The UK FIM+FAM
(Functional Assessment Measure)

Developed by the
UK FIM+FAM Users Group
Version 2.2
Modified 23.10.10

FAM ITEMS ONLY

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(Adapted from the US version of the FAM, originally developed by Dr Karyl Hall and colleagues, Santa Clara Valley Medical Center, San Jose California, 1994)
Introduction

The Functional Independence Measure (FIM) is an 18-item global measure of disability. Each item is scored on 7 ordinal levels. The FIM can be used for measuring disability in a wide range of conditions.

The Functional Assessment Measure does not stand alone but adds 12 FAM items to the FIM, specifically addressing cognitive and psychosocial function, which are often the major limiting factors for outcome in brain injury. Hence the Functional Assessment Measure is abbreviated to (FIM+FAM)

FAM items are rated on the same 7-level scale as the FIM items although the scaling structure of the FIM does not always lend itself to the more abstract nature of the FAM items.

The original FAM items were developed by Santa Clara Valley Medical Center (SCVMC), San Jose, California. However there were a number of problems for extrapolation to the UK settings:
1. Many items were written in US terms not easily transferable to UK settings
2. Some items were found to be too vague and subjective to score in routine practical use

In 1996 the UK FIM+FAM users group set about adapting the FAM items to produce a UK version. The UK FIM+FAM keeps the 7-level structure, but was adjusted to improve the objectivity of scoring, especially for the more subjective items. This work has been undertaken in collaboration with SCVMC.

The FIM+FAM is designed for measuring disability in the brain-injured population. The FIM data can be extracted and used on its own, for example when making comparison with populations in which only the FIM is rated.

For this reason it is important to score the FIM items as for the stand-alone scale, and the FAM items as an add-on. Certain items contain overlapping information.

For example:
“Eating” is a FIM item and includes swallowing, while “swallowing” alone is a FAM item. Eating should still be rated on the basis that it includes swallowing, so that the integrity of the FIM score is maintained.

Similarly, “Expression” is a FIM item, and includes speech intelligibility (articulation, voice modulation etc..), while “Speech intelligibility” is also rated alone as a FAM item

Update of FIM manual

The original UK FIM+FAM (Version 1) used version 4 of the FIM manual.

In this updated edition (UK FIM+FAM version 2), the FIM items have been adjusted to align them with the FIM version 5, which is the version currently in use by the Australasian Rehabilitation Outcomes Centre (AROC).

The AROC training manual provides a more systematised approach to scoring, breaking down items into component tasks to determine the % of task completed by the patient.
Basic scoring principles

1. Function is assessed by clinicians on the basis of direct observation. This requires the raters to be familiar with the patient and the standards for rating are:
   - **Admission:** Within 10 working days of admission date (may be adjusted for short programmes / community)
   - **Discharge:** During the last week before discharge

2. Scoring is undertaken by a multi-disciplinary team. There are several different models for team scoring. When the team is new to the scale, it is often most instructive to score from scratch as a team, one team member acting as facilitator to read out the questions in the decision tree until an agreed score is reached. As users become more familiar, time may be saved by dividing items among the team, and each team member rating their items prior to meeting for discussion.
   
   If there is disagreement amongst the team when scoring any item - the lower score is taken.

3. The FIM+FAM is essentially a rating of independence (and conversely the amount of help an individual has) for basic daily activities.
   
   The person is scored on what they actually do, on a day-to-day basis, not what they could do or might be able to do, in different circumstances.
   
   The FIM rating is therefore dependent on the environment, which may or may not be disability-friendly

4. Do not:
   - Leave any score blank or enter N/A - score 1 if unable to assess
   - Score in half points - use the lower score

5. The person scores 1 if:
   - They do not perform the activity at all
   - If help from 2 people is needed
   - If they would be put at risk of injury if tested
   - If the information is simply not available

(Note – the US system allows a score ‘0’ for some FIM items on admission only
This is because of their tight timescale for assessment (within 48 hours of admission)
The Australian and UK systems do not record any ‘0’ scores - except the UK allows a ‘0’ for wheelchair locomotion only if a wheelchair is never used at all and so not applicable.
This does not impact on the total scores as Wheelchair Mobility is an alternate item to walking.
Anyone wishing to understand how this manual compares with the US system may contact the Regional Rehabilitation Unit at Northwick Park Hospital - we can provide a manual which explains the differences.

6. Two instructions differ from the original FIM manual for the UK FIM+FAM:
   - For locomotion: record for both wheelchair (if applicable) and walking at each time point. Record the preferred mode on the score sheet.
   - For bladder and bowel management - record both the level of assistance and the frequency of incontinence

7. Use the decision trees and then check the level description with the notes at the bottom of the page to ensure the score is correct.

8. If function is variable for a given item, score the lower.
Description of the levels or function

INDEPENDENT  Another person is not required for the activity (No helper)

7  Complete independence
   The person performs all of the tasks described as making up the activity within a reasonable amount of time, and does so safely without the need for modification, assistive devices or aids.
   (No help, no devices, safe and timely!)

6  Modified independence
   One or more of the following may be true:
   a) uses an assistive device
   b) takes longer than the reasonable amount of time
   c) there is some concern for safety
   (No help, but uses a device, or issues for safety or timeliness)

DEPENDENT  Receives help from another person to perform the activity, or the activity is not performed (Requires helper)
   (Rating is based on observation. Therefore ‘Requires help’ means ‘Has help’)

Modified Dependence: The person performs more than half the task themselves

5  Supervision or set-up
   Receives no more than stand-by cueing, coaxing or verbal prompting without physical contact,
   OR help just to set-up equipment, apply orthosis, etc.
   (No help, but set-up or verbal prompting)

4  Minimal assistance
   No more help than touching
   Receives incidental help only to complete the task - does ≥75% themselves
   (Help at the level of touching only – Madonna item!)

3  Moderate assistance
   More help than touching
   Receives moderate help, but still performs 50-74% of the task themselves
   (Hands on help but patient does more than half the task themselves)

Complete Dependence: The person performs less than half the task

2  Maximal assistance
   Receives substantial assistance - the person provides 25-49% of the effort to complete the task
   (Patient does less than half the task themselves, but does contribute)

1  Total assistance
   Receives total assistance - the person contributes less than 25% of the effort or the activity is not performed
   Patient unable or does very little (<25%) of the task
1. GENERAL DESCRIPTION OF ITEMS

Item includes:
- Various components included in the task.

At level 7, the person:
Description of complete independence.

Start at the top left hand corner
Follow the tree down

Does (name) receive help to perform this task?

No

Does (name) use an assistive device
Or does (name) take more than a reasonable time
Or is there a concern for safety?

No

SCORE 7
COMPLETE INDEPENDENCE

Yes

SCORE 6
MODIFIED INDEPENDENCE

Does (name) provide half or more of the effort for the task?

Yes

Does (name) receive only supervision, cueing/coaxing
Or help just with set up or to apply an orthosis?

Yes

SCORE 5
SUPERVISION OR SET-UP

No

No

Does (name) receive total assistance
Or does not perform the activity at all?

No

Does (name) receive only incidental assistance?

Yes

SCORE 1
TOTAL DEPENDENCE

No

SCORE 2
MAXIMAL ASSISTANCE

No

SCORE 3
MODERATE ASSISTANCE

Yes

SCORE 4
MINIMAL ASSISTANCE

NOTES
Level 7: Complete independence: Performs independently and safely.
Level 6: Modified independence: Uses an assistive device, or there is consideration for time / safety.
Level 5: Supervision or set-up: Receives only cueing or coaxing but no physical contact - or help just with set-up.
Level 4: Minimal assistance: Receives incidental help but performs 75% or more of the task themselves.
Level 3: Receives moderate assistance: but still performs more than half the task themselves (50-74%).
Level 2: Maximal assistance: provides less than half of the effort to complete the task (25-49%).
Level 1: Receives total assistance - contributes less than 25% of the effort. Or does not perform the activity at all.
<table>
<thead>
<tr>
<th>FIM/FAM Items</th>
<th>Admission</th>
<th>Goal</th>
<th>Discharge</th>
</tr>
</thead>
<tbody>
<tr>
<td>Date</td>
<td></td>
<td></td>
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<tr>
<td>Date of FAM Assessment</td>
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</tbody>
</table>

<table>
<thead>
<tr>
<th>Motor items</th>
<th>Admission</th>
<th>Goal</th>
<th>Discharge</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. Eating</td>
<td></td>
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<tr>
<td>2. Swallowing</td>
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<td>3. Grooming</td>
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<td>4. Bathing</td>
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<tr>
<td>5. Dressing Upper Body</td>
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<td>6. Dressing Lower Body</td>
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<tr>
<td>7. Toileting</td>
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<tr>
<td>8(i) Bladder - Level of assistance</td>
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<td>8(ii) Bladder - Frequency of accidents</td>
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<tr>
<td>9(i) Bowel - Level of assistance</td>
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<tr>
<td>9(ii) Bowel - Frequency of accidents</td>
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<tr>
<td>10. Bed, Chair, Wheelchair transfer</td>
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<td>11. Toilet transfer</td>
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<tr>
<td>12. Tub, Shower transfer</td>
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<tr>
<td>13. Car transfer</td>
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<tr>
<td>14(i) Locomotion - Walking &quot;w&quot;</td>
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<tr>
<td>14(ii) Locomotion - Wheelchair &quot;c&quot;</td>
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<tr>
<td>Preferred mode of Locomotion (w or c)</td>
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<tr>
<td>15. Stairs</td>
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<tr>
<td>16 Community Mobility</td>
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<tr>
<td>Preferred mode: c=car, t=taxi, p=public transport</td>
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</tbody>
</table>

