The UK FIM+FAM Training Course: Part 2 General description and Motor items

Course originator:
Prof Lynne Turner-Stokes DM FRCP

Regional Rehabilitation Unit
Northwick Park Hospital

Watford Road, Harrow, Middlesex. HA1 3UJ

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- General description of scoring levels
- Item by item guide to scoring
 - Self-care
 - Mobility
 - Communication
 - Cognitive / psychosocial

UK FIM+FAM scale – Motor 16 items

FIM - Yellow items

FAM - Blue items

- Self-care
 - Eating
 - Swallowing
 - Grooming
 - Bath/showering
 - Dressing Upper
 - Dressing Lower
 - Toileting
 - Bladder Management
 - Bowel Management

- Mobility
 - Transfers
 - Bed/chair
 - Toilet
 - Shower/bath
 - Car
 - Locomotion
 - Stairs
 - Community mobility

FIM+FAM – Cognitive 14 items

FIM - Yellow items FAM - Blue items

- Communication
 - Comprehension
 - Expression
 - Reading
 - Writing
 - Speech intelligibility

- Psychosocial / Cognition
 - Social interaction
 - Problem-solving
 - Memory
 - Emotional status
 - Adjustment to limitations
 - Use of leisure time
 - Concentration
 - Safety awareness

Each item is scored on 7 Levels

7 = Fully independent

6 = Independent with device

No help from a person

5 = Supervision / set-up

Set-up / supervision No physical contact

Help from a person

4 = Minimal assistance

■ 3 = Moderate assistance

2 = Maximal assistance

■ 1 = Total assistance

(<25% of task)

(25-50% of task)

(50-75% of task)

(>75% of task)

General description of scoring levels

- Patient is independent in all components of the task
- No helper is required
 - even for supervision, cueing, prompting or coaxing
- No assistive devices used
- Task is performed safely
- Within a reasonable amount of time

- Patient is physically independent in all components of the task
- No helper is required
 - even for supervision, cueing, prompting or coaxing

BUT:

- An assistive device may be used
- Or takes more than reasonable time
- Or there are concerns the safety.

- Patient is physically independent in all components of the task
- Helper is required for
 - set up only
 - ■E.g. laying out utensils
 - supervision, cueing, prompting or coaxing
 - Standby verbal instruction only
- No "hands-on" assistance

- Helper provides minimal hands-on assistance
 - At the level of touching only
 - no more than steadying, guiding or contact guarding
- Patient completes at least 75% of task themselves

- Helper provides moderate "hands-on" assistance
- Patient completes at least 50% of the task
 - They do more of the task and the helper

- Helper provides maximum assistance
- Patient completes less than half the task
 - But more than 25%
- Helper does more of the work than the patient

- Helper provides total assistance
- Patient may make a small amount of effort
 - But completes less than 25% of the task

OR...

- Patient does not perform activity
- Risk of injury if tested
- Two or more helpers are required

Essential scoring rules

- Score on what patient does day-to-day
 - Not on what he could, might or should do
- Score all items leave no blanks
- Score only 1-7 no half scores
 - Except for certain FIM items
 - In which a '0' score is allowed on admission
 - Make up your mind
 - If in doubt, score the lower

General decision tree

- Boxes at top of page
 - Left lists what is included in the item
 - Right gives a description of level 7
- Box at bottom of page
 - Level descriptors
 - Check this to make sure the description matches the level you have reached through the decision trees
- Conundrums
 - Page opposite
 - Commonly encountered problems
 - These may help if you have difficulty agreeing a score

Detailed scoring

Self-care items

- Eating / drinking
- Swallowing
- Grooming
- Bathing
- Dressing Upper body
- Dressing Lower body
- Toileting
- Bladder Management
 - Level of assistance / frequency of urinary accidents
- Bowel Management
 - Level of assistance / frequency of faecal accidents

(FAM item)

Eating

Eating includes:

- The use of suitable utensils to bring food to the mouth
 - including cutlery
 - or hand, if culturally appropriate
- Chewing and swallowing
- Drinking from a cup or glass
- Once the meal is presented on a table or tray.
- Or administration of enteral / parenteral feeds

- Complete independence
 - Patient eats from a normal plate
 - Using unmodified utensils
 - Manages all consistency of food
 - Chews and swallows without difficulty
 - Finishes meal within a reasonable time
 - There are no concerns for safety
 - E.g. burning choking etc
 - Drinks then flows from a normal cup or glass

- Modified independence
- Pt requires one or more of the following:
 - An assistive device
 - E.g. modified cutlery, plate guard etc
 - Orthotic applied by the patient themselves
 - Modified diet
 - eg pureed food, thickened fluid
 - but is able to prepare this themselves
 - Takes more than a reasonable amount of time
 - There are concerns for safety
 - E.g. risk of burns or choking

(Dentures are not an assistive device in this context)

- Supervision or set up
 - No hands-on help
- Help may be required for:
 - Managing food or fluid consistency
 - Set up eg
 - Opening packaging, cutting food
 - Applying an orthosis
 - Using assistive devices
 - Verbal cueing / coaxing
 - Prompting to eat, or to slow down (one mouthful at a time)
 - Monitoring swallowing

"Hands-on assistance"

