## May NACC CLEARINGHOUSE ON ICF

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http://www.cdc.gov/nchs/about/otheract/icd9/icfactivities.htm

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1. JUNE 16-19 ST. LOUIS NACC AGENDA NOW FINAL WITH 53 PRESENTERS

We had anticipated that this NACC ICF meeting would be the largest yet, and so we added one day to the usual meeting time. With more presentations than ever (53), we were on target. This may be the richest ICF NACC meeting yet in terms of papers, and the tastiest in terms of menus. We have included the final agenda to make you drool, but we have not included the lunch and dinner menus so you would not drool too much! We hope to see many of you in St. Louis. Previous months messages have the registration forms and other information.

2. JUNE 9 DEADLINE FOR LETTER OF INTENT FOR \$3.75M DISABILITY STATISTICS
RRTC USING ICF

Letters of intent are due June 9, and applications will be due at an as yet unannounced later date. In the May 9 Federal Register, NIDRR published proposed priorities for RRTC's and other projects, which are on the web at <a href="http://www.ed.gov/legislation/FedRegister/proprule/index.html">http://www.ed.gov/legislation/FedRegister/proprule/index.html</a>.

The proposed RRTC on Demographics and Statistics specifically mentions the ICF, and NIDRR plans to fund one such center. Here is an excerpt from the announcement, and we quote: "The International Classification of Functioning, Disability, and Health (ICF) is a coding system that allows one to assess disability as a dynamic interaction between the person and the environment. The ICF can assist with generating evidence-based policy, research, programs, and services. To extend the use of the ICF within the United States, a variety of measurement tools and data systems must be examined in addition to further evaluation of the implications of the classification system for U.S. populations. To better serve consumers, NIDRR intends to support the development, evaluation, and improvement of the ICF as it applies to participation of individuals with disabilities in society and the environments, systems, and policies that have the potential to affect their lives. The Assistant Secretary proposes to fund one RRTC on disability demographics and statistics. The RRTC must...(3) Identify, develop as necessary, and evaluate instruments, data sources, administrative records, or other sources that allow Federal policymakers to use the ICF classification system for evidence-based decision making." The proposed funding for the Demographics RRTC is \$750,000 per year for five years. This means that a \$3.75 million RRTC on Demographics and Statistics is likely to be competed and awarded this year. The last day for public comment on these and other NIDRR priorities will be June 9, 2003. This information is posted at this website.

## http://www.ed.gov/legislation/FedRegister/proprule/2003-2/050903g.html

NIDRR will publish the final priority as soon as possible after the comment period closes on the various notices (on June 9, 2003). The proposed priorities are: 84.133B-1, Disability Demographics and Statistics; 84.133B-5, Community Integration Outcomes; and 84.133B-7, Health and Function. All interested parties should start checking the Federal Register for the final NIA during the next two weeks, rather than waiting until after the comment period for the proposed priority closes. For further information, please contact Donna.Nangle@ed.gov or call Donna at 202-205-5880.

### 3. KUKAFKA TO DO \$250,000 ICF CODING PROJECT

Dr. Rita Kukafka is the Principal Investigator at Columbia University for a two-year \$250,000 ICF coding project funded by CDC. This project is designed to evaluate the utility of a medical language processing system (MedLEE) for coding clinical discharge records to the ICF, emphasizing functional language. The IRB has approved project. Manual coding of the files from the rehabilitation center is beginning soon. Coders familiar with the MedLEE protocols have been identified. This year is when the protocol will be developed. Year 2 will involve training others and resolving problematic language using ICF terminology. For more information contact Rita Kukafka, Dr.

P.H., Mailman School of Public Health, Columbia University, New York City, tel 212 305 9193, <a href="mailto:rita.kukafka@dmi.columbia.edu">mailto:rita.kukafka@dmi.columbia.edu</a>.

### 4. ICF AT UNIVERSITY OF PITTSBURGH DEPT. OF OT

Curriculum design at the Department of Occupational Therapy integrates the ICF in a number of ways. They have integrated the ICF with the roles of practitioner and manager. A brief discussion of this can be found in FACETS (Fall 2002) -- the SHRS magazine -- which is available on their website. What this means is that EVERY course in their entry-level curriculum addresses the ICF. In the PhD program, students have to select four areas to specialize in, and one area is titled "the ICF". To prepare students for this "specialization," we organized a doctoral seminar. At this point, the seminar has dealt primarily with basic issues -- what is the ICF, what is problematic about it etc. They also have a sourcebook of conceptual and data-based articles about the ICF. For more information, contact Joan C. Rogers, Ph.D., OTR/L, Professor & Chair, Department of Occupational Therapy, University of Pittsburgh, Pittsburgh PA 15260, 412-383-6621 (Phone), 412-383-6613 (FAX) jcr@pitt.edu.