**Total Scores:**

- Self care (7-49)
- Bladder/Bowels (2-14)
- Locomotion (7-49)
- Total Motor Subscore (16-112)
## FIM + FAM score sheet: part 2

<table>
<thead>
<tr>
<th>FIM/FAM Items</th>
<th>Admission</th>
<th>Goal</th>
<th>Discharge</th>
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<tbody>
<tr>
<td><strong>Cognitive items</strong></td>
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<tr>
<td>17 Comprehension</td>
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<td>18 Expression</td>
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<td>19. Reading</td>
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<td>20. Writing</td>
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<td>21. Speech Intelligibility</td>
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<td>22. Social Interaction</td>
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<tr>
<td>23. Emotional Status</td>
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<td>24. Adjustment to Limitations</td>
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<td>25. Leisure Activities</td>
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<tr>
<td>26. Problem Solving</td>
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<td>27. Memory</td>
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<td>28. Orientation</td>
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<td>29. Concentration</td>
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<tr>
<td><strong>30. Safety Awareness</strong></td>
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<tr>
<td><strong>Totals</strong></td>
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<tr>
<td>Communication (5-35)</td>
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<tr>
<td>Cognitive/psychosocial (9-63)</td>
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<tr>
<td><strong>Total Cognitive Subscore (14-98)</strong></td>
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<tr>
<td><strong>Additional module</strong></td>
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<tr>
<td><strong>Extended activities of daily living</strong></td>
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<tr>
<td>31. Meal Preparation</td>
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<td>32. Laundry</td>
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<tr>
<td>33. Housework</td>
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<tr>
<td>34. Shopping</td>
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<tr>
<td>35. Home Finances</td>
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<tr>
<td>36. Work / Education</td>
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<tr>
<td><strong>Total EADL (6-42)</strong></td>
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</tbody>
</table>
Additional comments for SWALLOWING (FAM Item)

1. Inclusion of swallowing
   Eating is a FIM item.
   It includes chewing and swallowing
   Swallowing is also rated separately as a FAM item.
   In order to preserve the integrity of the FIM, score Eating to include swallowing, 
   even though this is scored in its own right.

2. Modified food consistency
   If the person requires certain food consistencies e.g. pureed diet.
   If they choose these themselves, they would be rated as 6 on this point.
   If someone else chooses for them, or make sure they do not get given the wrong 
   types of food, this would rate as a 5.
   NB: Even in the community they would not have to puree these themselves, as 
   eating is rated from the point at which food is presented to them on a table or tray

2. Enteral feeding
   Under the FIM eating item, any enteral feed or fluid (however small the volume) 
   which is put up by someone else, automatically scores 1
   The swallowing item then provides definition of the respective proportions of oral 
   and enteral feeding.
2. SWALLOWING – Dietary modification and Enteral feeding

Swallowing includes:
- The ability to eat a regular diet by mouth
- Requirements for modified consistency.
- Enteral feeding – full or supplementary

At level 7, the person
- Eats a regular diet of choice
  (including managing all consistencies)
- in a reasonable amount of time.
- Performs independently and safely.

**NOTES**
Level 7: Manages a normal diet of their choice in a reasonable period of time.
Level 6: Manages a normal diet by mouth, but may take excessive time for eating or use assistive devices or strategies to clear food, e.g. multiple swallows. If needs to avoid certain food consistencies, chooses these independently.
Level 5: Takes all nourishment by mouth, may require a modified diet and has assistance with food choices to ensure that the correct food is provided, supervision may be received for cueing or coaxing e.g. reminding to slow down.
Level 4: Takes primary nourishment by mouth, may require diet modifications and has only minimal contact to control speed and amount of food intake. If has any enteral feeding, these are small volume top-ups only
Level 3: Takes some nourishment by mouth, may require diet modifications such as pureed food. Receives moderate assistance to monitor speed and amount of food intake (eg every mouthful). Or has a mixture of oral and enteral feeding, but takes more than half by mouth
Level 2: Unable to receive adequate nourishment by oral feeding alone, tube feeding provides primary nutrition, oral feeding is limited and subject receives maximum assistance.
Level 1: Unable to take anything by mouth, nutrition is provided by tube feeding.
Additional comments for CAR TRANSFERS (FAM item)

1. Loading / unloading a wheelchair
   If the person is able to transfer independently into a car, but has help just to load and unload a wheelchair: Score 4

2. Use of an orthosis for transfers
   Even though the application of an orthosis / prosthesis has already been scored under dressing, its use is still recorded if it is required for transfers as a 6 (if applied independently) or as a 5 (if applied with help).

3. Conundrum
   Just getting the wheelchair into and out of the boot represented handling of equipment but not the person themselves. This would be set-up (5) in the FIM. However, because the wheelchair is heavy and help is required both for getting in and out of the car, it is rated 4 here, possibly justified by the level of difficulty of handing equipment?
## 13. CAR TRANSFERS (FAM item)

### Car transfers includes:
- Approaching the car from the pavement.
- Managing the car door and lock.
- Getting on / off the car seat.
- Managing the seat belt.

**NOTE:** If a wheelchair is used for mobility and they require help to load and unload wheelchair - level 4

### Diagram:

![Diagram of car transfers process]

<table>
<thead>
<tr>
<th>Start</th>
<th>Does (name) receive help to transfer in or out of a vehicle?</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>No</td>
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<tr>
<td></td>
<td>Does (name) use an assistive device, or there are considerations for time or safety?</td>
</tr>
<tr>
<td>Yes</td>
<td>SCORE 7</td>
</tr>
<tr>
<td></td>
<td>COMPLETE INDEPENDENCE</td>
</tr>
<tr>
<td>No</td>
<td>SCORE 6</td>
</tr>
<tr>
<td></td>
<td>MODIFIED INDEPENDENCE</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>No Helper</th>
<th>Does (name) provide half or more of the car transfer tasks</th>
</tr>
</thead>
<tbody>
<tr>
<td>Yes</td>
<td>SCORE 5</td>
</tr>
<tr>
<td></td>
<td>SUPERVISION OR SET-UP</td>
</tr>
<tr>
<td>No</td>
<td>SCORE 4</td>
</tr>
<tr>
<td></td>
<td>MINIMAL CONTACT ASSISTANCE</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Helper</th>
<th>Does (name) do a car transfer with no physical assistance, but supervision or cueing only?</th>
</tr>
</thead>
<tbody>
<tr>
<td>Yes</td>
<td>SCORE 3</td>
</tr>
<tr>
<td></td>
<td>MODERATE ASSISTANCE</td>
</tr>
<tr>
<td>No</td>
<td>SCORE 2</td>
</tr>
<tr>
<td></td>
<td>MAXIMAL ASSISTANCE</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Does (name) receive total assistance to do a car transfer?</th>
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</thead>
<tbody>
<tr>
<td>Yes</td>
</tr>
<tr>
<td>No</td>
</tr>
<tr>
<td>No</td>
</tr>
</tbody>
</table>

| Does (name) receive only incidental help (less than 25%) to complete a car transfer, |
| Or has help fastening the seat belt |
| Or has help just to load/unload a wheelchair? |
| Yes | SCORE 4 | MINIMAL CONTACT ASSISTANCE |

### Notes:
- **Level 7:** Performs car transfers completely independently.
- **Level 6:** Modified independence: Transfers independently with the assistance of a device or takes more than a reasonable amount of time, or there is a consideration for safety.
- **Level 5:** Supervision or set-up: Supervision or verbal cueing, but no physical assistance to complete the car transfer.
- **Level 4:** Minimal assistance: Receives some physical help (contact guarding – touch only) or help just to load/unload a wheelchair, but able to perform 75% of task themselves.
- **Level 3:** Moderate assistance: but still provides more than half the effort for car transfer themselves.
- **Level 2:** Maximal assistance: provides less than half the effort for car transfers.
- **Level 1:** Total assistance or help from two people: contributes less than 25% of the effort to transfer in / out of car, or is unable to be got into a car.
**Additional comments for COMMUNITY MOBILITY**

1. **Mode of transport**  
   Indicate on score sheet the mode of transport used by the person to get about in the community, and on which s/he is being rated.

2. **Transferring in and out of cars and stowing wheelchair**  
   Note that these are scored separately under ‘Car transfers’. However, if the patient travels by car and receives help for car transfers, they will automatically score a maximum of 4 for community mobility, as they have help at both ends of the journey.

2. **Environmentally sensitive**  
   Note that community mobility is highly dependent on local availability of transport. For example, if the person is unable to drive, their ability to get about will depend on
   
   a) Good public transport in their area
   
   b) Financial support to use taxi’s, if public transport is not an option
## 16. 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.

At level 7, the person
- Uses some form of public transport or drives a car.
- Gets around in the locality to where they want to go
- Performs fully independently and safely.

