



ICF as a common language in team collaboration

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Center for Augmentative and Alternative Communication
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&
INTERFACE**

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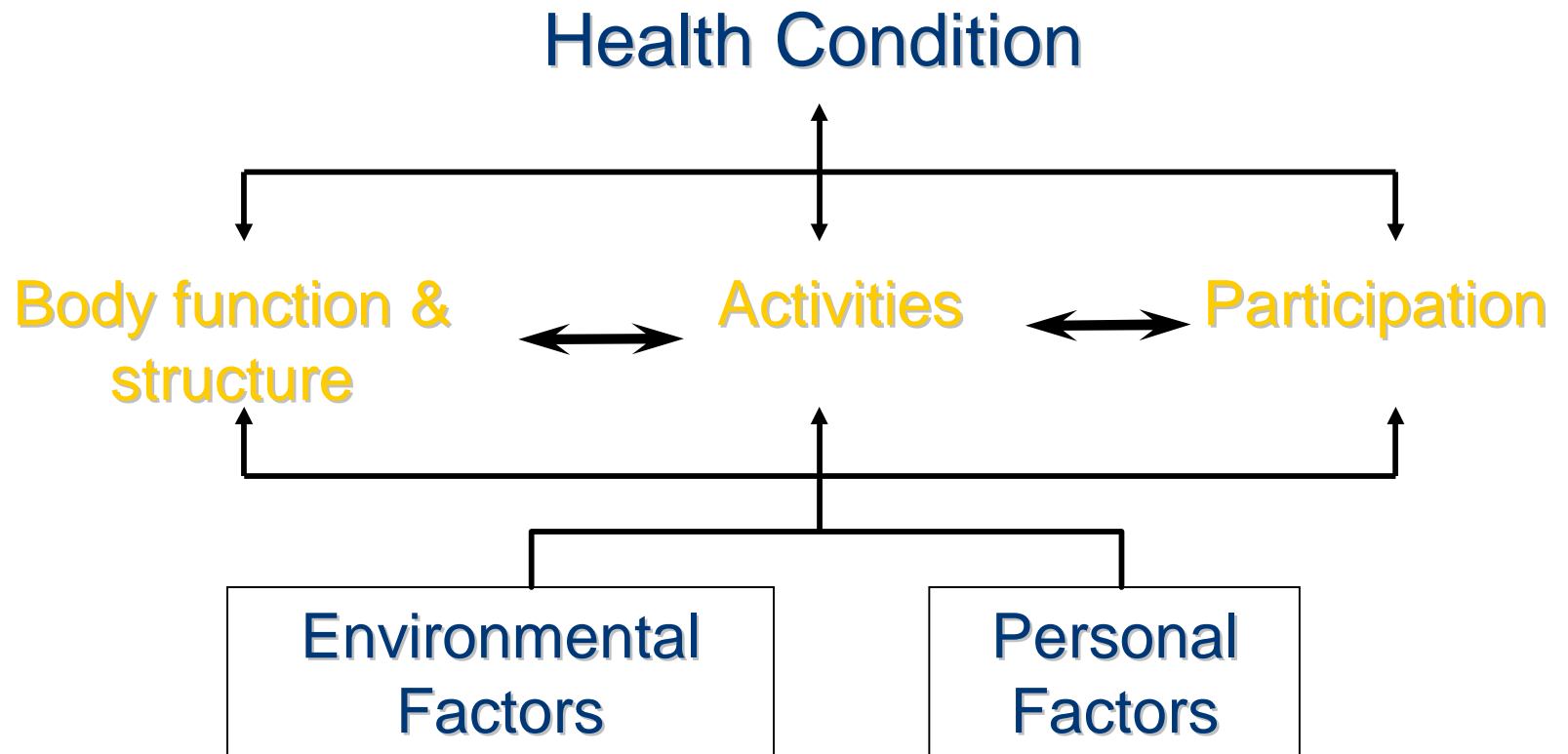


ICF-CY

A common language for the health
of children and youth



ICF Conceptual Framework





From a uni-dimensional to a multi-dimensional health and disability concept

- Children & Youth with certain diagnostic labels or impairment
 - Hearing impaired
 - Anarthria
 - Learning disability
 - ADHD
- Masking of child or youth characteristics
- Exclusion of children with non recognised disabilities – non diagnosed children