- Help may be required for:
 - 1. Directing hand to plate
 - 2. Scooping up food
 - 3. Guiding hand to mouth
 - 4. Placing food in mouth
 - 5. Stabilising utensils / holding cup
 - 6. Checking mouth for pocketed food

Eating levels 4, 3, and 2

- Level 4 occasional assistance
 - Patient provides 75% or more of the effort eg
 - Requires help just at the level of touching
 - not every mouthful
- Level 3 moderate assistance
 - Patient provides more than half of the effort eg
 - Requires help for every mouthful
 - but not all tasks
- Level 2 maximal assistance
 - Patient provides less than half of the effort eg
 - Requires help for most tasks for every mouthful
 - Still provides >25% of the effort

- Total assistance
 - Patient completes less than 25% the task
 - Helper provides >75% of the effort
- Patient is fed
 - Only chews and swallows
- Patient refuses to eat
 - Or eats only first few mouthfuls
 - and is then fed

Conundrums – eating 1

- Inclusion of swallowing
 - Eating is a FIM item
 - It includes chewing and swallowing
 - Swallowing is also rated separately in the FAM
 - To preserve integrity of the FIM items
 - Include swallowing when rating the FIM
 - Even though it is scored in its own right later
- Using adapted utensils
 - Pt can eat independently with modified cutlery
 - Prefers to struggles with normal cutlery
 - And so needs help to finish up his plate
 - Rate on what he <u>does</u> do not what he <u>can</u> do.

Conundrums – Eating 2

- Modified food consistency
 - Subject who requires pureed food
- Can score 6
 - If they can choose this themselves
 - And prepare it independently
- But score 5
 - If someone else chooses/prepares it for them

Vignette - eating

■ Joe can use a rocker knife to cut food but prefers to wrestle with a spoon or fork. He manages a drink and to open containers, but may spill them. While untidy, he is independent.

- Score 6
 - Modified independence
 - Concerns for safety

Swallowing

- Overlaps FIM eating item
 - Still score including swallowing
 - To maintain integrity of the FIM
- FAM item
 - Specifically separates swallowing
 - Need for SLT / dietetic involvement.
 - Supplementary feeding
 - ■FIM deals with help required to set up feeds
 - FAM deals with proportion of oral / enteral feeding

Swallowing includes:

The ability to eat a regular diet by mouth

At level 7

- Complete independence
 - Eats a regular oral diet of choice
 - Including managing all consistencies
 - In a reasonable amount of time
 - Performs independently and safely

Swallowing - level 6

- Modified independence
- Pt takes all nourishment by mouth
- May require one or more of the following:
 - Devices / strategies to clear food
 - Eg multiple swallows
 - If requires modified consistency
 - Chooses and prepares these themselves
 - Takes more than a reasonable amount of time
 - There are concerns for safety
 - Eg choking

Swallowing - level 5

- Supervision or set up
 - No hands-on help
- Takes all nourishment by mouth
- Help may be required for:
 - Modified consistency
 - Making appropriate food choices
 - eg pureed diet
 - Verbal cueing / coaxing
 - Reminding to slow down
 - Supervision for safety

Swallowing levels 4, 3, and 2

- Level 4 minimal assistance
 - Patient provides >75% of the effort eg
 - Takes primary nourishment by mouth
 - Minimal contact to control speed of intake
- Level 3 moderate assistance
 - Patient provides more than half of the effort eg
 - Takes some nourishment by mouth
 - And/or moderate assistance to control speed of intake
- Level 2 maximal assistance
 - Patient provides less than half of the effort eg
 - Unable to receive adequate nourishment by mouth
 - Primary nutrition from tube feeding
 - Oral feeding is limited and/or requires maximal assistance
 - But still provides >25% of the effort

Swallowing - level 1

- Total assistance
 - Unable to take anything by mouth
 - All nutrition provided by tube feeding

Vignette – Swallowing

David has one soft meal a day, which he manages safely, but gets his fluids and most of his nutrition through his PEG.

- Score 2
 - Maximal assistance
 - Score lowest performance,
 - i.e. PEG but not unable to take anything

Grooming

Grooming includes:

- Five main tasks:
 - 1. Oral care (cleaning teeth / dentures)
 - 2. Hair grooming
 - 3. Washing hands
 - 4. Washing face
 - 5. Shaving or applying make-up (if applicable)
- Exclusions:
 - The following are excluded from the FIM+FAM
 - Hair washing
 - Flossing teeth
 - Applying deodorant
 - Shaving legs

- Complete independence
 - Patient finds own equipment
 - Cleans his/her teeth or dentures
 - Combs or brushes his/her hair
 - Washes his/her face and hands
 - May shave or apply make-up
 - ■including all preparations.
 - Performs independently and safely
 - Without the use of any assistive devices.

