care Planners or Candidates applying for certification. Reports of alleged misconduct must be in writing, signed, and sent by certified mail to the Universal Life Planner Certification Board within 120 days of the alleged violation(s). Documentation relevant to the matter must accompany the complaint.

Complaints can include, but are not limited to:

1. Ineligibility for certification.
2. Irregularity in respect to the certification examination.
3. Material misrepresentation and/or fraud related to any statement to the Universal Life Care Planner Certification Board or to the public, including but not limited to, statements made to assist the Candidate or others applying for certification; gross or repeated negligence in one's professional work; the conviction of plea of guilty or plea of no contest to a felony or misdemeanor that is directly related to the practice of life care planning.
4. Failure to adhere to the eligibility requirements for certification candidacy or continuing certification requirements.

Universal Life Care Planner Certification Board Contact Address:

Jan Roughan, BSN, RN, PHN, CRRN/ABNS, CNLCP®, CHLCP™, CCM
Universal Life Care Planner Certification Board Chairperson
465 No. Halstead St.
Pasadena, CA 91107

Telephone: (626) 351-0991
Fax: (626) 351-0992
Email: janr@linc.biz

COMPLETION OF APPLICATION

Read and follow the directions on the application and in this handbook. All applications must be completed online. Candidates must complete the application in full, using their legal name. The completed application, with all supporting documentation, must be submitted to and paid for online at www.ptcny.com/test-sponsors/chlcp.

Payment is due at the time of application. Applications will be reviewed for eligibility once payment is received. Candidates found to be ineligible will receive a refund of their examination fee minus a \$75.00 processing fee.

EXAMINATION ADMINISTRATION

The Certification Portfolio Examination for life care planners is administered by the Universal Life Care Planner Certification Board and reviewed and scored by trained appraisers. Scoring is based on psychometrically sound principles determined by Professional Testing Corporation.

You will receive email confirmation from the Universal Life Care Planner Certification Board Secretary regarding your eligibility status within 14 business days after your application has been received, reviewed, and processed. Candidates who qualify will be provided a non-disclosure form which must be signed and returned to the Universal Life Care Planner Certification Board Secretary prior to receiving testing documents.

Upon receipt of a signed non-disclosure form, the Universal Life Care Planner Certification Board Secretary will provide you with the templates and documents needed to complete your Portfolio Examination. You will have 30 days from date of receipt to complete your portfolio.

FAILURE TO SUBMIT COMPLETE PORTFOLIO

If you fail to submit your completed portfolio within 30 days, all fees will be forfeited. Forfeiture does not preclude and applicant from restarting the application process.

Please add notices@ptcny.com and shirley@daugherty-legalnurse.com to your contacts or safe email lists to ensure emails from the Universal Life Care Planner Certification Board do not go to your junk/spam mail folder.

TESTING ACCOMMODATIONS

Test accommodations may be made upon receipt of the application, examination fee, and a completed and signed Request for Test Accommodations Form, available from www.ptcny.com or by calling PTC at (212) 356-0660. The information you provide and any documentation regarding your disability and special test accommodations (e.g., need for additional time) will be held in strict confidence.

Only those requests made and received on the official Request for Testing Accommodations Form will be reviewed. Letters from doctors and other healthcare professionals must be accompanied by the official Form and will not be accepted without the Form. All requests must be made at the time of application.

FEES

APPLICATION FEES FOR THE CERTIFIED HEATH PROFESSIONAL LIFE CARE PLANNER PORTFOLIO EXAMINATION

Portfolio Examination, Initial Certification:	\$395.00
Retesting Fee	\$230.00

Visa, MasterCard and American Express are accepted.

Examination fees include a non-refundable \$75 administrative fee.

RECERTIFICATION FEES DUE AT TIME OF CHLCP™ RECERTIFICATION

CHLCP™ Recertification by Points	\$395.00
CHLCP™ Recertification by Portfolio Examination	\$395.00
CHLCP™ Portfolio Examination Re-testing	\$230.00

Late Recertification (Late Fee \$200 within 30 days of expiration):	\$595.00
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**** If the recertification application is delinquent and received beyond 30 days of the expiration date, the Candidate is no longer eligible to use the designation of CHLCP™ and, as such, must submit to re-testing at the full examination fee of \$395.00.***

*** Cash payments are not accepted.**

REFUNDS

- **There will be no refund of any fees unless applicants are ineligible for the Portfolio Examination.**
- **Ineligible candidates will be refunded their fees minus an administrative fee of \$75.00.**
- **Refunds will be processed within 30 days after notification of ineligibility.**
- **If you fail to submit your completed portfolio within 30 days of receipt, all fees will be forfeited.**

REPORT OF RESULTS

Candidates will be notified regarding their Portfolio Examination results by Professional Testing Corporation, via email, in approximately 6-8 weeks of submitting the Portfolio Examination. Performance on the major areas of the examination and on the total examination will be reported to the Candidate and the Universal Life Care Planner Certification Board. Successful Candidates will receive certificates from PTC on behalf of the Universal Life Care Planner Certification Board. Certificates will be emailed at the end of the month the successful Candidate was notified of their exam result.