- Functional Status Children & Youth
- body level:
FUNCTIONS & STRUCTURES
- person level:
ACTIVITIES
- societal level:
PARTICIPATION
- Information on real life experience
ENVIRONMENT
- Every child or youth with a functioning problems



A context inclusive health and disability concept

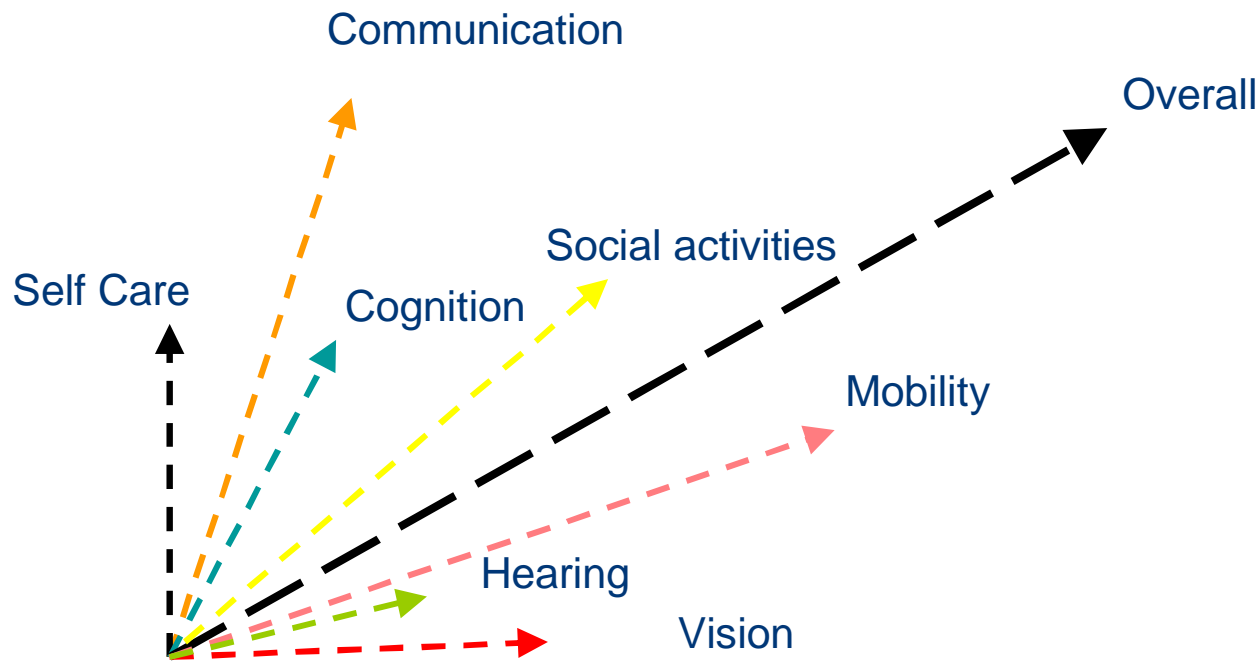
Environmental factors

- Barriers
- Facilitators





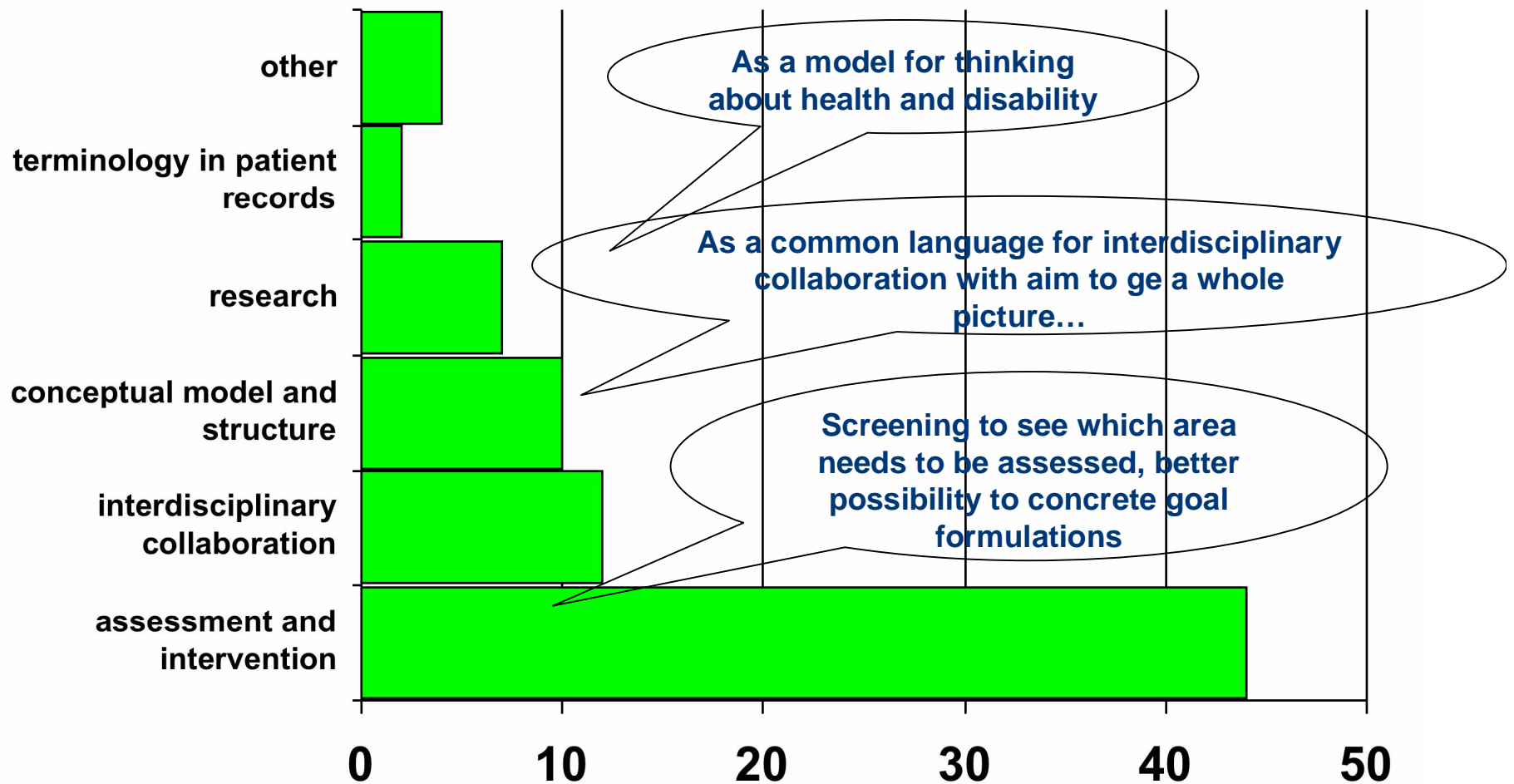
ICF-CY: A multidimensional model of functioning