#### 5. ICF FACTOIDS

The revision of the ICIDH (WHO, 1980) had begun in 1993 and there was substantial U.S. and international participation in the process. Of just over 1,000 individual participants in the revision process from 64 countries named and acknowledged in Appendix 10 of the ICF, 169 persons were from the U.S. (WHO, 2001, pp. 258-263). The WHO drafting team was small, less than a dozen persons...but four North Americans who worked very intensively in Geneva with WHO as Consultants on the drafting team were Jerome Bickenbach, Janice Miller, Jayne Lux, and Cille Kennedy.

6. WASHINGTON CITY GROUP PAPERS FROM JAN. '03 OTTAWA MEETING The Washington City Group website (www.cdc.gov/nchs/citygroup.htm) has been updated with presentations from the second meeting in Ottawa, Canada. Information about the next meeting in Brussels, Belgium (October 14-15, 2003) will be posted as it becomes available. For more information, contact Beth Rasch at NCHS/CDC, Phone: 301-458-4248, ERasch@cdc.gov

# 7. ICF NACC SPOTLIGHT ON MING SHING -- THIS FEATURE MYSTERY GUEST WAS BORN IN MONGOLIA AND SPOKE NO ENGLISH UNTIL HE WAS 12

"Ming Shing" means "bright star", and prophetically, this was Rune J. Simeonsson's name when he was born in Inner Mongolia. His parents (and grandparents, and now his brother) were/are Swedish missionaries with the Swedish Alliance Church, a Christian group. At age 7, his parents moved back to Sweden, where he then had to learn Swedish. Then at age 10, his family moved to Tokyo and stayed for nine years, so he had

to learn Japanese. At age 12, he was introduced to English, after already learning three languages! World traveler that he had become, his university education was USA all the way...a B.A. from Tennessee Temple College in 1963, an M.A.T. from University of Chattanooga in 1966 (where, ironically, Paul Placek taught Sociology from 1968-70), a PhD in Psychology from George Peabody in 1971, and an M.S.P.H. in Public Health from UNC Chapel Hill in 1992. Currently, Rune is Coordinator of the Graduate School Psychology Program at UNC, where he has had a long series of appointments since 1976. He has hundreds of refereed journal articles to his credit and seven books, including Psychological and Developmental Assessment of Children with Disabilities and Chronic Conditions published by Guildford in 2001. Rune hopes that his next book will be the ICF for Children and Youth to be published by the World Health Organization in late 2004. Authorship credit will go to a large number of eminent child development and disability researchers which Rune and his WHO colleague Matilde Leonardi have assembled, but it may well be the new red book that goes on the very top of his shelf. Rune was active in giving ICIDH (1980) workshops in the mid-1990's, has attended more ICIDH-2 Alpha, Beta-1, Beta-2, and Prefinal meetings than he can remember, and waited patiently for ICF (2001) to be finished so he and his international task force could build the ICF for Children and Youth. This is a collaborative effort with CDC and WHO, and the code structure builds on the ICF (2001) code structure. Many of Rune's other professional activities are international in nature, so he never takes vacations just to "get away". He will extend some professional trips and take time off, but with his busy schedule, traditional vacations just don't fit in. Rune also teaches two graduate courses per semester, and always brings the ICF into these four courses which he rotates teaching: "Child Development and Disability", "Psychological Assessment", "Psychological Interventions", and "Applied Investigations". Rune also serves as a doctoral thesis advisor. Thus, a number of top UNC graduates have had a heavy dose of ICF before they leave. Hobbies? Rune always packs his running shoes first, and does 6 miles several times a week. He also has a 16' catamaran for sailing in North Carolina lakes and in the ocean sounds. Rune's wife is on the nursing faculty at UNC, and they have two adult children-one a pediatrician, the other an analytical chemist. It therefore seems that "bright stars" run in the family, and we are fortunate that one of them is working on the ICF for Children and Youth (WHO, 2004)