RE-EXAMINATION

The Certification Portfolio Examination for life care planners may be repeated **a total of** two times. Candidates must wait two months before re-testing (e.g., a Candidate may retest in March if the original testing date was in January, etc.).

The Candidate must submit a new Application along with the re-testing fee of \$210.00.

Prior to eligibility for resubmission of an application to take the Portfolio Exam, the Candidate will be required to take and pass a formal life care planning course from a Board-approved Life Care Planning program if unsuccessful with achievement of a passing score after two additional examination attempts.

CONFIDENTIALITY

1. The Universal Life Care Planner Certification Board will release the individual test scores to the Candidate only.
2. Any questions concerning test results should be referred to the Professional Testing Corporation. Upon request from individuals and/or the public, the Universal Life Care Planner Certification Board will verify the initial certification of a Candidate, as well as the date of renewal. Verification can also be obtained via the website.
3. Upon written request, any disciplinary action will be disclosed if a suspension and/or revocation of the CHLCP™ designation has been imposed.

PREPARING FOR THE PORTFOLIO EXAMINATION

1. This Handbook provides the Content Outline for the CHLCP™ Portfolio Examination (see Appendix). It is recommended that the Candidate review the Content Outline to assist in their preparation for the Portfolio Examination.

CONTENT OF PORTFOLIO EXAMINATION

Certification through Portfolio Examination is designed to assess the Candidates specialized knowledge, understanding, and expertise in professional practice through application of the Life Care Planning Process to an industry relevant case scenario.

1. The Candidate must provide supporting documents confirming they satisfy eligibility requirements.
2. The Candidate's portfolio must demonstrate:
 - a. Consideration and consolidation of the case scenario details/datapoints provided.
 - b. Formulation of underpinning assumptions as to the impact of the illness/injury and the likely treatment trajectory appropriate to the case scenario as evidenced by the items in the Life Care Plan constructed.
 - c. Evidence of the methodology/process used in determining appropriate items/long term treatment needs (i.e., arriving at conclusions) including consultation with treating providers, experts, clinical practice guidelines, etc.
 - d. Determination of the appropriate services and supplies that will facilitate optimization of the individual's outcome, all while minimizing complications and/or comorbidities.
 - e. Identification of the resources utilized to support accurate coding/costing for the needs depicted within the life care plan.
3. The content for the assessment is described in the Content Outline section of this Handbook located on page 12.
4. The rubric developed for the assessment was created by individuals with expertise in life care planning and was reviewed for accuracy and appropriateness by the Universal Life Care Planner Certification Board in conjunction with Professional Testing Corporation.
5. The Universal Life Care Planner Certification Board, with the advice and assistance of the Professional Testing Corporation, prepares the Portfolio Examination.
6. Only complete Portfolio Examinations of Candidates will be reviewed and scored by specialty-trained appraisers. A minimum of three appraisers will identify and document specific evidence in the portfolio that adheres to relevant criteria elements listed in the Content Outline. Scoring of the portfolio examination is based upon psychometrically sound principles determined by Professional Testing Corporation.

AREAS OF KNOWLEDGE (See Content Outline)

1. LIFE CARE PLANNING PROCESS
2. INJURY/ILLNESS PROCESSES
3. LIFE CARE PLAN CONSTRUCTION
4. CODING/COST RESEARCH

AREAS OF ASSESSMENT/DOMAINS (See Content Outline)

1. LIFE CARE PLAN CONSTRUCTION
2. CODING/COST RESEARCH

CONTENT OUTLINE**I. LIFE CARE PLANNING PROCESS****A. Methodology/Process**

- a. Review Medical Records/Patient Profile (provided in case scenario)
- b. Assessment (provided in case scenario)
- c. Collateral Interviews (pre/post-morbid function, provided in case scenario)
- d. Diagnosis (according to licensure and/or as per medical summary provided in case scenario)
- e. Review Reports/Depositions
- f. Consult/Collaborate with specialists (provided in case scenario)
- g. Plan Construction (consolidation of opinions/cost analysis-geographic specific-partially provided in case scenario)

II. INJURY/ILLNESS PROCESSES

Portfolio Examination case scenario will address a patient with one of the following medical diagnoses:

- A. SPINAL CORD INJURIES
- B. BURNS AND AMPUTATIONS
- C. BRAIN INJURIES
- D. NEONATAL AND PEDIATRIC INJURIES/ILLNESSES
- E. CHRONIC PAIN