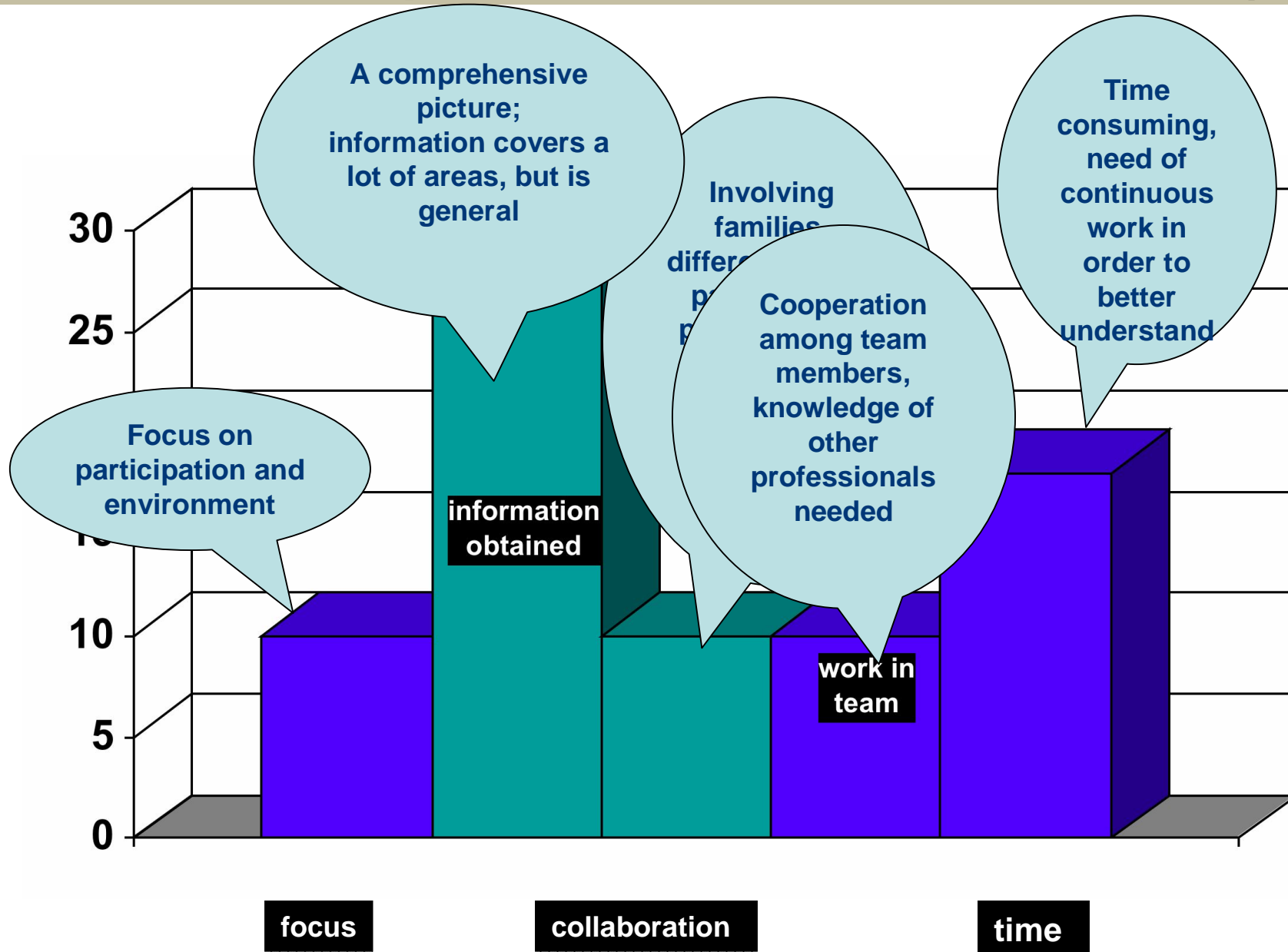


Swedish fieldtrial ICF-CY, 2005

Areas of usage of ICF-CY (79)