### COMPLETE ON RATING FORM THE MODE OF TRANSPORT USED

NB: Car transfers (including loading and unloading of wheelchair) are assessed separately.

<table>
<thead>
<tr>
<th>Score</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>7</td>
<td>Complete independence</td>
</tr>
<tr>
<td>6</td>
<td>Modified independence</td>
</tr>
<tr>
<td>5</td>
<td>Supervision or set-up</td>
</tr>
<tr>
<td>4</td>
<td>Minimal assistance</td>
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<tr>
<td>3</td>
<td>Moderate assistance</td>
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<tr>
<td>2</td>
<td>Maximal assistance</td>
</tr>
<tr>
<td>1</td>
<td>Total assistance</td>
</tr>
</tbody>
</table>

### Flowchart

**Start**

Does (name) receive help to get around in the community?  
- No: Score 7 (Complete Independence)  
- Yes: Helper

**Helper**

Does (name) do half or more of the tasks of getting around in the community?  
- No: Score 2 (Maximal Assistance)  
- Yes: Does (name) receive total assistance to get around in the community?  
  - Yes: Score 1 (Total Dependence)  
  - No: Score 3 (Moderate Assistance)

Does (name) receive only incidental help to get around in the community?  
- Yes: Score 4 (Minimal Assistance)  
- No: Does (name) receive only supervision, cueing or coaxing to plan and get around in the community?  
  - Yes: Score 5 (Supervision or Set-up)  
  - No: Are there considerations for time / safety?  
    - Yes: Score 6 (Modified Independence)  
    - No: Does (name) use adaptive devices to drive, or need to keep trips short due to rest periods?  
      - Yes: Score 7 (Complete Independence)  
      - No: Does (name) receive help to get around in the community?

### Notes

Level 7: Complete independence: Uses some form of public transport independently (taxi, bus or train) or drives a car. Transfers self in wheelchair (if relevant) independently. Gets around in locality on foot or in wheelchair.

Level 6: Modified independence: Uses adaptive devices to drive or to keep trips short due to rest periods.

Level 5: Supervision or set-up: Receives only supervision or help at or before the start of the journey, e.g. help to plan the journey or to buy a ticket in advance.

Level 4: Minimal assistance: Receives help from someone at both ends of the journey, e.g. to be put on a bus and met at the other end. (NB if travels by car and requires help for car transfers, will automatically score a maximum of 4 for community mobility).

Level 3: Moderate assistance: Is accompanied throughout the journey as they get around in the community, (e.g. to point out potential problems or steady around obstacles, such as kerbs, or escalators), but still does more than half the task themselves.

Level 2: Maximal assistance: Contributes to some of the tasks involved in getting around in the community, but receives help for more than half the task.

Level 1: Total assistance or help from two people to get around in the community - contributes <25%) of the effort, or is unable to get around in the community.
COGNITIVE ITEMS

1. Cognitive items
   • These are assessed somewhat differently to motor items
   • Assistance is in the form of prompting or direction – scoring depends on the %
     time that patient is able to complete task without prompting
   • Level 5 is supervision with minimal help (<10% of the time) or set-up in the form of
     a structured or restricted environment.
   • They are best scored while observing the patient’s activities of daily living:
     • Consider all activities across the 24 hours in all environments
       – e.g. during therapy, daily care routine, social activities etc.
   • To determine the burden of care, consider what the patient can do without the
     helper’s input. They may ultimately be able to comprehend 100% of information,
     but score the % they can comprehend before prompting occurs.

2. FAM cognitive items sometimes deviate from the % task model and are instead
   based on constructs such frequency of intervention.

3. Receive / get help:
   It is recognised that unlike Motor tasks (which are usually undertaken at set time
   periods) Cognitive tasks are done throughout the day and it may not be reasonable
   to expect that help will be available all of the time.
   • The root question is therefore framed in terms of need for help as opposed to
     necessarily receiving help.
   • Safety awareness is framed throughout as the need for help, as it is important to
     identify this requirement, even if support is not forthcoming as often as it should be.
Additional comments for READING

1. **English not their first language**
   From the functional viewpoint, reading ability must be judged in the predominant language(s) of the environment (i.e. usually English in the UK).

   Although this may seem politically incorrect, this policy is necessary because:
   • The functional application of reading is to be able to read signs, written information etc. which will mostly be in English
   • It is recognised that the FIM+FAM is dependent on the environment and that the environment may sometimes be limiting.
   • Even if a patient can read in their own language it is unlikely that their reading ability can be tested accurately in that language. Even if the unit happens to have a member of staff who can speak that particular language, it is unlikely that all possible languages can be represented.

2. **Suggested test reading materials:**
   • The unit’s welcome booklet
   • Patient Information leaflets regarding brain injury /stroke
   • Menu cards
   • Patient / staff timetables
19. READING – FAM item

Reading includes:
- Understanding non-vocal written material.

At level 7, the person
- Reads and completely understands complex material
  e.g. newspapers, books etc.

Start

Does (name) need help to read complex paragraphs?

No

Does (name) demonstrate reduced speed or retention problems, or use adaptations, e.g. large text / Braille?

No

SCORE 7

COMPLETE INDEPENDENCE

Yes

SCORE 6

MODIFIED INDEPENDENCE

Yes

Does (name) read single letters and match words to pictures correctly more than half of the time?

No

Is (name) unable to consistently match or recognize identical letters, objects or forms?

No

Does (name) read and understand short, simple sentences?

No

Does (name) recognise single words and familiar short phrases?

Yes

SCORE 5

SCORE 3

MODERATE ASSISTANCE

SCORE 4

MINIMAL ASSISTANCE

SCORE 2

MAXIMAL ASSISTANCE

SCORE 1

TOTAL DEPENDENCE

Helper / Basic

No Helper / Complex tasks

Yes

Does (name) read and understand short, simple sentences?

Yes

SCORE 5

SCORE 3

MODERATE ASSISTANCE

SCORE 4

MINIMAL ASSISTANCE

SCORE 2

MAXIMAL ASSISTANCE

SCORE 1

TOTAL DEPENDENCE

NOTES

Level 7: Reads and understands complex lengthy paragraphs, such as in newspapers or books.

Level 6: Reads and understands complex sentences or short paragraphs, but may demonstrate reduced speed or retention problems.

Level 5: Reads and understands short simple sentences but shows increased difficulty with length or complexity.

Level 4: Recognises single words and familiar short phrases consistently

Level 3: Reads letters and recognises objects / pictures – (eg matches words to pictures correctly >50% of the time without cues.)

Level 2: Recognises identical objects or letters

Level 1: Unable to match or recognize identical letters consistently.
Additional comments for WRITING

1. Hand-writing / Word-processing
As computers are now widely available as normal household items, writing may be assessed in the medium that the person uses most often, not the lowest score

Conundrum:
Using a word-processor, Lisa writes complex essays accurately for her college coursework, but her handwriting is limited to her signature and 1-2 words

• Do not score to the lower – rate on what she does most often
• Note this may be environmentally sensitive – if she does not have access to a word processor, she is much more limited

2. Language appropriate to the medium
If the person is assessed on texting, normal texting language and syntax is appropriate But for level 7, they need to be able to communicate effectively in written language appropriate to the medium / circumstances
20. WRITING - FAM item

Writing includes:
• Spelling correctly,
• Appropriate grammar for the medium
• Completeness of written communication.

At level 7, the person
• Writes with acceptable accuracy in spelling, grammar, syntax, punctuation
• in language that is appropriate to the medium / circumstances

Start

Does (name) need help to write sentences and short paragraphs accurately?

Yes

No Helper / Complex tasks

No

SCORE 7
COMPLETE INDEPENDENCE

Yes

SCORE 6
MODIFIED INDEPENDENCE

Does (name) demonstrate reduced speed, or make more than ‘average’ spelling / grammatical errors, or do they require certain equipment? e.g. a word processor?

No

Yes

Does (name) need help to write sentences and short paragraphs accurately?

No

Yes

Does (name) write their name or familiar words?

Yes

SCORE 5

Does (name) write phrases or simple sentences (albeit with grammatical errors)?

No

SCORE 4

MINIMAL ASSISTANCE

Yes

SCORE 3

MODERATE ASSISTANCE

No

SCORE 2

MAXIMAL ASSISTANCE

No

SCORE 1

TOTAL DEPENDENCE

SCORE

Notes
Level 7: Writes full paragraphs with acceptable speed and accuracy in spelling, grammar and completeness.
Level 6: Writes sentences and short paragraphs accurately, may take extra time or make occasional spelling / grammatical errors, or requires certain equipment, e.g. a word processor.
Level 5: Writes phrases or simple sentences, evidence of spelling, grammar or syntax errors.
Level 4: Writes simple words and occasional phrases to express ideas, but with spelling errors and / or reduced legibility.
Level 3: Writes their own name (cueing may be required) and some familiar words, legibility is poor.
Level 2: Writes some letters spontaneously, able to trace or copy letters or numbers.
Level 1: Unable to copy letters or simple shapes.
Additional comments for SPEECH INTELLIGIBILITY

1. Expression and Speech intelligibility
Speech intelligibility refers to articulation and voice production.
It is rated as part of Expression to maintain the integrity of the FIM, but is also rated separately as a FAM item.
Speech intelligibility, as scored in the FAM, only refers to articulation, rate volume and quality of vocal communication. It does not include language or meaning.