- Modified independence
- Pt requires one or more of the following:
 - An assistive device
 - ■E.g. modified handle on toothbrush
 - Orthotic applied by the patient themselves
 - Takes more than a reasonable amount of time
 - There are concerns for safety
 - E.g. risk of cutting whilst shaving

(An electric razor or toothbrush are not an assistive devices in this context, as many use these anyway)

- Supervision or set up
 - No hands-on help
- Help may be required for:
 - Set up eg
 - Laying out toiletries
 - Putting toothpaste on brush
 - Applying an orthosis
 - Verbal cueing / coaxing
 - Prompting to sequence the task
 - Supervision for safety

Grooming levels 4, 3, and 2

- Level 4 minimal assistance
 - Patient provides 75% or more of the effort eg
 - Requires help for just one of the 5 tasks
- Level 3 moderate assistance
 - Patient provides more than half of the effort eg
 - Eg completes at least two of the grooming tasks themselves
 - Or more than half of each task
- Level 2 maximal assistance
 - Patient provides less than half of the effort eg
 - Eg completes one of the grooming tasks themselves
 - Or less than half of each task
 - But still provides >25% of the effort

- Total assistance
 - Patient completes less than 25% the task
 - Helper provides >75% of the effort
- All grooming tasks done for them
- OR requires two helpers
 - Eg due to behavioural problems

Conundrums – grooming

- Hair styling:
 - Elsie can brush her own hair
 - ■But likes to wear it in a pony-tail
 - And requires help for this
 - Score what she <u>does</u> on a daily basis
 - If she has help and wears it up Score 4
 - If no help available and wears it down score 7

Vignette - grooming

John is able to wash his hand and face, once soap is put in his hands, and will hold the electric toothbrush in his mouth. The nursing staff shave him, comb his hair and clean his back teeth for him

Score 3

- Moderate independence
 - Completes 2/5 tasks with set-up, but 3 tasks are done for him
 - He contributes less than half, but >25% of the effort

Bathing

Bathing includes:

- Bathing the body
 - From the neck down (excluding the back)
 - Includes washing, rinsing and drying
 - May be either tub, shower or bed bath
- The body is divided into 10 areas
 - See next slide

- Exclusions:
 - Back, hair, face. hands see next slide

The 10 bathing tasks

	Included in bathing	Excluded
1	■ Left arm	Excluded from FIM altogether:
2	■ Right arm	■ Neck
3	■ Chest	■ Back
4	Abdomen	■ Hair
5	■ Front perineal area	
6	■ Back perineal area (buttocks)	Included in grooming:
7	Left upper leg	■ Face
8	Right upper leg	Hand
9	Left lower leg, including foot	■Teeth
10	Right lower leg, including foot	

- Complete independence
 - Patient washes, rinses and dries their body
 - Excluding the back
 - Performs independently and safely

- Modified independence
- Pt requires one or more of the following:
 - An assistive device
 - E.g. hand held shower
 - Orthotic applied by the patient themselves
 - Takes more than a reasonable amount of time
 - There are concerns for safety
 - ■E.g. scalding self

(A shower chair/bath seat is not an assistive device for bathing - this is rated in Tub/shower transfers)

- Supervision or set up
 - No hands-on help
- Help may be required for:
 - Set up eg
 - Laying out bathing items
 - Turning on taps adjusting water temperature
 - Applying an orthosis
 - Verbal cueing / coaxing
 - Prompting to sequence the task
 - Supervision for safety

Bathing levels 4, 3, and 2

- Level 4 minimal assistance
 - Patient provides 75% or more of the effort eg
 - Requires help for just 1-2 body areas
- Level 3 moderate assistance
 - Patient provides more than half of the effort eg
 - Requires help for just 3-5 body areas
- Level 2 maximal assistance
 - Patient provides less than half of the effort eg
 - Requires help for just 6-7 body areas
 - But still provides >25% of the effort

- Total assistance
 - Patient completes less than 25% the task
 - Helper provides >75% of the effort
- All bathing tasks done for them
 - Or washes just 1-2 areas
 - Refuses to bath

OR requires two helpers

Conundrums – bathing

- Who runs the water:
 - Gary forgets to check the temperature of the bath before climbing in
 - Risk of scalding
 - Score what he <u>does</u> on a daily basis
 - If someone runs and checks the bath Score 5
 - If no help available and takes this risk Score 6
- Missing limb
 - John has below-knee amputation
 - Does not have complete body to wash ? Mark him down?
 - No he does not have it, so does not need help to wash it
 - Only rate on the body parts that he does have

Vignette - bathing

Hilda can manage everything except washing and drying her good arm, bottom and feet.

- Score 3
 - Moderate assistance
 - Does more than half
 - ■But needs help for more than 1-2 areas

Dressing – upper body

Dressing upper body includes:

- Finding the clothes
 - Fetching them from where they are stored
- Dressing and undressing above the waist,
 - In clothing suitable to be worn in public
- Donning or removing a prosthesis/orthosis
 - when applicable
- The AROC manual
 - Divides the dressing tasks into individual steps
 - Not necessarily recommended, but may be helpful
 - Especially if team wish to undertake online tests from AROC

AROC - The UB dressing steps

Item of clothing	No of steps	Steps
Bra back fasten	3	Thread L arm, thread R arm, hook
Bra front fasten	4	Fasten, swivel, thread L arm, thread R arm,
Vest	4	Thread L arm, R arm, over head, pull down
T shirt	4	Thread L arm, R arm, over head, pull down
Cardigan	4	Thread L arm, pull round, thread R arm, button
Pullover	4	Thread L arm, R arm, over head, pull down

- Observe how many steps are involved
- Count how many are carried out by pt
- And how many by helper

Upper body dressing - level 7

- Complete independence
 - Dresses and undresses above the waist,
 - Including obtaining clothing from the drawer/closet,
 - Manages bra, pullover garment.
 - Including buttons, zips and other fastenings
 - Dons and removes orthosis
 - Where applicable.
 - Performs independently and safely.