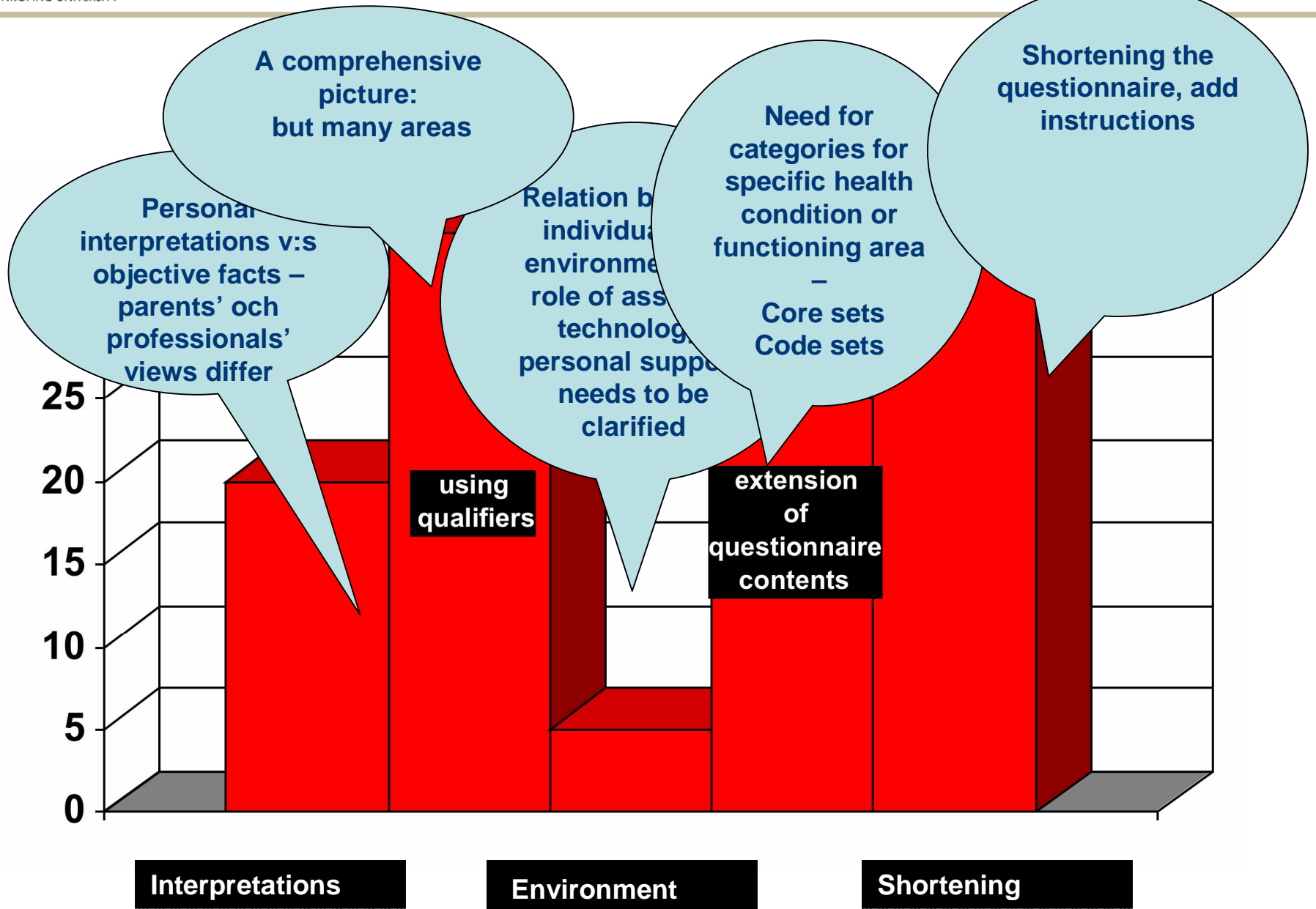


Aspects related to use of ICF-CY (77)





The difficulties in use and necessary changes





Use of ICF-CY in collaboration

- Provides a wholistic perspective of the child's situation, and a conceptual model to share
- Provides a more detailed picture of the young child
- Positive for collaboration between professional groups with common knowledge about the child's situation and context
- Highlights importance of collaboration with families
- Focus on activity, participation and environment





The intervention process

Problem formulations (body, activity, participation)



Problem explanations (body, activity, participation, environm)



Goal (body, activity, participation, environm)

Method & implementation (body, activity, participation, environm)



Evaluation and revision



Protocol to describe the situation for a child/youth as a basis for intervention

I -CY-HAB

Form 1, 2, & 3

Activity / Participation – Environment – Body functions and structures

INSTRUCTIONS

The forms should be used to support parents and habilitation professionals to describe the situation for the child with disability and possibilities for development.

The questions are intended to cover as many areas as possible so they can be used with different children – use what is relevant for your child at the time.

Your child shall participate filling in the forms when possible.

You as a parent decide the role of your child in this process.



Form 1. Activity/Participation

The purpose with the questions is to assess systematically how your child functions in everyday-life situations, to obtain a picture of difficulties and strengths. The information is intended to give you and your child possibilities to think about needs for support and service from the habilitation center and also to set goals.

Form 1 is used as a start of the intervention process. Parents/children/youth and professionals start this process together and then the family/child/ youth complete the form at home.



How your child learns new things, uses what she/he knows and performs different tasks in everyday life and the child's reaction on demand.

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Relevant to ask	Has your child – during the last month – experienced difficulties with:	NO	YES					Can do better	Comments	Would like to do better
			How large are the difficulties?							
			Mild	Moderate	Severe	Complete	Unknown			

d1 – LEARNING AND APPLYING KNOWLEDGE

			1	2	3	4			
d120	To mouth, touch or taste things?								
d131	To play with things and learn through play, i.e. stir with a spoon, put on a lid, pretend that a piece of wood is a car, roll a ball.								

d2 – GENERAL TASKS AND DEMANDS

			1	2	3	4			
d210	To perform a single task or responding to a single communication. i.e. put on a sock, do homework, sort objects, play hide and seek with friends, or take an instruction.								
			1	2	3	4			

Does your child have the capacity to do this better in other situations? ↑
(this where the child has the best possibilities for development)

What areas does the child/youth want to function better in or do more? ↑
(Think about the child's/youth's own engagement and motivation to act and own wishes for increased participation – this is essential for increasing the child's/youth's participation)





Summary – form 1

(Go through the form and highlight the areas that best cover the actual situation)

“Can do better” – Areas for development

In what areas is your child’s capacity higher than the one used in everyday-life?