2. Content
If the person speaks total rubbish with perfect clarity, they can still score 7.
It is recognised, however, that this is of dubious functional significance. The usefulness of this item is still under review.
21. SPEECH INTELLIGIBILITY - FAM item

Speech intelligibility includes:
• Articulation, rate, volume and quality of vocal communication.

At level 7, the person
• Converses with a well-modulated, well-articulated voice.

NB: In this context, understandability reflects speech quality
- not language / meaning, which are assessed separately under “Expression”

Start

Is (name’s) speech ever unclear and difficult to understand?  

No

Do they use compensatory strategies to produce intelligible speech, such as reducing rate or self-correction?  

No

SCORE 7
COMPLETE INDEPENDENCE

Yes

SCORE 6
MODIFIED INDEPENDENCE

Yes

Does (name) produce single words with adequate intelligibility?  

Yes

Does (name) produce intelligible sentences if cued or prompted?  

Yes

SCORE 5

No

Does (name) produce no intelligible speech?  

No

SCORE 1
TOTAL DEPENDENCE

No

SCORE 2
MAXIMAL ASSISTANCE

No

SCORE 3
MODERATE ASSISTANCE

Yes

SCORE 4
MINIMAL ASSISTANCE

Yes

Does (name) produce simple phrases intelligible to most people?

NOTES
Level 7 : The person talks intelligibly in all situations, including talking to strangers and over the telephone.
Level 6 : May take more time or uses compensatory strategies such as slowing down or reducing background noise. Self-corrects when not understood.
Level 5 : May need occasional prompting to slow down or otherwise modify output to improve intelligibility. Produces sentences intelligible to most people in most situations.
Level 4 : Produces simple phrases that are intelligible to most people
Level 3 : The person uses words or phrases which are intelligible only by familiar people or within the given situation.
Level 2 : Produces single sounds and / or syllables, recognisable only by familiar listeners or within context.
Level 1 : Person does not produce any recognisable speech or speech sounds.
Additional comments for EMOTIONAL STATUS

1. Emotional status
Includes not only the frequency and severity of mood disturbance but also the person’s ability to take responsibility for controlling their emotional behaviour and the extent to which this impacts on their day-to-day function.

2. Rating the use of medication – differs from UK FIM+FAM version 1
If the person requires medication to control their emotional status:
   Score 6
   (Regardless of whether they take this themselves or are given it by someone else)

3. Lower levels
Lower levels are rated on frequency of intervention required

4. Mood / emotional status
There is some potential overlap between Social interaction (FIM item) and Emotional Status (FAM item)
In the FIM, Social Interaction primarily addresses the level of assistance required to manage unwanted /inappropriate behaviours that impact on their interaction other people, (but may include behavioural aspects of mood disorders eg very withdrawn behaviour severe depression).
In the FAM, Emotional Status separates out disorders of mood (eg depression / anxiety/ frustration etc) identifies the frequency of intervention (eg encouragement, advice, reinforcement etc) that may be required to manage mood disturbance and emotional behaviour at a level that may not impact on social interaction with others, but may still interfere with day-to-day function.
23. EMOTIONAL STATUS – FAM item

Emotional Status includes:
- Frequency and severity of depression, anxiety, euphoria, frustration, agitation.
- Ability to take responsibility for controlling emotions and manage emotional behaviour in relation to day-to-day function.

At Level 7, the person:
- Exhibits an appropriate emotional response without help from others.
- Their emotions do not interfere with day-to-day function.

Does (name) need intervention from another person to manage their emotional behaviour?

- No
- Yes

Does (name) exhibit occasional emotional disturbance with adequate coping skills
- No
- Yes

Or are they taking medication for control of emotional problems?

- No
- Yes

Does (name) receive intervention less frequently than once a day?

- No
- Yes

Does (name) receive constant intervention e.g. many times a day?

- No
- Yes

Is the intervention only at the level of set up, (e.g. planned counselling sessions or structured environment)?

- No
- Yes

Is direct intervention received only once a week or less often?

- No
- Yes

Score Table:

<table>
<thead>
<tr>
<th>Score</th>
<th>Assistance Level</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>TOTAL DEPENDENCE</td>
</tr>
<tr>
<td>2</td>
<td>MAXIMAL ASSISTANCE</td>
</tr>
<tr>
<td>3</td>
<td>MODERATE ASSISTANCE</td>
</tr>
<tr>
<td>4</td>
<td>MINIMAL ASSISTANCE</td>
</tr>
<tr>
<td>5</td>
<td>SUPERVISION OR SET-UP</td>
</tr>
<tr>
<td>6</td>
<td>MODIFIED INDEPENDENCE</td>
</tr>
<tr>
<td>7</td>
<td>COMPLETE INDEPENDENCE</td>
</tr>
</tbody>
</table>

**NOTES**

Level 7: The person exhibits an appropriate emotional response without help from others and their emotions do not interfere with day to day function.

Level 6: The person exhibits occasional emotional disturbances but is able to cope with these independently or is taking medication for them, e.g. antidepressants.

Level 5: The person may need their environment structured to remove triggers or stimuli causing difficulties with emotional status, or receives occasional or planned support (e.g. scheduled counselling sessions) but no more than every 1-2 weeks.

Levels 4-1: Direct intervention may include immediate (often unplanned) implementation of encouragement, advice, reinforcement or preventative action to manage emotional disturbance. Level is determined by frequency of intervention:

4: Once a week or less often
3: Several times a week, but not daily
2: Daily
1: Many times each day
1. Adjustment to limitations is considered to have two components:

   — **Above the ‘help’ line:**
     A mental set with regard to having insight into their disability, coming to terms with it and having realistic expectations for the future.

   — **Below the ‘help’ line:**
     Practical adjustments and the use of coping strategies and alternative techniques to overcome their disabilities.

2. Overlap with safety awareness

Lack of awareness / acceptance of limitations often has implications for safety, especially at the lower levels of functioning.

There may be some overlap with safety awareness, but

- **Adjustment to limitations** is more generally about willingness to learn new ways of functioning and adopt strategies to compensate for their disabilities.
- **Safety awareness** relates to the period of time for which than can be safely left alone
24. ADJUSTMENT TO LIMITATIONS – FAM item

**Adjustment to limitations includes:**
- Denial / insight, awareness and acceptance of limitations.
- Willingness to learn new ways of functioning
- Using coping strategies to compensate for disabilities
- Realistic expectations for the future.

**At level 7, the person:**
Demonstrates awareness and acceptance of their limitations.
Understands the implication of these.
Uses appropriate strategies to compensate for them.
Has realistic expectations for the future.

**Score Table**

- **Score 7:** Complete Independence
- **Score 6:** Modified Independence
- **Score 5:** Supervision or Set-up
- **Score 4:** Minimal Assistance
- **Score 3:** Moderate Assistance
- **Score 2:** Maximal Assistance
- **Score 1:** Total Dependence

**Notes**
- Level 7: Demonstrates awareness and acceptance of their limitations. Understands the implication of these. Uses appropriate strategies to compensate for them. Has realistic expectations for the future.
- Level 6: Has some difficulty coping with limitations but not such that it interferes with day to day function. Able to apply new ways of functioning independently. May have some unrealistic expectations of long term recovery.
- Level 5: Has difficulty coping with limitations. Willing to learn but still requires set up or planned support to use new ways of functioning.
- Level 4: Receives occasional (unplanned) help to cope with limitations, and to use new strategies.
- Level 3: Has some awareness of limitations. Needs moderate help or direction to cope with them, but still manages more than half the time.
- Level 2: Has minimal awareness of limitations / needs help more than half the time.
- Level 1: Basically no awareness of limitations.
Additional comments for USE OF LEISURE TIME

1. Leisure time and employability
Use of leisure time replaces the item “Employability” in the original FAM. This is on the basis that employability is a handicap item, not part of disability, and is almost always impossible to score objectively (on what the patient does) while they are undergoing in-patient rehabilitation - as most patients are in the settings in which FAM is used.

Work / education is included in the FAM – DOM module which addressed extended activities of daily living.

2. Use of leisure time while in hospital
While in hospital, use of leisure time concerns how the person uses their unstructured time (i.e. time when they are not in therapy or engaged in activities of daily living or mealtimes). Physical, mental or behavioural difficulties may impact on the score.
# 25. USE OF LEISURE TIME – FAM item

Engagement in leisure activities has 3 components or steps:
1. Choosing the activity (e.g. they may choose to swim)
2. Arranging to take part (e.g. getting to the swimming pool)
3. Performing the activity (e.g. swimming)

Leisure activities can include watching TV and other passive activities if the assessor considers them to be actively engaged, e.g. concentrating on the programme.

While in hospital, use of leisure time concerns how the person uses their unstructured time (i.e. time when they are not in therapy or engaged in activities of daily living or mealtimes). Physical, mental or behavioural difficulties may impact on the score.