Upper body dressing - level 6

- Modified independence
- Pt requires one or more of the following:
 - An assistive device
 - Eg button hook or reaching aid
 - Orthotic applied by the patient themselves
 - Takes more than a reasonable amount of time
 - There are concerns for safety
 - Eg falling

Upper body dressing - level 5

- Supervision or set up
 - No hands-on help
- Help may be required for:
 - Set up eg
 - Laying out clothes
 - Applying an orthosis
 - Verbal cueing / coaxing
 - Prompting to sequence the task
 - Supervision for safety

UB dressing levels 4, 3, and 2

- Level 4 minimal assistance
 - Patient provides 75% or more of the effort eg
 - Requires incidental help only eg fastenings
 - Or help with just 1-3 steps (assuming 12 steps)
- Level 3 moderate assistance
 - Patient provides more than half of the effort eg
 - Requires help for just 4-6 steps
- Level 2 maximal assistance
 - Patient provides less than half of the effort eg
 - Requires help for just >6 steps
 - But still provides >25% of the effort

UB dressing - level 1

- Total assistance
 - Patient completes less than 25% the task
 - ■Helper provides >75% of the effort
- All dressing tasks done for them
 - Or performs just 1-2 steps
- OR requires two helpers

Conundrums – Dressing 1

- John can dress himself independently in a T-shirt and joggers
 - But needs help to put a suit and tie on
- What does he actually do
 - Does he wear casual clothes on a day-to day basis?
 - Or does he in fact put a suit and tie on to go to work?
 - If he wears on suit only on some days
 - Rate on the clothing that he wears most often

Condundrums - Orthoses

- Donning orthosis
 - Part of dressing
- Score 7
 - If can do this independently
- If orthosis is then needed to complete task
 - Score 6, if patient applies it themselves
 - Score 5, if a helper applies it for them

Vignette – Upper body dressing

John needs help with the splint for his right hand, but is then independent in all dressing.

- Score 5:
 - Orthosis for set-up

Dressing – lower body

Dressing lower body includes:

- Finding the clothes
 - Fetching them from where they are stored
- Dressing and undressing above the waist,
 - In clothing suitable to be worn in public
- Donning or removing a prosthesis/orthosis
 - when applicable
- The AROC manual
 - Divides the dressing tasks into individual steps
 - Not necessarily recommended, but may be helpful
 - Especially if team wish to undertake online tests from AROC

AROC - The LB dressing steps

Item of clothing	No of steps	Steps
Underpants	3	Thread L leg, thread R leg, pull up
Trousers	4	Thread L leg, thread R leg, pull up, fasten
Track-pants	3	Thread L leg, thread R leg, pull up
Belt	2	Thread, fasten
Track-pants	3	Thread L leg, thread R leg, pull up
Socks	2	L sock. R sock
Shoes	4	L shoes, L laces, R shoe, R laces

- Observe how many steps are involved
- Count how many are carried out by pt
- And how many by helper

Lower body dressing - level 7

- Complete independence
 - Dresses and undresses below the waist,
 - Including obtaining clothing from the drawer/closet
 - Manages pants, belts, trousers/skirt, footwear.
 - Including buttons, zips and other fastenings
 - Dons and removes orthosis
 - Where applicable.
 - Performs independently and safely.

Lower body dressing - level 6

- Modified independence
- Pt requires one or more of the following:
 - An assistive device
 - Eg button hook or reaching aid
 - Orthotic applied by the patient themselves
 - That is also used for dressing
 - Takes more than a reasonable amount of time
 - There are concerns for safety
 - Eg falling

Lower body dressing - level 5

- Supervision or set up
 - No hands-on help
- Help may be required for:
 - Set up eg
 - Laying out clothes
 - Applying an orthosis
 - Verbal cueing / coaxing
 - Prompting to sequence the task
 - Supervision for safety

LB dressing levels 4, 3, and 2

- Level 4 minimal assistance
 - Patient provides 75% or more of the effort eg
 - Requires incidental help only eg fastenings
 - Or help with just 1-3 steps (assuming 12 steps)
- Level 3 moderate assistance
 - Patient provides more than half of the effort eg
 - Requires help for just 4-6 steps
- Level 2 maximal assistance
 - Patient provides less than half of the effort eg
 - Requires help for just >6 steps
 - But still provides >25% of the effort

LB dressing - level 1

- Total assistance
 - Patient completes less than 25% the task
 - ■Helper provides >75% of the effort
- All dressing tasks done for them
 - Or performs just 1-2 steps
- OR requires two helpers

Vignette – Lower body dressing

Paul can mange his own underpants, and can put on his trousers except for the fastenings, but needs help with his shoes and socks

- Score 3 (or 2)
 - He can do approximately half
 - Grey case:
 - The scoring team may be divided about whether this is more or less than half
 - If in doubt, score to the lower

Toileting

Toileting

- Four different items
 - Address different aspects of toileting
 - 6: Toileting
 - Bottom -Wiping and adjusting clothing, managing sanitary towels etc
 - 8. Bladder management
 - Control of voiding
 - Frequency of bladder accidents
 - 9. Bowel management
 - Control of bowels
 - Frequency of bowel accidents
 - 11. Toilet transfers
 - Getting on and off the toilet

Toileting includes:

- For bladder or bowels: 3 steps
 - 1. Adjusting clothing before toilet use
 - Including belts, zip and fastenings
 - 2. Perineal hygiene bottom wiping
 - Including managing sanitary towels and tampons if applicable
 - 3. Adjusting clothing before toilet use
 - Including belts, zip and fastenings

(Does not include getting on or off toilet or continence issues)

- Complete independence
 - Cleanses self after bladder and bowel emptying
 - Adjusts clothing
 - before and after using toilet / bedpan / bottle.
 - Applies sanitary towels / tampons if applicable.
 - Performs independently and safely.