In order to synthesize the information provided in the case scenario and develop a credible life care plan, Candidates need to have a sound understanding of the following for all medical diagnoses noted above:

1. Pathophysiology
2. Common signs/symptoms/functional limitations

3. Actual/potential complications
4. Treatment/Management (e.g., evaluations, testing, therapies, procedures [invasive and non-invasive], medications, injections/blocks, etc.)
5. Psychosocial Aspects (e.g., patient/evaluatee, family)

1. SPINAL CORD INJURIES

A. Anatomy and Physiology

1. Cervical Level
2. Thoracic Level
3. Lumbar and Sacral Levels
4. Clinical Syndromes (i.e., Cauda Equina, Central Cord, Brown-Sequard, Anterior Cord, Conus Medullaris)

B. Neurological and Functional Classifications

1. ASIA Impairment Scale
2. FIM-FAM Scale
3. Other

C. Functional Losses and Associated Needs

1. Medical Care
 - a. Evaluations
 - b. Therapy
 - c. Home Health Services
 - d. Bowel and Bladder
 - e. Sexuality Issues
 - f. Potential Complications
2. Living Environment
 - a. Adaptive Equipment
 - b. Community Reintegration
 1. Mobility and Transportation
 2. Housing
 3. Vocational Adjustments
 4. Community Resources

D. Psychosocial Aspects

1. Client
2. Family
3. Other Supportive Systems

2. BURNS AND AMPUTATIONS

A. Wounds

1. Depth and Size
2. Cellular and Vascular Responses

- 3. Healing
- 4. Treatment and Therapies
 - a. Grafting
 - b. Pressure Garments
 - c. Splinting
 - d. Prostheses
 - e. Specialized Therapies
- B. Equipment and Medical Supplies
- C. Complications
 - 1. Surgical
 - 2. Soft Tissue and Bone Injury
 - 3. Infection
 - 4. Neurologic
 - 5. Other
- D. Psychosocial Aspects
 - 1. Client
 - 2. Family
 - 3. Other Supportive Systems
- E. Anatomy and Physiology

3. BRAIN INJURIES

- A. Pathophysiology
 - 1. Primary Injury
 - 2. Secondary Injury
 - 3. Complications
- B. Measures of Injury Severity
 - 1. Glasgow Coma Scale
 - 2. Duration of Coma
 - 3. Duration of Post-Traumatic Amnesia
 - 4. Levels of Cognitive Functioning
 - 5. Other
- C. Outcome Predictors
 - 1. Premorbid Characteristics
 - 2. Clinical Presentation
 - 3. Neurologic Imaging
- D. Outcomes
 - 1. Cognitive Losses
 - 2. Behavioral Changes
 - 3. Social Isolation
 - 4. Functional Losses
- E. Rehabilitation
 - 1. Medical Care

2. Neuropsychological Evaluations
3. Therapies
4. Home Health Services
5. Potential Complications

F. Psychosocial Aspects

1. Client
2. Family
3. Other Supportive Systems

4. NEONATAL AND PEDIATRIC INJURIES/ILLNESSES

A. Types of Cerebral Palsy

1. Spastic
2. Dyskinetic
3. Hypotonic

B. Problems Associated with Cerebral Palsy

1. Neurologic
2. Musculoskeletal
3. Gastrointestinal
4. Communication Disorders
5. Behavioral and Emotional

C. Management

1. Medical Care
 - a. Evaluations
 - b. Therapies
 - c. Home Health Services
 - d. Medications
 - e. Surgery

2. Growth and Developmental Considerations
3. Schooling and Education

D. Community Resources

1. Collateral Sources of Funding
2. Family

5. CHRONIC PAIN

A. Pathophysiology

B. Assessment

C. Management

1. Medication
 - a. Types
 - b. Delivery Systems
2. Cognitive Behavioral Methods

3. Devices
 - a. Implantable
 - b. Noninvasive
4. Nerve Blocks
5. Neuroablation
- D. Psychosocial Aspects
 1. Client
 2. Family
 3. Other Supportive Systems

III. LIFE CARE PLAN CONSTRUCTION

- A. Assessment of Patient (provided in case scenario)
 1. Face-to-Face Versus Telephone or No Contact
 2. Documentation of Demographics of the Injured Person
 3. Family Dynamics (including financial profile, work history, guardianship/power of attorney, social profile)
 4. Documentation of Daily Routine (functional capabilities, pre/post incident)
 5. Current Medications
 6. Assessment of Home/Environment
 7. Collateral Interviews
- B. Collaboration with Others (provided in case scenario)
 1. Identify Needs for Experts or Specialists
 2. Consult with Experts or Specialists
 3. Request Information from Treating Physicians/Ancillary Providers as Able
 4. Consult Other Resources
 - a. Published Standards/Clinical Practice Guidelines
 - b. Provider or Expert Report (provided in case scenario)
 - c. Depositions (provided in case scenario)
 - d. Literature
 - e. Medical Records (summary provided in case scenario)
 - f. Professional Education, Training and/or Experience
- C. Life Care Plan Development
 1. Review Records (provided in case scenario)
 - a. Pre-Morbid
 - b. Post-Accident/Incident
 2. Review Depositions (provided in case scenario)
 3. Review Expert Reports (provided in case scenario)
 4. Assess Need For