**NOTES**
- Level 7: The person engages in and pursues a wide range of leisure activities without assistance or any special equipment.
- Level 6: Uses leisure time without help but choice is limited, or special equipment is required. They take more than a reasonable amount of time.
- Level 5: Is prompted just at the start, i.e. is lacking in initiative or motivation, but is then independent.
- Level 4: Receives help for just one of the 3 steps.
- Level 3: Receives help for two of the steps.
- Level 2: Receives help for all 3 steps, but is then able to engage in and enjoy an activity.
- Level 1: Unable to engage in leisure activities, despite assistance.
Additional comments for ORIENTATION

1. Orientation - definitions

- Person - Includes being aware of identity of people around them
  - Distinguishes friends and family from strangers / members of staff
- Place - Includes being aware of where they are
  - Approximate geographic location - Country / Town / Address if at home
  - Hospital or home

- Time: Includes being aware of
  - Time of day (morning / evening etc)
  - Day of the week
  - Month / Year
  - Season

- Situation: Includes being aware of immediate environment and context
  - Able to find their way around the immediate (familiar) environment
  - Aware of context – eg rehabilitation programme
28. ORIENTATION – FAM item

Orientation includes consistent orientation to:
1. Person
2. Place
3. Time
4. Situation

At level 7, the person
• Is completely orientated in all 4 aspects, without cues.

START

Does (name) need help from another person to orientate them to person, time, place or situation?

No

No

Yes

Yes

Helper

Is (name) orientated to at least 2 out of 4 aspects?

Yes

Is (name) orientated to all 4 aspects with cues from others?

Yes

No

No

Is (name) orientated to 3 out of 4 aspects, and only occasionally needs external cues?

Yes

No

No

Yes

SCORE 7
COMPLETE INDEPENDENCE

SCORE 6
MODIFIED INDEPENDENCE

SCORE 5
SUPERVISION OR SET-UP

SCORE 4
MINIMAL ASSISTANCE

SCORE 3
MODERATE ASSISTANCE

SCORE 2
MAXIMAL ASSISTANCE

SCORE 1
TOTAL DEPENDENCE

NOTES
Level 7: Completely orientated to person, place, time and situation 100% of the time without cues.
Level 6: May take more than a reasonable amount of time to respond, may use self-initiated cues or aids, but does not receive the assistance of another person.
Level 5: Receives cues from others but is orientated to person, place, time and situation.
Level 4: Orientated to 3 out of 4 aspects and receives only incidental external cues from others (<25% of the time).
Level 3: Orientated to 2 out of 4 aspects. Receives external cues from others but less than half of the time.
Level 2: Orientated to only 1 out of the 4 aspects and receives frequent cues (more than half of the time).
Level 1: Disorientated to person, place, time or situation, or is orientated for less than 25% of the time.
Additional comments for CONCENTRATION

1. “Concentration” replaces “Attention” in the original FAM
Concentration includes the length of time a person is able to concentrate on a purposeful activity.
If person is variable across tasks or environments, score the lower.

2. A purposeful activity is defined as a non-automatic activity requiring concentration. This item should be considered in relation to activities that are within their capability and that they are engaged in

For example,
Eating a meal might be automatic if it posed no problem for the person, but non-automatic if it required concentration to cope with adaptive cutlery or overcome ataxia.
29. CONCENTRATION

Concentration includes:
- The length of time the person is able to concentrate on purposeful activity.

If they perform variably across tasks or environments, score the lower.

A purposeful activity is defined as a non-automatic activity requiring concentration.
For example, eating a meal might be automatic if it posed no problem for the person, but non-automatic if it required concentration to cope with adaptive cutlery or overcome ataxia.

**Score 7**: Complete Independence
- Does (name) need help to concentrate on a purposeful activity for 30 minutes?

**Score 6**: Modified Independence
- Does (name) have difficulty ‘getting back on track’ following distraction, or in switching attention to a new task?

**Score 5**: Supervision or Set-up
- Does (name) concentrate on a purposeful activity for 30 minutes, with supervision or prompting to ‘stay on track’?

**Score 4**: Minimal Assistance
- Does (name) have difficulty returning to a task after interruption or distraction.

**Score 3**: Moderate Assistance
- Does (name) concentrate on an activity for 15 minutes, with assistance as necessary to ‘stay on track’?

**Score 2**: Maximal Assistance
- Does (name) concentrate on an activity for a minimum of 30 minutes, with supervision or prompting to ‘stay on track’?

**Score 1**: Total Dependence
- Does (name) concentrate on a purposeful activity for 30 minutes?

---

**Notes**

- Level 7: Attends appropriately to a given task or activity. Able to return to a task independently after interruption or distraction.
- Level 6: Concentrates on a purposeful activity for half an hour or more, but may have difficulty returning to a task after interruptions or structures their own environment to avoid distractions.
- Level 5: Concentrates on an activity for 30 mins or more, but to do so needs set-up, or prompting from another person, e.g. screening work area, assistance to return to a task, prompting to disengage from a task.
- Level 4: Concentrates on a task for at least 15 mins with assistance from another person.
- Level 3: Concentrates for between 5-15 mins, as above.
- Level 2: Concentrates on an activity or task for more than a minute, but less than 5, and may be easily distractible or it may be difficult to gain their attention.
- Level 1: No useful span of attention or concentration on an activity. They may be either highly distractible or too unroused to attend.
1. “Safety Awareness” replaces “Safety Judgement” in the original FAM.

It includes:

- Awareness of one’s deficits and their implications
- Ability to plan ahead
- Anticipate potential danger and identify risks involved
- Freedom from impulsivity
- Ability to remember safety-related information
- Ability to respond appropriately if danger arises e.g. summon help in an emergency

Thus it comprises both physical and cognitive ability.

Cut-off points for the lower levels reflect the time for which the person can safely be left alone.
30. SAFETY AWARENESS – FAM item

Safety awareness includes the ability to:
- anticipate potential danger and identify risks involved
- plan ahead to avoid risk
- avoid impulsivity
- remember safety-related information
- respond appropriately if danger arises

Thus it comprises both physical and cognitive ability.

Does (name) need help to maintain personal safety in routine activities?

No Helper / Complex tasks

No

Yes

Helper / Basic

Is (name) safe to be left alone at all for short periods?

Yes

No

Does (name) receive some degree of supervision but only with new or complex activities, or is there a concern for safety with complex activities?

No

Yes

SCORE 7

COMPLETE INDEPENDENCE

SCORE 6

MODIFIED INDEPENDENCE

Is (name) safe to be left to cope with routine activities for more than half a day, e.g. while other family members are out at work?

Yes

No

SCORE 5

SUPERVISION OR SET-UP

Is (name) safe to be left alone for periods of 2 hours or more?

Yes

No

SCORE 4

MINIMAL ASSISTANCE

SCORE 3

MODERATE ASSISTANCE

SCORE 2

MAXIMAL ASSISTANCE

SCORE 1

TOTAL DEPENDENCE

NOTES

Level 7 : Fully able to maintain own safety.

Level 6 : May have some degree of supervision to maintain safety while undertaking new or complex activities, but does not require or receive supervision during normal routine daily tasks.

Level 5 : Safe to be left alone if set-up to cope with routine activities for more than half a day, for example while family members are out at work, or in the structured environment of a hospital ward, but is not safe to be left alone throughout 24 hours.

Level 4 : Safe to be left alone for more than 2 hours or up to half a day, but requires a safety check, for example, at meal times.

Level 3 : Safe to be left alone for short periods of up to 2 hours, sufficient to allow their carer to go out briefly to the shops etc. able to summon help in an emergency. In a ward requires 2-hourly checks

Level 2 : Requires somebody constantly present in the vicinity and would not be safe to be left alone, even for a short period, for instance while the carer pops out to the shops. Unable to summon help in an emergency. In a ward requires hourly checks

Level 1 : Requires constant one-to-one supervision from a specifically designated person, such as a Special Care Nurse in the hospital setting or a 24 hour professional carer in the community.
Obtaining FIM, FIM+FAM Scores

1. It is STRONGLY RECOMMENDED that data is entered into the FIM+FAM software as this will record itemised data and calculate motor, cognitive and subscale scores for both the FIM and FIM+FAM in addition to deriving Barthel Scores.

