ICF as a common language in team collaboration

2nd Regional African AAC conference, August 2-4 st, 2011, Center for Augmentative and Alternative Communication University of Pretoria, South Africa & INTERFACE

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A common language for the health of children and youth
ICF Conceptual Framework

Health Condition

Body function & structure

Activities

Participation

- Environmental Factors
- Personal Factors
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)

- As a model for thinking about health and disability
- As a common language for interdisciplinary collaboration with aim to get a whole picture...
- Screening to see which area needs to be assessed, better possibility to concrete goal formulations

- Assessment and intervention
- Interdisciplinary collaboration
- Conceptual model and structure
- Research
- Terminology in patient records
- Other
Aspects related to use of ICF-CY (77)

- A comprehensive picture; information covers a lot of areas, but is general
- Involving families, differences between parents and professionals
- Cooperation among team members, knowledge of other professionals needed
- Time consuming, need of continuous work in order to better understand
- Focus on participation and environment
- Focus, collaboration, time

Focus on participation and environment
The difficulties in use and necessary changes

- Personal interpretations vs. objective facts – parents’ and professionals’ views differ
- Relation between individual and environment, e.g. role of assistive technology, personal support needs to be clarified
- Need for categories for specific health condition or functioning area – Core sets Code sets
- A comprehensive picture: but many areas
- Shortening the questionnaire, add instructions

Interpretations
Environment
Shortening

Interpretations
Environment
Shortening
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, environment)

Goal (body, activity, participation, environment)

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

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.

Has your child – during the last month – experienced difficulties with:

<table>
<thead>
<tr>
<th>Relevant to ask</th>
<th>NO</th>
<th>YES</th>
<th>Comments</th>
<th>Would like to do better</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>d1 – LEARNING AND APPLYING KNOWLEDGE</strong></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>d120</td>
<td>To mouth, touch or taste thins?</td>
<td>1</td>
<td>2</td>
<td>3</td>
</tr>
<tr>
<td>d131</td>
<td>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.</td>
<td>1</td>
<td>2</td>
<td>3</td>
</tr>
<tr>
<td><strong>d2 – GENERAL TASKS AND DEMANDS</strong></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>d210</td>
<td>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.</td>
<td>1</td>
<td>2</td>
<td>3</td>
</tr>
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<td></td>
<td></td>
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</tr>
</tbody>
</table>

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/youth’s own engagement and motivation to act and own wishes for increased participation – this is essential for increasing the child/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.**

<table>
<thead>
<tr>
<th>Is your child’s life hindered or facilitated by:</th>
<th>NO</th>
<th>YES – Barrier</th>
<th>YES – Facilitator</th>
<th>Extent of barriers?</th>
<th>Extent of facilitator?</th>
<th>Intervention needed</th>
<th>Comments</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td>Mild</td>
<td>Moderate</td>
<td>Severe</td>
<td>Complete</td>
<td>Unknown</td>
<td>Mild</td>
</tr>
<tr>
<td>e1 – PRODUCTS AND TECHNOLOGY</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>e1110 Food and dring. For example appropriateness, nutrition, amount and consistency</td>
<td></td>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
<td></td>
<td></td>
</tr>
<tr>
<td>e1101 Drugs. For example type of drug, amount</td>
<td></td>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
<td></td>
<td></td>
</tr>
<tr>
<td>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.</td>
<td></td>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

If some of those factors are barriers for your child’s well-being – Would you like an intervention now?
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**

<table>
<thead>
<tr>
<th>Relevanta frågor att ta upp</th>
<th>NO</th>
<th>Yes</th>
<th>Kan bli bättre</th>
<th>Comments</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Har ditt barn – i jämförelse med barn i samma ålder – nedsatt funktion när det gäller:</strong></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>Hur stor är funktionsnedsättningen?</strong></td>
<td>Lätt</td>
<td>Måttlig</td>
<td>Stor</td>
<td>Total</td>
</tr>
<tr>
<td>b1 – PSYKISKA FUNKTIONER</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>b114 Att orientera sig. Det handlar om i tid och rum, t ex att barnet är medvetet om &quot;i dag&quot;, &quot;i morgon&quot; eller om var det befinner sig. Det handlar också om person, dvs att vara medveten om identiteten hos sig själv och andra</td>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
</tr>
<tr>
<td>b120 Att genomföra uppgifter som kräver att barnet har förstått hur saker och ting fungerar</td>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
</tr>
<tr>
<td>b4 – HJÄRT- KÄRLFUNKTIONER, IMMUNSYSTEM OCH ANDNING</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>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</td>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
</tr>
</tbody>
</table>

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

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**I-CY-HAB**
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 markes 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 markes with an X in the column ”Can be better”. Add things that needs 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
b147 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
INTERVENTION PLAN

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
<table>
<thead>
<tr>
<th><strong>Type of information</strong></th>
<th><strong>Function/structure</strong></th>
<th><strong>Activity</strong></th>
<th><strong>Participation</strong></th>
<th><strong>Contextual factors</strong></th>
</tr>
</thead>
<tbody>
<tr>
<td>Primary informant</td>
<td>Related to diagnosis,</td>
<td>Capacity</td>
<td>Situations</td>
<td>Social and physical</td>
</tr>
<tr>
<td></td>
<td>Medical and</td>
<td>Performance</td>
<td>Interaction</td>
<td>environmental</td>
</tr>
<tr>
<td></td>
<td>paramedical</td>
<td>Therapists,</td>
<td>Child, proximal</td>
<td>Proximal environment,</td>
</tr>
<tr>
<td></td>
<td>professionals</td>
<td>child and</td>
<td>environment and</td>
<td>child, therapists</td>
</tr>
<tr>
<td></td>
<td></td>
<td>proximal</td>
<td>therapists</td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td>environment</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th><strong>Use of the information in communication in everyday life</strong></th>
<th><strong>Function/structure</strong></th>
<th><strong>Activity</strong></th>
<th><strong>Participation</strong></th>
<th><strong>Contextual factors</strong></th>
</tr>
</thead>
</table>

<table>
<thead>
<tr>
<th><strong>Use in assessment and communication intervention</strong></th>
<th><strong>Function/structure</strong></th>
<th><strong>Activity</strong></th>
<th><strong>Participation</strong></th>
<th><strong>Contextual factors</strong></th>
</tr>
</thead>
</table>

<table>
<thead>
<tr>
<th><strong>Use in evaluation of outcomes</strong></th>
<th><strong>Function/structure</strong></th>
<th><strong>Activity</strong></th>
<th><strong>Participation</strong></th>
<th><strong>Contextual factors</strong></th>
</tr>
</thead>
</table>
A common language for the health of children and youth