- Modified independence
- Pt requires one or more of the following:
 - An assistive device
 - Eg button hook or reaching aid
 - Orthotic applied by the patient themselves
 - Takes more than a reasonable amount of time
 - There are concerns for safety
 - Eg falling, poor hygiene

- Supervision or set up
 - No hands-on help
- Help may be required for:
 - Set up eg
 - Handing patient toilet paper / bottom wiper
 - Set-up of sanitary towels / tampons etc
 - Verbal cueing / coaxing
 - Prompting to sequence the task
 - Supervision for safety

Toileting levels 4, 3, and 2

- Level 4 minimal assistance
 - Patient provides 75% or more of the effort eg
 - Requires incidental help only eg fastenings
 - Or steadying while patient wipes and pulls up pants
- Level 3 moderate assistance
 - Patient provides more than half of the effort eg
 - Patient completes 2 of the 3 steps
- Level 2 maximal assistance
 - Patient provides less than half of the effort eg
 - Patient completes 2 of the 3 steps
 - But still provides >25% of the effort

- Total assistance
 - Patient completes less than 25% the task
 - Helper provides >75% of the effort
- All toileting tasks done for them

OR requires two helpers

Vignette – Toileting

Chris can wipe herself after a wee, but needs everything else done for her.

- Score 1
 - Does less than 25%

Bladder and Bowel management

Bladder management includes:

- Complete intentional control of the bladder
- If necessary with use of
 - Devices / equipment
 - Medication

- Two parts
 - Level of assistance
 - Frequency of urinary accidents
 - Note: US and Australian/UK manuals differ in their rating of the frequency of accidents

- Complete independence
 - Pt controls bladder completely and intentionally
 - No equipment of agents are required

- Modified independence
- Pt requires one or more of the following:
 - An assistive device
 - ■Bed-pan, urinal, catheter, pads, incontinence garments
 - Patient obtains and uses these independently
 - If has catheter
 - Instills and irrigates this independently
 - Cleans and sterilises all equipment
 - Medication to control bladder
 - Takes this independently

- Supervision or set up
 - No hands-on help
- Help may be required for:
 - Set up eg
 - Bringing bed-pan / urinal and emptying it
 - Verbal cueing / coaxing
 - Prompting to change pads
 - Supervision
 - ■To self catheterise

Level of assistance Levels 4, 3, and 2

- Level 4 minimal assistance
 - Patient provides 75% or more of the effort eg
 - Requires minimal contact assistance
 - To position bedpan or place penis in urinal at start
- Level 3 moderate assistance
 - Patient provides more than half of the effort eg
 - Helper positions and holds device throughout task
- Level 2 maximal assistance
 - Patient provides less than half of the effort eg
 - Patient makes some effort at control eg calls for bed pan
 - But still provides >25% of the effort

- Total assistance
 - Patient completes less than 25% the task
 - ■Helper provides >75% of the effort
 - All bladder management tasks done for them
 - Or patient is unaware of the need to void

- (If does not void at all score 7)
 - (eg anuric patient on haemodialysis))

Frequency of bladder accidents

- Bladder accidents
 - "Wetting of linen or clothing with urine"
 - Includes leakage from catheter
 - And spills from bed-pan or urinal
 - Note: 'Accidents' different from 'incontinence'
 - ■Patient may be incontinent but not have accidents
 - (eg has in-dwelling catheter which never leaks)
- Level 7
 - Is never incontinent
 - No equipment or agents are required

Frequency of accidents (UK version)

Level	Frequency of bladder accidents
6	Assistive device (eg catheter) that never leaks
5	Occasional accidents – less than fortnightly
	(eg every 3-4 weeks)
4	Occasional accidents – less than weekly
	(eg every 10-14 days)
3	Occasional accidents – less than daily
	(eg every 2-3 days)
2	Wet almost every day
1	Wet several times a day

Frequency of accidents (US version)

Level	Frequency of bladder accidents
6	Assistive device (eg catheter) that never leaks
5	1 accident in the last 7 days
4	2 accidents in the last 7 days
3	3 accidents in the last 7 days
2	4 accidents in the last 7 days
1	5 or more accidents in the last 7 days

Vignette – Bladder management

■ If a bottle is left within reach, Terry can use it without help. However, he frequently ignores the need to urinate if he is occupied with an activity, so is wet once or twice most days.