2. Manually calculating Scores
Manually adding up FIM, FIM+FAM scores is not recommended, however, if this practice is required the following rules MUST be applied:

<table>
<thead>
<tr>
<th>Item</th>
<th>Description</th>
<th>Comments</th>
</tr>
</thead>
<tbody>
<tr>
<td>8i</td>
<td>Bladder Assistance</td>
<td>Use the lowest score only in calculations</td>
</tr>
<tr>
<td>8ii</td>
<td>Bladder Accidents</td>
<td></td>
</tr>
<tr>
<td>9i</td>
<td>Bowel Assistance</td>
<td>Use the lowest score only in calculations</td>
</tr>
<tr>
<td>9ii</td>
<td>Bowel Accidents</td>
<td></td>
</tr>
<tr>
<td>14i</td>
<td>Locomotion – Walking (w)</td>
<td>Use the preferred mode score only in calculations</td>
</tr>
<tr>
<td>14ii</td>
<td>Locomotion – Wheelchair (c)</td>
<td></td>
</tr>
</tbody>
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3. Calculating FIM Scores

<table>
<thead>
<tr>
<th>FIM MOTOR SCORES (Range 13-91)</th>
<th>FIM+FAM MOTOR SCORES (Range 5-35)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Item</td>
<td>Description (Add following items scores)</td>
</tr>
<tr>
<td>1</td>
<td>Eating</td>
</tr>
<tr>
<td>3</td>
<td>Grooming</td>
</tr>
<tr>
<td>4</td>
<td>Bathing</td>
</tr>
<tr>
<td>5</td>
<td>Dressing Upper Body</td>
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<tr>
<td>6</td>
<td>Dressing Lower Body</td>
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<tr>
<td>7</td>
<td>Toileting</td>
</tr>
<tr>
<td>8</td>
<td>Bladder (use lowest score)</td>
</tr>
<tr>
<td>9</td>
<td>Bowel (use lowest score)</td>
</tr>
<tr>
<td>10</td>
<td>Bed, chair, w/chair transfer</td>
</tr>
<tr>
<td>11</td>
<td>Toilet transfer</td>
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<tr>
<td>12</td>
<td>Tub, shower transfer</td>
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<tr>
<td>14</td>
<td>Locomotion (use preferred mode score)</td>
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<tr>
<td>15</td>
<td>Stairs</td>
</tr>
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</table>

4. Calculating FIM+FAM Scores

<table>
<thead>
<tr>
<th>FIM+FAM MOTOR SCORES (Range 16-112)</th>
<th>FIM+FAM COGNITIVE SCORES (Range14-98)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Item</td>
<td>Description (Add following items scores)</td>
</tr>
<tr>
<td>Self Care – items 1-7 (Range 7-49)</td>
<td>Eating, Swallowing, Grooming, Bathing, Dressing Upper Body, Dressing Lower Body, Toileting</td>
</tr>
<tr>
<td>Bladder/bowel – items 8 &amp; 9 (Range 2-14)</td>
<td>Bladder (use lowest score), Bowel (use lowest score)</td>
</tr>
<tr>
<td>Locomotion – items 10-16 (Range 7-49)</td>
<td>Bed, chair, w/chair transfer, Toilet transfer, Tub, shower transfer, Car transfer, Locomotion (use preferred mode score), Stairs, Community mobility</td>
</tr>
<tr>
<td></td>
<td></td>
</tr>
</tbody>
</table>
Neurological Impairment Categories – optional in Australia

1. Severity of impairment

The UK FIM+FAM was developed in the mid-1990s.

The development group recognised that if a scale is to be used for comparison of different populations, programmes or practices, it is necessary to collate some a minimum dataset alongside FIM+FAM scores, to include the various factors which may be expected to affect outcome, including:

- Age,
- Diagnosis,
- Time since onset,
- Types and combination of impairment

The original impairment set included 10 domains shown below

<table>
<thead>
<tr>
<th>Deficit</th>
<th>Score</th>
<th>Types - examples</th>
</tr>
</thead>
<tbody>
<tr>
<td>Motor deficit</td>
<td>1</td>
<td>Tetraparesis, hemiparesis, paraparesis etc</td>
</tr>
<tr>
<td>Sensory</td>
<td>1</td>
<td>Somatic, proprioceptive</td>
</tr>
<tr>
<td>Co-ordination / balance</td>
<td>1</td>
<td>Ataxia</td>
</tr>
<tr>
<td>Communication deficit</td>
<td>1</td>
<td>Dysphasia, Dysarthria</td>
</tr>
<tr>
<td>Cognitive deficit</td>
<td>1</td>
<td>Memory, attention, insight, impulsivity</td>
</tr>
<tr>
<td>Perceptual deficit</td>
<td>1</td>
<td>Neglect – of body; of space</td>
</tr>
<tr>
<td>Visual loss</td>
<td>1</td>
<td>Uncorrectable acuity, diplopia, visual field defect etc</td>
</tr>
<tr>
<td>Hearing loss</td>
<td>1</td>
<td>Conductive, sensorineural</td>
</tr>
<tr>
<td>Mood disturbance</td>
<td>1</td>
<td>Depression, anxiety, lability</td>
</tr>
<tr>
<td>Behavioural problems</td>
<td>1</td>
<td>Verbal aggression, physical aggression etc</td>
</tr>
<tr>
<td>Total score</td>
<td>/10</td>
<td></td>
</tr>
</tbody>
</table>

The Impairment set has subsequently been refined to the Neurological Impairment Scale which includes:

- A rating of the severity of the impairment in terms of its functional impact.
- Mapping onto the WHO International Classification of Functioning Disability and Health (ICF) categories
# Neurological Impairment Categories

<p>| Severity scores - extent to which deficit impacts on function/engagement in rehab |
|---------------------------------|-----------------|-------------------|</p>
<table>
<thead>
<tr>
<th>Score</th>
<th>Impairment</th>
<th>Functional impact</th>
</tr>
</thead>
<tbody>
<tr>
<td>0</td>
<td>None</td>
<td>Normal function</td>
</tr>
<tr>
<td>1</td>
<td>Mild</td>
<td>Affecting high level function only</td>
</tr>
<tr>
<td>2</td>
<td>Moderate</td>
<td>Significant limitation, but some useful function</td>
</tr>
<tr>
<td>3</td>
<td>Severe</td>
<td>Little or no useful function, effectively limiting rehabilitation</td>
</tr>
</tbody>
</table>

**Name:** ……………………………

**No:** ……………………………

**Date of completion:** ………/……/……

<table>
<thead>
<tr>
<th>Impairment Type</th>
<th>Subscore 0 1 2 3</th>
<th>Other type:</th>
</tr>
</thead>
<tbody>
<tr>
<td>O Motor</td>
<td></td>
<td></td>
</tr>
<tr>
<td>O Motor Left upper limb s730</td>
<td>0 1 2 3</td>
<td>O R Hemiparesis b7302</td>
</tr>
<tr>
<td>O Motor Right upper limb s730</td>
<td>0 1 2 3</td>
<td>O L Hemiparesis b7302</td>
</tr>
<tr>
<td>O Motor Left lower limb s750</td>
<td>0 1 2 3</td>
<td>O Tetraparesis b7304</td>
</tr>
<tr>
<td>O Motor Right lower limb s750</td>
<td>0 1 2 3</td>
<td>O Paraparesis b7303</td>
</tr>
<tr>
<td>O Motor Trunk s760</td>
<td>0 1 2 3</td>
<td>O Monoparesis b7301</td>
</tr>
<tr>
<td>O Motor Subscore</td>
<td>0 1 2</td>
<td>O Ataxia b760</td>
</tr>
<tr>
<td>O Motor Total score</td>
<td>/14</td>
<td></td>
</tr>
<tr>
<td>O Tone / joint range</td>
<td>0 1 2 3</td>
<td>(Untestable)</td>
</tr>
<tr>
<td>O Sensation</td>
<td>0 1 2 3</td>
<td>(Untestable)</td>
</tr>
<tr>
<td>O Sensation O Sensation O Sensation O Sensation</td>
<td></td>
<td></td>
</tr>
<tr>
<td>O Perceptual function</td>
<td>0 1 2 3</td>
<td>(Untestable)</td>
</tr>
<tr>
<td>O Speech and language</td>
<td>0 1 2 3</td>
<td>(Untestable)</td>
</tr>
<tr>
<td>O Cognitive function</td>
<td>0 1 2 3</td>
<td>(Untestable)</td>
</tr>
<tr>
<td>O Behaviour</td>
<td>0 1 2 3</td>
<td>(Untestable)</td>
</tr>
<tr>
<td>O Mood</td>
<td>0 1 2 3</td>
<td>(Untestable)</td>
</tr>
<tr>
<td>O Seeing and Vision</td>
<td>0 1 2 3</td>
<td>(Untestable)</td>
</tr>
<tr>
<td>O Hearing</td>
<td>0 1 2 3</td>
<td>(Untestable)</td>
</tr>
<tr>
<td>O Pain</td>
<td>0 1 2 3</td>
<td>(Untestable)</td>
</tr>
<tr>
<td>O Fatigue</td>
<td>0 1 2 3</td>
<td>(Untestable)</td>
</tr>
<tr>
<td>O Other</td>
<td>0 1 2 3</td>
<td>(Untestable)</td>
</tr>
</tbody>
</table>

**TOTAL SCORE**

Range 0-50
EXTENDED ACTIVITIES OF DAILY LIVING (EADL)

1. The UK FIM+FAM Version 2 includes an additional module with 6 items relating to Extended activities of daily living

These are:
1. Meal preparation
2. Laundry
3. Housework
4. Shopping
5. Home Finances
6. Work / education

2. **EADL may need to be judged in the hypothetical situation**
   (e.g. as the patient leaves hospital to return home).

   Thus it is known what they are able to do, but the level of help they actually receive is as yet unknown.

   - The manual therefore uses the terminology:
     - “[Name] is able to do…” or
     - “[Name] requires help for…”.

   - When used in community rehabilitation settings this may be exchanged for:
     - “[Name] does…” or
     - “[Name] receives help for’
Additional comments for MEAL PREPARATION

1. Meal preparation
   relates to the level of help the individual requires to prepare a simple or main meal.

Many men and women may not be fully competent cooks, but even the most poorly house-trained person can usually prepare a drink or a simple meal for themselves when needed if everyone else is out!

