WHO-FAMILY OF INTERNATIONAL CLASSIFICATIONS NETWORK MEETING 2005

A functioning and related health outcomes module

16-22 October
Tokyo Japan

P2-11

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Abstract The Functioning and Related Health Outcome Module is a data capture tool for summary information on functioning. The module is based on the ICF components and qualifiers and essentially summarises the ICF into four tables. The FROHM is to be tested by a variety of methods in a range of services, settings and specialties over the next few months. This paper will present the plan for testing and the range of test opportunities that have been negotiated.

Introduction

The purpose of the Functioning and Related Health Outcomes Module (FRHOM) is to collect quantified summary information on the level of functioning of an individual. Information on a person's functioning should enhance data quality for medical purposes. It will complement information on diseases and related health problems in a range of applications (AIHW 2005).

Kostanjsek and Üstün (2004) point out that, to overcome the problem where assessment data acquired in one episode of care cannot be carried over to another episode of care involving a different clinical focus, a common framework is needed. This data capture tool is intended to provide that common framework and convey summary information between care providers. It is designed for use in health, clinical and community services and will be tested in these settings.

The FRHOM is a new, compact module that can provide a summary that reflects the person's current status across all components of functioning as defined in the International Classification of Functioning, Disability and Health (ICF) (WHO 2001). It is not an assessment tool but draws on information collected from a range of sources, including the person and their carers, clinicians and the usual assessment processes.

The information, if gathered over time and by a range of health and community care providers, will result in a complete profile of the person's functioning.

The module was developed following extensive mapping of existing items on functioning to the International Classification of Functioning, Disability and Health (ICF) (WHO 2001).These items included standardised assessment tools (condition specific and generic), functional outcome, health related quality of life and population survey measures. Details of this work can be found in AIHW 2005.

Feedback can be provided to who_fic@aihw.gov.au or to Catherine Sykes at the Network Meeting.

Methods & Materials

Methods

The type of testing undertaken will depend on the capacity of the stakeholders to incorporate testing into their existing work programs. There are a range of possible tests, from those that are simple and have low resource requirements (human, financial and time), to those that are more resource intensive. The types of tests proposed are:

- Structured discussions during committee meetings
- Key informant interviews
- Consensus conference
- Mapping exercises
- Completing FRHOM from case records
- Pilot testing in projects that are about to happen
- Clinical test by interested clinicians
- Testing the FRHOM with existing data

Test materials

1 A document for consultation and testing will be distributed, together with a survey form with a set of key questions, to interested persons to provide feedback to the project team.

2 A FRHOM User's Guide gives information about the purpose of the FHROM and how to collect information. It is envisaged that the User's Guide will be revised in the light of information gained during testing.

3 The set of key questions will form the basis of key informant interviews. Key informants include;

- GPs and other medical practitioners
- Health care providers, such as nurses, allied health professionals and social workers
- Australian Government departments
- State and territory government departments
- Health care consumers and people with disabilities
- Community services providers
- Clinical experts on cardiovascular disease, diabetes and other chronic diseases
- Research experts

4 A set of vignettes is available for coding using the FHROM. Reporting forms for completion by those undertaking the tests have also been developed.

The FRHOM

The FRHOM comprises four tables for capturing summary information to describe a person's level of functioning:

- Body functioning, qualified by extent;
- Body structure, qualified by extent, location and nature;
- Performance in life areas: activities, qualified by difficulty and need for assistance; and participation, qualified by extent and satisfaction;
- Environmental factors, qualified by extent of influence either as barriers or facilitators to functioning.

Each table represents a component of functioning and has a range of domains and measures of the extent to which that domain is affected. The tables can be seen in the paper to be presented to the Implementation Committee.

Feedback please

The project team is keen to receive feedback on the approach they are taking to implement the ICF. The following issues are for discussion at the World Health Organization Family of International Classifications Network meeting in Tokyo.

1 The FHROM looks to be an instrument that is feasible to apply in the clinical setting.

2 The information gathered at the clinical interface is likely to be useful for statistics.

3 Ideally the FRHOM could have a drill down capacity, much like the ICF, that allows the use of the module at the level of detail suitable for the purpose. Would a drill down facility improve the usefulness of the FRHOM?

4 We have discussed recording the Environmental factors table using the facilitator/barrier scale, but in the absence of many assessments of the environment we have considered using an indication of whether the factor is present or absent. This could provide considerably more information than is usually collected at present, but compromises the purity of the implementation of ICF.