- Combined score 2
 - Score 5 for bladder management
 - But 2 for incontinence (UK and AROC manual)
 - Lower score on frequency of incontinence

Bowel management

Bowel management includes:

- Complete intentional control of the bowela
- If necessary with use of
 - Devices / equipment
 - Medication

- Two parts
 - Level of assistance
 - Frequency of faecal accidents
 - Note: US and Australian/UK manuals differ in their rating of the frequency of accidents

- Complete independence
 - Pt controls bowels completely and intentionally
 - No equipment of agents are required

- Modified independence
- Pt requires one or more of the following:
 - An assistive device
 - ■Bed-pan, pads, incontinence garments
 - Patient obtains and uses these independently
 - If has colostomy
 - Manages this independently
 - Medication to control bowels
 - Takes this independently
 - Including placing suppositories

- Supervision or set up
 - No hands-on help
- Help may be required for:
 - Set up eg
 - Bringing bed-pan and emptying it
 - Verbal cueing / coaxing
 - Prompting to change pads
 - Supervision
 - ■To manage colostomy

Level of assistance Levels 4, 3, and 2

- Level 4 minimal assistance
 - Patient provides 75% or more of the effort eg
 - Requires minimal contact assistance
 - To position bedpan at start
- Level 3 moderate assistance
 - Patient provides more than half of the effort eg
 - Helper positions and holds device throughout task
- Level 2 maximal assistance
 - Patient provides less than half of the effort eg
 - Patient makes some effort at control eg calls for bed pan
 - But still provides >25% of the effort

- Total assistance
 - Patient completes less than 25% the task
 - Helper provides >75% of the effort
 - All bowel management tasks done for them
 - Or unaware of the need to defaecate

Frequency of bowel accidents

- Bowel accidents
 - "Soiling of linen or clothing with faeces"
 - Includes leakage from colostomy
 - And spills from bed-pan

- Level 7
 - Is never incontinent
 - No equipment or agents are required

Frequency of accidents (UK version)

Level	Frequency of bowel accidents
6	Assistive device (eg colostomy) that never leaks
5	Occasional accidents – less than fortnightly
	(eg every 3-4 weeks)
4	Occasional accidents – less than weekly
	(eg every 10-14 days)
3	Occasional accidents – less than daily
	(eg every 2-3 days)
2	Soiled almost every day
1	Soiled several times a day

Frequency of accidents (US version)

Level	Frequency of bowel accidents
6	Assistive device (eg colostomy) that never leaks
5	1 accident in the last 7 days
4	2 accidents in the last 7 days
3	3 accidents in the last 7 days
2	4 accidents in the last 7 days
1	5 or more accidents in the last 7 days

Vignette – Bowel management

Clare is occasionally incontinent of faeces (2-3 times a week) if she doesn't give enough warning to be put on the toilet, because she can't hold on for very long or if she is being moved quickly.

- Score 3
 - Occasional accidents every 2-3 days
 - Score based just on incontinence
 - as information regarding assistance is not given

Transfers and Locomotion

Transfers and locomotion

- Transfers
 - Bed / chair / wheelchair
 - Toilet / commode
 - Bath / shower
 - Car (FAM item)
- Locomotion
 - Walking / wheelchair
 - Stair
 - Community mobility (FAM item)

Transfers include

- If walking:
 - Transfers include
 - Approaching (eg bed/ chair)
 - Sitting / lying
 - Return to standing
- If in a wheelchair:
 - Transfers include
 - Approaching (eg bed/ chair)
 - Prepares for transfer (applies brakes, lists foot and arm rests)
 - Transfer (pivot, slide, standing)
 - Sitting / lying
 - Return to chair

Bed / chair / wheelchair transfers

- Level 7: Complete independence
 - Walking
 - Approaches, sits down on and gets up from a regular chair
 - Transfers from bed to chair and back again.

- If in a wheelchair:

- Approaches bed or chair,
- Locks brakes, lifts foot rests, lifts arm rests if necessary
- Performs either a standing pivot or a sliding transfer and returns
- Performs independently and safely.

Bed/chair transfers - level 6

- Modified independence
- Pt requires one or more of the following:
 - An assistive device
 - ■Eg a sliding board, grab rails
 - Takes more than a reasonable amount of time
 - There are concerns for safety
 - Eg falling
 - NB in this instance a wheelchair is not a device,
 - but a sliding board is

Bed/chair transfers - level 5

- Supervision or set up
 - No hands-on help
- Help may be required for:
 - Set up eg
 - ■To apply brakes, lift arm rests etc
 - Apply orthosis
 - Place device eg sliding board
 - Verbal cueing / coaxing
 - Prompting to sequence the task
 - Supervision for safety

Bed/chair transfers levels 4, 3, and 2

- Level 4 minimal assistance
 - Patient provides 75% or more of the effort eg
 - Requires incidental help only eg contact guarding
 - No more help than touching
- Level 3 moderate assistance
 - Patient provides more than half of the effort eg
 - Helper takes some weight eg lifts legs around
- Level 2 maximal assistance
 - Patient provides less than half of the effort eg
 - But still provides >25% of the effort
 - NB Level 2 is rare given current lifting policies
 - if a lot of lifting is involved likely to have 2 helps and so score 1

Bed/chair transfers - level 1

- Total assistance
 - Patient completes less than 25% the task
 - Helper provides >75% of the effort
- All transferring tasks done for them
- Or hoisted / 2 helpers required

Vignette – bed / chair transfers

Terry's footplates have been taken off because he kept trying to transfer with them in place. If they are moved out of the way and his brakes applied for him, he can then transfer on his own.