Main Meal
Several components to prepare either hot or cold meal. (Some salads require a lot of preparation and are eaten as a main meal in summer).

Simple Meal
Example: Cheese/beans on toast
          Omelette/scrambled eggs
          Jacket Potato
          Sandwich
**MEAL PREPARATION**

Meal preparation includes:
- Planning the meal
- Organising utensils and ingredients
- Preparing food
- Planning order of tasks so that different components of the meal are ready at the same time
- Safety in the kitchen

At level 7, the person:
- Assembles the ingredients
- Prepares an appropriately balanced main meal
- Using normal utensils
- Plans the order of tasks so that the components are ready at the appropriate time
- Performs safely and independently in a timely manner
- Able to use all standard kitchen appliances

---

**Start**

- Does (Name) need intervention from another person to prepare a main meal?
  - Yes
  - No

**No Helper**
- Complex task

**Helper**
- Simple task

---

- Does (Name) need adapted equipment or take more than a reasonable amount of time or is there a concern for safety? Or Has limited food choices?
  - Yes
  - No

**SCORE 7**
- COMPLETE INDEPENDENCE

---

- Is (Name) able to make a hot drink and help themselves to food left out for them, when required?
  - Yes
  - No

**SCORE 2**
- MAXIMUM ASSISTANCE

---

- Does (Name) need all meals prepared and placed in front of them?
  - Yes
  - No

**SCORE 3**
- MODERATE ASSISTANCE

---

- Is (Name) able to heat up a pre-prepared meal if left in the fridge?
  - Yes
  - No

**SCORE 4**
- MINIMUM ASSISTANCE

---

- Does (Name) make themselves a simple meal independently but just requires supervision or set-up to prepare a main meal?
  - Yes
  - No

**SCORE 5**
- SUPERVISION OR SET-UP

---

- Does (Name) need all meals prepared and placed in front of them?
  - Yes
  - No

- Is (Name) able to make a hot drink and help themselves to food left out for them, when required?
  - Yes
  - No

**SCORE 6**
- MODIFIED INDEPENDENCE

---

**Notes**

- **Level 7:** Able to prepare a main meal independently.
- **Level 6:** Able to prepare a main meal, but uses adapted equipment, or takes extra time, or there is some concern for safety or has limited food choices.
- **Level 5:** Able to make a simple meal independently but needs help or supervision to prepare a main meal or, needs help with planning order or laying out food or utensils, but then manages alone.
- **Level 4:** Able to microwave and help themselves to a pre-prepared meal if left in the fridge.
- **Level 3:** Able to help themselves to a cold meal if left out for them in the kitchen and makes a hot drink.
- **Level 2:** Able to help themselves to food left on a table near them and pour themselves a drink from a flask or jug.
- **Level 1:** Needs all food preparing and put in front of them.
2. Laundry includes
   • Washing the clothes
   • Hanging out or drying the clothes
   • Ironing and folding
   • Putting them away
   • Choosing whether or not to use external laundry or dry-cleaning services

Many people choose not to do their own washing (eg employ a cleaner / laundry service to do it for them) but they are able to choose this and should also be able to use another strategy if the normal route fails – eg do it themselves or arrange an alternative service without help – therefore they would score a 7.

Therefore if the person is independent in a particular routine, but limited to that routine and would require assistance to make alternative arrangements if it fails, they score 6.

Conundrums:
1. Elaine does all her own washing and ironing. She enjoys using the new steam iron her mother gave her which switches itself off if not used for 5 minutes.
   
   Score 7 if there are no concerns for safety but it is just a new style of iron with extra features.
   
   Score 6 if there are concerns for safety therefore an iron that switches off after 5 minutes has been bought specifically. (In other words, if it wasn’t available, Elaine would not be able to iron.)

2. Hilary never irons her clothes.
   
   Score 7 If she always buys clothes that do not require ironing, such as drip dry.

However, if she has some clothes that she either doesn’t wear because she can’t iron them, or has help for those items, score according to her ability to iron.
LAUNDRY

Laundry includes:
- Washing the clothes
- Hanging out or drying the clothes
- Ironing and folding
- Putting them away
- Choosing whether or not to use external laundry or dry-cleaning services

At level 7: the person:
- Carries out all these tasks
- Independently, safely, and in a timely manner
- Or chooses whether or not to use external laundry or dry-cleaning services
  - But is able to manage their own laundry by another route without help, if their normal process fails

Start

Does (Name) need intervention from another person to launder their clothes?

No

Yes

No Helper

Does (Name) take more than a reasonable amount of time or is there a concern for safety? Or They are limited to the use of certain external services, but organises these independently

No

Yes

SCORE 7
COMPLETE INDEPENDENCE

Helper

Does (Name) need help with one or more of the tasks but can manage more than half of their laundry themselves?

Yes

SCORE 5
SUPERVISION OR SET-UP

No

Does (Name) need help only to set up a piece of equipment but can then manage alone or is able to do home laundry but needs help to collect items from dry-cleaners?

Yes

No

SCORE 2
MAXIMUM ASSISTANCE

Is (Name) able to carry out most of their laundry, but needs help with only one task e.g. ironing or hanging washing out?

Yes

No

No

SCORE 3
MODERATE ASSISTANCE

SCORE 4
MINIMUM ASSISTANCE

Yes

Notes

Level 7: Able to do all laundry independently, having the choice to dry clean certain clothes as necessary.
Level 6: Able to do their laundry but takes extra time, or there is some concern for safety.
  - Or are limited to the use of certain external laundry services, but organises these independently
Level 5: Needs help to set-up, e.g. putting up the ironing board or washing line, but can then manage alone
  - Or can do home laundry but needs help to take / collect clothes from dry-cleaners.
Level 4: Able to do most of their laundry, but needs help with only one of the tasks
  - E.g. help to iron or hang washing out.
Level 3: Needs help with more than one of the tasks, but still able to do more than half of their laundry themselves.
Level 2: Able to assist with part of the laundry, such as folding clothes, but needs help for most of it.
Level 1: Needs all laundry doing for them
Additional comments for HOUSEWORK

3. Housework includes
   • Heavy chores:
     • E.g. vacuuming, cleaning the bath and floor and changing the bed linen.
   • Light chores:
     • E.g. dusting and polishing, cleaning work surfaces, washing up and making the bed.

Many people choose not to do their own housework (eg employ a cleaner to do it for them) but they are able to choose and organize this and should also be able to use another strategy if the normal route fails – e.g. do it themselves or arrange an alternative service without help.

Therefore if the person is independent in a particular routine, but limited to that routine and would require assistance to make alternative arrangements if it fails, they score 6.
HOUSEWORK

House work includes:
• Heavy chores:
  • E.g. vacuuming, cleaning the bath and floor and changing the bed linen.
• Light chores:
  • E.g. dusting and polishing, cleaning work surfaces, washing up and making the bed.

Start

Does (Name) need intervention from another person to carry out any housework?

No

SCORE 7
COMPLETE INDEPENDENCE

Yes

SCORE 6
MODIFIED INDEPENDENCE

Helper

No Helper

Is (Name) able to carry out more than half their housework by themselves?

Yes

SCORE 5
SUPERVISION OR SET-UP

No

SCORE 4
MINIMUM ASSISTANCE

Does (Name) do all light household chores but requires help for heavy tasks

Yes

SCORE 3
MODERATE ASSISTANCE

No

SCORE 2
MAXIMUM ASSISTANCE

Does (Name) need all their housework carried out for them

Yes

SCORE 1
TOTAL DEPENDENCE

No

Does (Name) take more than a reasonable amount of time to carry out housework or is there a concern for safety? Or limited to the use of certain external cleaning services, but organises these independently

Yes

No

At Level 7, the person:
• Does all their own house work, including both light and heavy chores.
• Independently, safely, and in a timely manner
• Or chooses whether or not to use external cleaning services
• But is able to manage their own housework by another route without help, if their normal process fails

Notes:
Level 7: Can do all household chores - both heavy and light.
Level 6: Does all housework, but takes more than the reasonable amount of time.
  Or are limited to the use of certain external cleaning services, but organises these independently
Level 5: Able to do most of the household chores, but just needs reminding / quality check
  Or requires occasional help with certain heavy tasks e.g. cleaning the bath.
Level 4: Unable to do heavy housework. Does all light chores.
Level 3: Able to do more than half the light housework, but needs help with two or more light tasks.
Level 2: Able to contribute a small amount, e.g. washing up or light dusting, but needs help for the majority of the housework.
Level 1: Unable to do household chores.
Additional comments for SHOPPING

4. Shopping – includes:
   • Planning - Identifying the items needed
   • Remembering and locating them in the shop
   • Making appropriate choices – buying only what is needed
   • Handling money
   • Transporting items home

Using internet shopping and a home delivery service is part of normal life,

If the individual chooses to do it but is not limited to this mechanism and could equally manage another way if required.
However, if they can only shop by this route and require it to transport shopping home,
   • This counts as modified independence, providing they arrange it, order and pay for it by themselves.