(Choose the most important areas)

“Wants to do better” – Areas of increased functioning

What does your child want to function better and what do you as a parent want to function better?

(Choose the most important areas)

Goal

How does your child and you as a parent want your situation to be at a certain point of time in the future?

Interventions

To decide interventions, i.e. WHAT needs to be done to reach the goals, more information is needed and your child’s situation needs to be better described.

Use form 2, Environmental factors – and form 3 Bodyfunctions/and structures



Form 2. Environmental factors

The purpose with the questions is to complete the information in Form 1 in order to make clear if there are factors in the environment of the child/youth that hinder everyday-life functioning and need to be attended to. It is also important to look at facilitating factors for the child/youth and for the family.

Form 2 is used together with the assessment in Form 1. The family completes the form at home

Important products and technical equipment that your child needs.

Is your child's life hindered or facilitated by:	NO	YES – Barrier					YES – Facilitator					Inter-vention needed	Comments
		Extent of barriers?					Extent of facilitator?						
		Mild	Mod-er-ate	Sev-ere	Com-plete	Un-kn-own	Mild	Mod-er-ate	Sev-ere	Com-plete	Un-kn-own		

e1 – PRODUCTS AND TECHNOLOGY

e1110	Food and dring. For example appropriateness, nutrition, amount and consistency		1	2	3	4		1	2	3	4			
e1101	Drugs. For example type of drug, amount		1	2	3	4		1	2	3	4			
e115	Products and technology for personal use in daily living. For example furniture, stroller, chairs, personal care equipment, adapted or specially designed devices, and orthopedic devices.		1	2	3	4		1	2	3	4			
			1	2	3	4		1	2	3	4			
			<i>If some of those factors are barriers for your child's well-beeing – Would you like an intervention now?</i>											





Summary form 2

Go through the form and highlight the areas that best cover the actual situation

Facilitating environmental factors

What helps your child/youth to function in everyday situations and/or together with others?

Barriers in the environment

What makes it difficult for your child/youth to function in everyday situations and/or together with others?

This needs to be focus for intervention

What in your child's/youth's environment needs to be changed to the better during the coming period?

(Choose the three most important areas marked with X in the column "Needs to be changed".

Interventions

To decide interventions your child's situation need to be highlighted from one more perspective. This is done together with habilitation and through using form 3 – Body-functions and structures. Information from the three forms can be weighed together and be used as the foundation for collaborative planning and interventions.



Form 3. Body functions

The purpose with those questions is to compliment the information in Form 1 and and 2 in order to make clear if there are impairments in body functions or psychological/mental factors that may explain limits in participation in the child/youth. It is important to discuss if those functions can be treated or trained in order to decrease problems or if other interventions are needed.

Form 3 is used when the assessment has continued for some time. The form is completed by parents/child/youth and professionals together.



Body functions

Relevant to ask	Har ditt barn – i jämförelse med barn i samma ålder – nedsatt funktion när det gäller:	NO	Yes					Kan bli bättre	Comments
			Hur stor är funktionsnedsättningen?						
			Lätt	Måttlig	Stor	Total	Vet ej		

b1 – PSYKISKA FUNKTIONER

b114	Att orientera sig. Det handlar om i tid och rum, t ex att barnet är medvetet om "i dag", "i morgon" eller om var det befinner sig. Det handlar också om person, dvs att vara medveten om identiteten hos sig själv och andra		1	2	3	4			
b120	Att genomföra uppgifter som kräver att barnet har förstått hur saker och ting fungerar		1	2	3	4			
			1	2	3	4			

b4 – HJÄRT- KÄRLFUNKTIONER, IMMUNSYSTEM OCH ANDNING

b460	Förnimmelser i samband med hjärta och andning. Det kan t ex yttra sig som tryck över bröstet, känsla av att hjärtat slår oregelbundet, hjärtklappning, rosslande andning, andnöd		1	2	3	4			
			1	2	3	4			

Bedömer du som förälder gemensamt med personal på Habiliteringen att funktionen skulle kunna förbättras nu?



Summary form 3

Go through the form and highlight the areas that best cover the actual situation

Well functioning body functions and psychological functions

What areas for the child/youth function without problems?