■ Score 5 – set up

- A bit grey even though his footplates have been taken off he needs his brakes to be applied for him.
 - If he persists in transferring himself without waiting for the brakes to be applied, this would score 6 with consideration for safety
 - But as we do not know which he does, (or it may vary) score to the lower which is 5

Toilet transfers

- Level 7: Complete independence
 - Walking
 - Approaches, sits down on and gets up from a regular toilet
 - From within the toilet room
 - (NB: Does not include walking to the toilet room locomotion)

If in a wheelchair,

- Approaches bed or chair,
- Locks brakes, lifts foot rests, lifts arm rests if necessary
- Performs either a standing pivot or a sliding transfer and returns
- Performs independently and safely.

Toilet transfers - level 6

- Modified independence
- Pt requires one or more of the following:
 - An assistive device
 - Eg a sliding board, grab rails
 - Takes more than a reasonable amount of time
 - There are concerns for safety
 - Eg falling
 - NB in this instance a wheelchair is not a device,
 - but a sliding board is

Toilet transfers - level 5

- Supervision or set up
 - No hands-on help
- Help may be required for:
 - Set up eg
 - ■To apply brakes, lift arm rests etc
 - Apply orthosis
 - Place device eg sliding board
 - Verbal cueing / coaxing
 - Prompting to sequence the task
 - Supervision for safety

Toilet transfers levels 4, 3, and 2

- Level 4 minimal assistance
 - Patient provides 75% or moreof the effort eg
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 - Patient provides less than half of the effort eg
 - But still provides >25% of the effort
 - NB rare given current lifting policies
 - if a lot of lifting is involved likely to have 2 helps and so score 1

Toilet transfers - level 1

- Total assistance
 - Patient completes less than 25% the task
 - Helper provides >75% of the effort
- All transferring tasks done for them
- Or hoisted / 2 helpers required

Toilet transfers - conundrums

- Use of mobile commode
 - If patent self-propels to position over toilet
 - Score 6
 - If helper pushes pt over toilet
 - Score 1
 - If uses only bed-pan / urinal / catheter
 - And never transferred to toilet / commode
 - Score 0

Vignette – toilet transfers

Clare is transferred from wheelchair to commode with a sliding board and help of 1 or 2 people.

- Score 1
 - Needs 2 people, at least for some of the time
 - Does less than 25% herself

Tub/shower transfers

- Exactly the same principle as for toilet
 - Includes all aspects of getting into and out of a bath or shower stall
 - But not getting to the bath/shower room
- If uses mobile shower chair
 - Patient self-propels into shower area
 - Score 6
 - If helper pushes into shower area
 - Score 1

Vignette – Tub/shower transfers

Phil needs firm steadying as he transfers into the bath as he often lurches forwards and his hand misses the edge of the bath. His carer holds him still until he has grasped the edge safely.

Score 3

- Does ore than half the work
- Still more than just touching

Car transfers (FAM item)

- Includes
 - Approaching car from pavement
 - Unlocking and opening car door
 - Transferring onto car seat
 - Fastening seat belt
- If uses wheelchair
 - Stowing wheelchair
- At level 7
 - Pt does all these independently and safely
 - Within a reasonable time

Car transfers

Level	Description
6	Independent with a device Or considerations for time and/or safety
5	Standby supervision or set-up only
4	Minimal contact Or help just to load wheelchair
3	Moderate assistance eg lifting legs in
2	Maximal assistance pt provides less than half the effort
1	Total assistance or does not transfer into car

Vignette – Car transfers

■ Clive can transfer in and out of the car unaided, but, until he gets the new car with the wheelchair hoist, needs someone to stow the wheelchair for him.

- Score 4
 - Help with stowing wheelchair

Locomotion

Walking / wheelchair

- FIM
 - Rate preferred mode of locomotion
 - If differ between admission and discharge
 - Rate mode at discharge for both
- UK FIM+FAM
 - Rate and record both
 - At both time points
 - Indicate preferred mode at each time point

- Complete independence
 - Once in a standing position
 - Walks a minimum of 50 m (150 feet)
 - On a level surface
 - In a reasonable time
 - Without help or assistive devices
 - Performs independently ad safely

- Modified independence
- Walks a minimum of 50m
- But requires one or more of the following:
 - An assistive device
 - Eg an orthosis, prosthesis or walking aid
 - Takes more than a reasonable amount of time
 - There are concerns for safety
 - Eg falling

- Exception household ambulation
 - Walks only short distances independently
 - ■at least 15 m (50 ft)
 - With or without an assistive device
- Supervision but no hands-on help
 - To walk a minimum of 50m
 - Help may be required for:
 - Verbal cueing / coaxing
 - Supervision for safety

Walking levels 4, 3, and 2

- Level 4 minimal assistance
 - Patient provides ≥75% of the effort to walk at least 50m
 - Requires incidental help eg contact guarding
 - No leaning on helper
- Level 3 moderate assistance
 - Pt provides > half of the effort to walk at least 50m
 - Helper takes some weight, but pt does more than helper
- Level 2 maximal assistance
 - Patient provides less than half of the effort at least 15 m.
 - Only one helper required
 - Still provides >25% of the effort

- Total assistance
 - Patient contributes <25% of the effort</p>
 - ■To walk a minimum of 15 m
 - Or walks <15m

