

## **Introducing FIM (functional independence measure)**

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### **Why should we use measuring instruments in rehabilitation?**

- to describe the clients status on a same way
- to examen the changes of clients status
- to prove the effectiveness of the applied rehabilitation(habilitation) method(system)
- to make possible benchmarking the different rehabilitation methods

### **What do we want to measure ?**

- I. impairment- lack of impairment  
disability – ability  
handicap, QOL
- II. body (structure-function)  
activity  
participation

### **What do we expect from the measuring instruments**

- sensitivity
- validity
- reliability
- easy to perform

### **Applicability of measuring instruments**

- any kind or most of the disability
- special kind of disability or diseases

### **What do we measure?**

- capacity?
- performance?

## What type of scales do we use?

- nominal scale- no domination or subdomination
- ordinal scale – data are in order, the differences between the different grades are not necessarily equal
- interval scale—the differences between the different grades are equal
- hierarchic( Guttman ) scale- the grades are in order of difficulty

## One of the first instruments of measuring daily life activity

### Barthel index

100 points scale, most of the items could be answered by yes or not

- ordinal scale
- to measure activity
- easy to perform
- not enough sensitiv, rough

<b>Feeding</b> 0 = unable 5 = needs help cutting, spreading butter, etc., or requires modified diet 10 = independent	0 5 10
<b>Bathing</b> 0 = dependent 5 = independent (or in shower)	0 5
<b>Grooming</b> 0 = needs to help with personal care 5 = independent face/hair/teeth/shaving (implements provided)	0 5
<b>Dressing</b> 0 = dependent 5 = needs help but can do about half unaided(personally) 10 = independent (including buttons, zips, laces, etc.)	5 0 10

<b>Bowels</b> 0 = incontinent (or needs to be given enemas) 5 = occasional accident 10 = continent	
<b>Bladder</b> 0 = incontinent, or catheterized and unable to manage alone 5 = occasional accident 10 = continent	
<b>Toilet Use</b> 0 = dependent 5 = needs some help, but can do something alone 10 = independent (on and off, dressing, wiping)	

**Transfers (bed to chair and back)**  
0 = unable, no sitting balance  
5 = major help (one or two people, physical), can sit  
10 = minor help (verbal or physical)  
15 = independent

**Stairs**  
0 = unable  
5 = needs help (verbal, physical, carrying aid)  
10 = independent

## FIM

### Domains

#### Self care

- Eating
- Grooming
- Bathing
- Dressing – upper body
- Dressing – lower body

#### Toileting

- Bladder management
- Bowel management

#### Mobility

- Transfer: chair , wheelchair
- Transfer: toilet
- Transfer: tub, shower

#### Walking

- Walk, wheelchair
- Stairs

#### Communication

- Comprehension
- Expression

#### Social abilities

- Social interaction
- Problem solving
- Memory

#### Scoring:

Performance of the child on each of the items is assigned to one of seven levels of an ordinal scale that represents the range of function from complete and modified independence (levels 7 and 6) without a helping person to modified and complete dependence (levels 5 to 1) with a helping person..

#### FIM™ LEVELS

##### No helper

7 Complete Independence (Timely, Safely)

6 Modified Independence (Device)

##### Helper – Modified Dependence

5 Supervision (Subject = 100%)

4 Minimal assistance (Subject = 75% or more)

3 Moderate assistance (Subject = 50% or more)

##### Helper – Complete Dependence

2 Maximal assistance (Subject = 25% or more)

1 Total assistance (Subject less than 25%)

#### Measuring FIM

- at the beginning and at the ending of the program
- during the multidisciplinary team meeting
- every team member has to state his-her opinion
- after arguing the worst mark will be accepted
- the most heated debate occurs between the nurses and physiotherapists on the mobility and self care(capacity vs performance)
- sometimes difficult to judge the cognitive performance