- a. Procedural/Surgical/Intensive Intervention (e.g., emergency room visits, hospitalizations (non-surgical/surgical), pain management/functional restoration program, therapeutic pain injections, stage 1/stage 2 seizure work up, etc.)
- b. Home/Facility Care (e.g., attendant care for ADLs, assisted living, skilled nursing, nursing home, group home, etc.)
- c. Future Medical Care (including primary care, specialists, nutritionist/dietician, case management, dentist, prosthetist/orthotist, ophthalmologist, etc.)
- d. Diagnostic Testing (e.g., laboratory studies, imaging studies, etc.)
- e. Orthotics/Prosthetics (e.g., splints, braces, orthotics, prosthetics, etc.)
- f. Psychosocial Services (e.g., cognitive behavioral therapy, neurofeedback/biofeedback, etc.)
- g. Evaluations/Treatment Sessions (including therapies, health and strength maintenance, inpatient/outpatient rehabilitation, neuropsychological evaluation/testing, medically supervised weight loss program, community fitness program with/without pool, etc.)
- h. Educational/Vocational/Avocational (ergonomic evaluation/equipment, vocational rehabilitation training, etc.)
- i. Therapeutic Equipment Needs (including assistive technology, cane, walker, exercise equipment, mattress, safety items [shower bench/chair, raised toilet seat, grab bars, handheld shower head], palliative modalities [e.g., hot/cold wrap, wedge pillows], TENS unit/supplies, etc.)
- j. Social/Leisure Needs (including membership in diagnosis related organizations/magazine subscriptions, etc.)
- k. Aids for Independent Function (e.g., reachers/grabbers, adaptive utensils, items to assist with ADLs/IADLs, etc.)
- l. Drugs/Supplies (e.g., prescriptive and over the counter medications, lotions, bowel/bladder supplies, etc.)
- m. Personal Needs (e.g., special needs trust, guardian)
- n. Wheelchair Needs (e.g., wheelchair replacement, cushion replacement, cushion cover, maintenance, batteries, etc.)
- o. Architectural Renovations (e.g., widening doorways, ramps, roll-in shower, lower height of counters, etc.)
- p. Home/Home Maintenance (e.g., lawn/garden care, exterior maintenance, snow removal, IADL Assistant, etc.)
- q. Transportation (e.g., wheelchair accessible vehicle w/conversion, hand controls, left accelerator, Handicap Placard, etc.)

IV. COST RESEARCH

- A. Basic understanding of coding/costing/Geozip/GAF
- B. Determination of usual, customary, and reasonable/market value costs
 1. Internet
 2. National Database
 3. Providers/Vendors

SAMPLE PORTFOLIO EXAMINATION

LIFE CARE PLAN

Table: Home/Facility Care

Item	Month/Year Initiated	Frequency	Cost
PCA/HHA	March/2023	2 hours per day/7 days per week	\$30.00 per hour

COST RESOURCE INDEX

Item	Unit of Measurement	Cost	Zip Code	Resource
PCA/HHA	Per hour	\$30.00	55106	Home Care Services (888) 777-8888

REFERENCES

The Universal Life Care Planner Certification Board has prepared a suggested reference list to assist in preparing for the certification Portfolio Examination for life care planners. These references contain journals and textbooks, which include information of significance to life care planning. This list does not attempt to include all acceptable references, nor is it suggested that the CHLCP™ Portfolio Examination is necessarily based on these references.

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UNIVERSAL LIFE CARE PLANNER CERTIFICATION BOARD



Certified Health Professional Life Care Planner Certification (CHLCP™)
Portfolio Examination

VERIFICATION OF WORK EXPERIENCE

Candidate's Name: _____

Candidate's Address: _____

As the above candidate's immediate supervisor or Human Resources Director, I verify that to the best of my knowledge that the above-named candidate has at least two years of life care planning experience within the past five years

Supervisor Name (please print) _____

Title: _____

Supervisor Signature: _____

Institution/Organization: _____

Address: _____

City/State/Zip code: _____

Supervisor Name (please print) _____

Title: _____

Supervisor Signature: _____

Institution/Organization: _____

Address: _____

City/State/Zip code: _____