Or requires 2 helpers

Wheelchair - level 6

- No level 7
 - Max score for wheelchair locomotion is 6
- Level 6: Modified independence
 - Operates a manual or electric wheelchair
 - for a minimum of 50 m on a level surface
 - Manouevres the chair to a table, bed or toilet
 - Negotiates at least a 3% gradient
 - Over rugs and sills
 - May also require an assistive device eg orthosis
 - There may be concerns for time or safety

Wheelchair - level 5

- Exception household ambulation
 - Operate manual or electric wheelchair independently
 - for short distances
 - at least 15 m (50 ft)
- Supervision required No hands-on help
 - To go a minimum of 50m
 - Help may be required for:
 - Verbal cueing / coaxing
 - Supervision for safety

Wheelchair levels 4, 3, and 2

- Level 4 minimal assistance
 - Patient provides >75% of the effort to wheel at least 50m
 - Requires incidental help eg contact guarding
- Level 3 moderate assistance
 - Pt provides > half of the effort to wheel at least 50m
 - Help from one person only
- Level 2 maximal assistance
 - Patient provides less than half of the effort at least 15 m
 - Help from one person only
 - But still provides >25% of the effort

Wheelchair - level 1

- Total assistance
 - Patient contributes <25% of the effort</p>
 - ■To wheel a minimum of 15 m
 - Or requires 2 helpers
 - Or wheels <15m

- UK FIM exception = Score 0
 - Does not have a wheelchair
 - Does not ever use one
 - Walks for all mobility whatever the distance

Vignette – walking/wheelchair

Mary cannot walk very far outside (20 yards down to the end of the drive) but can get around her house without help.

- Score 5
 - Household ambulation

Stairs

- Complete independence
 - Patient goes up and down 1 flight of stairs(12-14 steps)
 - Without any hand rail or support
 - Performs independently and safely

- Modified independence
 - Goes up and down 1 flight of stairs independently
- But requires one or more of the following:
 - An assistive device
 - Eg a hand rail, orthosis, prosthesis or walking aid
 - Takes more than a reasonable amount of time
 - There are concerns for safety
 - Eg falling

- Exception household ambulation
 - Goes up and down 4-6 stairs independently
 - With or without an assistive device
- Supervision but no hands-on help
 - To go up and down a minimum of 12-14 stairs
 - Help may be required for:
 - Verbal cueing / coaxing
 - Supervision for safety

Stairs levels 4, 3, and 2

- Level 4 minimal assistance
 - Patient provides 75% or more of the effort to go up/down 12-14 stairs
 - Requires incidental help eg contact guarding
 - No leaning on helper
- Level 3 moderate assistance
 - Pt provides > half of the effort to go up/down 12-14 stairs
 - Helper takes some weight, but pt does more than helper
- Level 2 maximal assistance
 - Patient provides less than half of the effort to go up/down
 4-6 stairs
 - Requires one helper only
 - Still provides >25% of the effort

- Total assistance
 - Patient contributes <25% of the effort</p>
 - ■To go up and down 4-6 stairs
 - Or goes up and down fewer than 4 stairs

Or requires 2 helpers

Vignette – stairs

Pete takes care going up and down the stairs, but he is quite safe and does it quite quickly.

- Score 7
 - Independent
 - Performs safely
 - Within a reasonable amount of time

Community Mobility

FAM item

Community Mobility includes

- Organizing and managing personal travel within the community:
 - planning a route, time management, paying fares
- Using some form of public transport
 - (taxi, bus, underground or train)
- Or driving a car
- Getting around in the locality
 - on foot or in a wheelchair
 - including managing kerbs, crowds, escalators/lifts, road crossings, etc
- Note: Car transfers are assessed separately
 - including loading/unloading wheelchair

- Complete independence
 - Patient uses some form of public transport
 - ■OR drives a car
 - OR uses normal taxi services from choice
 - Rather than necessity
 - Gets around in the locality
 - Fully independently and safely

- Modified independence
- Requires one or more of the following:
 - An adaptive device / strategies eg
 - Modified car
 - Keeps trips short due to rest periods
 - Limited to certain taxi services
 - (eg Wheelchair adapted or using Taxicard)
 - Takes more than a reasonable amount of time
 - There are concerns for safety
 - Eg getting lost

- Supervision or set-up but no hands-on help
 - Needs only supervision or set-up at the start of the journey
 - Eg to help plan the journey
 - Or to buy ticket in advance
 - Then manages independently

Community mobility - levels 4, 3, and 2

- Level 4 minimal assistance
 - Requires help at both ends of journey
 - Eg to be put on a bus and met at the other end
 - Cannot score >4 if travels by car and requires help for car transfers
- Level 3 moderate assistance
 - Requires constant presence of someone in community
 - Eg to help with kerbs, avoid obstacles
 - But is still able to do more than half the task themselves
- Level 2 maximal assistance
 - Able to contribute to some of the tasks in getting around
 - But needs help for more than half
 - Only one helper required

- Total assistance
 - Patient contributes <25% of the effort</p>
 - To getting around in the community
 - Or requires 2 helpers
 - Or unable to move around in the community

Vignette – Community Mobility

- Mark found a number and called a taxi to take him home from the hospital.
 - However, he was unable to tell the driver where to go because he could not remember his new address or the route there.
 - Also, he had not thought to take any money with him and had not rung his Mum to say he was coming.
 - The taxi driver refused to take him.
- Score 1
 - Effectively it did not happen!
 - ■The only thing he did was to call the taxi