(Choose the most important areas of those marked with an X in the Column "NO")

Impaired body functions and psychological functions and anatomical aberrations

What impairments of functions make it especially difficult for the child/youth to function in everyday-life and/or together with others?

Interventions needed

What needs to be treated or trained during the coming period?

(Choose the most important areas of those marked with an X in the column "Can be better".

Add things that need to be maintained for getting worse)

Planning of habilitation

Use the summaries of the three forms. The information should be weighed together and be the basis for collaborative planning of intervention for the coming period.



HABILITATION PLANNING MATRIX

INVENTING

- Highlight the most important areas in the forms
- Sort in ICF-CY's components for clarity and transparency

PROBLEM

- Describe the child's difficulties in a concrete way
- How does it work today?
- Formulate the substantial problems based on the child's participation to make it meaningful for the child.

PROBLEMEXPLANATIONS

- Describe the background/explanations to the concrete problems that the child experiences
- The child's and the close network's experiences together with the assessment of professionals

GOALS

- Formulate substantial and concrete goals- How do the child and the family want the situation at a certain point in time in the future?
- Choose together with the family and child goals to be prioritised.
- Detailed goals for treatment and training are decided later with the involved professionals

INTERVENTIONS

- An agreement of WHAT is to be done and who is responsible for getting it done.
 - Choose method based on the explanation to the problem.
- Formulate the intervention giving the large picture it does not need to be detailed.
Find the appropriate person to work with the intervention



Summary codes for a child with communication difficulties

Activities and participation

- 1. Learning & Applying Knowledge
 - d160.2 focused attention
- 3. Communication
 - d330 Speaking
 - d335 Producing nonverbal messages
 - d350 Conversation
 - d360 Using communication devices and techniques
- 4. Mobility
 - d445 Hand and arm use
- 5. Interpersonal interactions and Relationships
 - d710 Basic interpersonal interactions
 - d720 Complex interpersonal interactions
Informal social relationships
- 8. Major Life Areas
 - d820 school education
- 9. Community, Social, & Civic Life
 - d910 community life

Environmental factors

- 1. Products and technology
 - e125 **Products and technology for communication**
- 3. Support and relationships
 - e310 **Family**
 - e315 **Extended family**
 - e320 **Friends**
 - e355 Health professionals
- 4. Attitudes
 - e420 **Individual attitudes of friends**
- 5. Services, systems and policies
 - e580 Health services, systems and policies

Body functions

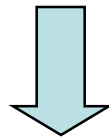
- 1. Mental Functions
 - b140 attention functions
 - b 147 psychomotor functions
 - b167 mental functions of language
- 3.
 - Voice and speech functions

ICF in collaborative problemsolving

1. Activity and participation

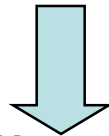
The child does not communicate with other children

The child does not use her communication aid



Goals

The child initiates and communicates with other children
and use her communication aid



2. Environmental factors

Products and technology

Friends

Individual attitudes of friends

Service systems

3. Bodyfunctions and structures

Psychomotor functions

Mental functions of language

Voice and speech functions

4. Interventionplan



INTERVENTIONPLAN

Goals

The child initiates and communicates with other children and uses her communication aid

Methods

Use communication - AAC and verbal utterances

Adapt the communication aid – content and use

Find situations with other children where she initiates communication

Training in using the communication aid in initiating with other children

Work with communication with other children using the communication device together

Timeplan and who is responsible for getting it done

Plan for evaluation

ICF in communication intervention

	Function/structure	Activity	Participation	Contextual factors
Type of information	Related to diagnosis,	Capacity	Situations	Social and physical
Primary informant	Medical and paramedical professionals	Performance Therapists, child and proximal environment	Interaction Child, proximal environment and therapists	environmental Proximal environment, child, therapists
Use of the information in communication in everyday life	Understanding the biological background to problems in everyday life	Understanding behaviour and zone of proximal development	Understanding engagement and interaction	Understanding social and physical factors in the environment
Use in assessment and communication intervention	Background to difficulties – possible target for interventions	Shows abilities, limitations, strengths and potential – possible targets for interventions	Shows engagement - intervention for the child, the proximal environment	Shows environmental prerequisites and limitations possible to influence
Use in evaluation of outcomes	The structure remains after most types of intervention Function in child can change	Changes in the child's performance and capacity	Changes in the child's engagement, and in the interaction between child and the proximal environment	Changes in persons in the proximal and distal environment and in the physical environment



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