• Just require help for transport

If they are able to plan, select and pay for shopping by themselves, but just require someone to drive them to the shops, wait while they shop, and drive them home again, that would be Level 4
SHOPPING

Shopping includes:
- Identifying the items needed
- Remembering and locating them in the shop
- Making appropriate choices
- Handling money
- Transporting items home

At Level 7, the person:
- Does all their own shopping.
- Independently, safely, and in a timely manner
- Or chooses whether or not to use internet shopping services
- But is able to manage their own shopping by another route without help, if their normal process fails

Does (Name) need physical assistance with shopping or help to plan and organise it?

No

Yes

Start

No Helper

Helper

Does (Name) need someone to accompany them on shopping trips, or help to plan shopping, but can do more than half the task themselves?

Yes

No

No

Yes

Does (Name) take longer than the reasonable time to shop or is limited to certain shops e.g. those with an internet order / home delivery service, but is able to order, pay for and take delivery without help.

No

Yes

SCORE 7

COMPLETE INDEPENDENCE

SCORE 6

MODIFIED INDEPENDENCE

Does (Name) need all shopping done for them?

Yes

No

SCORE 1

TOTAL DEPENDENCE

SCORE 2

MAXIMUM ASSISTANCE

SCORE 3

MODERATE ASSISTANCE

SCORE 4

MINIMUM ASSISTANCE

Is (Name) able to shop independently, but needs help just to plan and prepare the shopping list

Yes

No

SCORE 5

SUPERVISION OR SET-UP

Is (Name) able to meet some of their shopping needs by using local shops, but needs help to shop in a big supermarket, or do they need help to get to the shops and back, but are able to shop independently once there

Yes

No

Notes

Level 7: Able to cope with all shopping needs entirely independently, including use of an internet shopping service, but is able to manage their own shopping via another route without help if their normal process fails

Level 6: Able to shop independently, but takes extra time or is limited to shops with certain facilities e.g. a home delivery service.

Level 5: Needs help planning and preparing a list, but is then able to shop independently.
(Or needs help just with very occasional items)

Level 4: Able to meet some of their immediate needs independently in the local shops, but needs help for their big supermarket shop, or needs help just to get to the shops, wait and transport the shopping home.

Level 3: Needs accompanying and some help on shopping expeditions, but able to do more than half the task themselves.

Level 2: Able to go with a carer / relative to the shops, and pick out certain items but carer does most of the shopping tasks.

Level 1: Needs all shopping done for them.
5. **Home Finances includes:**
   - Managing a bank account
   - Paying bills
   - Budgeting for personal and domestic needs
   - Coping with unexpected financial demands, such as a tax bill or parking fine
   - Accessing all financial services, such as bank, post office, ATM machine.

**Employing a financial advisor:**

It is normal to employ a financial advisor to manage aspects such as tax, investment of capital etc.

Score 7  providing they can chose a financial advisor, decide appropriately which tasks to delegate to them, and can arrange an alternative without help if their normal process fails

If the individual is dependent on a receiver or other external control to manage their finances, then they score according to the level of independence they have in managing their financial affairs.

**Power of Attorney:**

Scores 6  If they have appointed a Power of Attorney to manage day to day affairs for them (eg just while they are in hospital), but they remain in overall control, then this counts as a device.

If they have appointed a lasting Power of Attorney, and that has been registered, so that the PoA has essentially taken control of their finances for them, then again they score according to the level of independence that they still have in managing their financial affairs.
HOME FINANCES

Financial management includes:
• Managing a bank account
• Paying bills
• Budgeting for personal and domestic needs
• Coping with unexpected financial demands, such as a tax bill or parking fine
• Accesses all financial services, such as bank, post office, ATM

At Level 7, the person:
• Manages all their own finances
  • including paying bills, managing their bank account, budgeting and coping with unexpected demands and is able to access all financial services when required
  • They manage independently, with no concern for vulnerability
  • They choose whether or not to use external financial services e.g. for tax / accounting / investment advice
  • But are able to arrange alternative advice without help, if their normal process fails

Start

Does (Name) need intervention from another person to help them manage their finances?

Yes

No

Helper

Is (Name) able to plan their weekly budget and carry out more than half their financial management themselves?

Yes

No

Does (Name) need all their financial management carried out for them?

Yes

No

Does (Name) need only guidance in planning long-term budgeting over the year, or help coping with unexpected demands, but otherwise manages their finance independently?

Yes

No

Does (Name) need only incidental help such as planning their budget on a monthly basis or overseeing bills?

Yes

No

Does (Name) need all their financial management carried out for them?

SCORE 7

COMPLETE INDEPENDENCE

SCORE 6

MODIFIED INDEPENDENCE

SCORE 5

SUPERVISION OR SET-UP

SCORE 4

MINIMUM ASSISTANCE

SCORE 3

MODERATE ASSISTANCE

SCORE 2

MAXIMUM ASSISTANCE

SCORE 1

TOTAL DEPENDENCE

Notes
Level 7: Able to manage finances independently.
Level 6: Able to manage their finances, but takes more than the reasonable amount of time or there is some concern for their vulnerability.
Level 5: Needs guidance in planning for long-term budgeting over the year, or help coping with unexpected demands, but otherwise manages their finances independently.
Level 4: Needs incidental help, e.g. planning their budget on a monthly basis, or overseeing bills / direct debits to make sure they are paid. Or occasional help to access services such as the bank, post office or ATM machine
Level 3: Needs help with paying larger bills, but able to plan their weekly budget themselves.
Level 2: Needs help for routine weekly budgeting. Able to make choices, but needs help for most of their financial management.
Level 1: Unable to manage their own finances. If they handle money, they require pocket money on a day-to-day basis.
Additional comments for WORK/EDUCATION

6. Work/education
Includes ability to work in their normal working role which might be:

- Employment / self-employed work
- Home maker
- Education – at school, college or university

If they were not employed at the time of their injury, it refers to the type of job they would have done if they were working.

If unable to work at all because of a long-term condition would be rated as 1 in any case.

Like the other EADL items, Work / education is scored in the hypothetical, as they may not be in work at the time of assessment, but this may nevertheless be one of the goals for the rehabilitation programme.

PAWSS (Participation and Work Support Scale)
The PAWSS is an extended version of the work/education items which teases out the physical, cognitive, behavioural and contextual aspects of ability to work / work supports.

This is currently in the latter stages of development and undergoing testing

Work questionnaire
A brief work questionnaire / job matching tool is available to assist in gathering information about their normal working role
WORK/EDUCATION – in their normal job/educational role

Ability to work / study within their normal job/educational role including:
- Travelling to / from work and moving around in the workplace
- Managing the physical requirements (dexterity, stamina etc)
- Communication and cognitive tasks within the job
- Self-presentation, organisation and punctuality
- Safety awareness for self and others within the workplace
- Appropriate interaction with colleagues / clients (if relevant)

At level 7, the person:
- Works effectively in their normal job/educational role
- Manages all physical and cognitive aspects of their work
- Presents for work punctually and suitably dressed
- Completes tasks in an organised and timely manner – including multi-tasking and dealing with the unexpected
- Communication and interacts appropriately with colleagues / clients as the role demands

Start

Does (Name) require intervention from another person to carry out their normal job/educational role?

No

Yes

No helper

Does (Name) require an adjusted work role or environment or take more than the usual amount of effort (e.g., they put in extra time) or do they need more than the normal equipment to manage?

No

Yes

SCORE 7

COMPLETE INDEPENDENCE

Yes

SCORE 6

MODIFIED INDEPENDENCE

Helper, but productivity minimally affected

Is (Name) able to manage most aspects of their work, but requires someone else to:
- Set-up equipment for them
- Structure their environment
- Monitor them, providing only very occasional prompting/correction

Yes

SCORE 5

SUPERVISION OR SET-UP

No

No

Work productivity significantly affected

Does (Name) need constant support, or unplanned intervention many times a day or is effectively unable to manage to work in their normal role?

Yes

SCORE 1

TOTAL DEPENDENCE

No

SCORE 2

MAXIMUM SUPPORT

No

SCORE 3

MODERATE SUPPORT

Yes

SCORE 4

MINIMUM SUPPORT

Is (Name) able to manage > half of the time requiring planned monitoring and support only, with no need for unplanned intervention?
- Work productivity only mildly affected

Notes:
Level 7: No problem – can manage all aspects of their job/educational role independently
Level 6: Manages aspects, but takes more than the reasonable amount of effort, or requires special equipment.
- Able to self-prompt and correct, and structure their own work environment. Work productivity is not affected.
Level 5: Able to do most of their normal work role, but requires help from someone else to set-up equipment, or requires a structured environment, with supervision but only very occasional prompting/correction.
- Work productivity minimally affected.
Level 4: Able to manage >75% of the time. Has regular planned monitoring/support/intervention only
- Work productivity mildly affected (unable to do some parts of their job)
Level 3: Able to manage > half of the time in their job/educational role
- Requires unplanned intervention on top of regular monitoring/support, but infrequently (not every day)
- Work productivity moderately affected (unable to do a significant part of their job)
Level 2: Able to manage < half of the time.
- Requires frequent unplanned intervention on top of regular monitoring (most days)
- Work productivity severely affected (Unable to do a substantial part of their job)
Level 1: Effectively unable or requires constant supervision with intervention (several times a day)