

June NACC Clearinghouse on ICF Messages

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http://www.cdc.gov/nchs/about/otheract/icd9/icfactivities_yr04.htm

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1. OVERVIEW OF JUNE 1-4 ICF MEETING IN HALIFAX

More than 100 persons registered for the annual North American Collaborating Center (NACC) meeting on the International Classification of Functioning, Disability and Health (ICF) on June 2-4, 2004 in Halifax, Nova Scotia. The meeting was preceded by a one-day pre-conference tutorial, which was attended by 65 persons. The WHO Collaborating Center for the Family of International Classifications (WHO FIC) for North America is housed at the National Center for Health Statistics (NCHS), CDC, and works collaboratively with the Canadian Institute for Health Information (CIHI) and Statistics Canada. The NACC Meetings on ICF are held in the U.S. and Canada on alternate years; in addition to information exchange, the principal objective of this year's meeting was to develop a North American Research Agenda for ICF. The tutorial addressed understanding the ICF in the terminology spectrum for human function and disability. Of particular interest in this regard is mapping between more granular clinical terminologies, such as SNOMED CT, and ICF, as recommended by the Consolidated Health Informatics Initiative (see below). Planning committee members were Paul Placek and Marjorie Greenberg of NCHS, Diane Caulfeild and Kathey Cauley of CIHI, and Alex Ruggieri of Mayo Clinics. Sponsors of the meeting and tutorial were NCHS, CIHI, Statistics Canada, Social Development Canada and the Center for International Rehabilitation Research Information and Exchange (U. of Buffalo). Participants were primarily from the U.S. and Canada but also included representatives of the Australian, Dutch, French, Japanese and Nordic Collaborating Centers as well as other attendees from Australia, Brazil, Guinea, Japan, Nigeria, South Africa and the United Kingdom.

Nenad Kostanjsek, of the Classification, Assessment and Terminology (CAT) Team at WHO, made presentations in both the tutorial and full meeting. Dr. Richard Madden,

Head of the Australian Centre, and Dr. Rune Simeonsson, co-chair of the Team developing the ICF for Children and Youth, also made plenary presentations. Dr. Lee Kirby, Dalhousie University, served as a local host and provided a tour of the Mobility Clinic at the University, which he directs. Dr. John Rietschlin, Manager of Knowledge Development, Office for Disability Issues, Canadian Department of Social Development, participated on a reactor panel the last day of the meeting. About 50 papers presented in plenary and concurrent sessions, as well as poster sessions, covered how ICF can inform work on functioning, disability and health in a variety of arenas. These include clinical practice, quality of care and outcomes research, reimbursement and resource allocation, eligibility for disability programs, public health practice, population health statistics, community development and education of health professionals. Other issues addressed were mapping existing assessment tools to ICF, operationalizing ICF as a classification, and updating and enhancing ICF based on empirical studies.

The papers presented in Halifax, as well as past conferences and studies, will form the basis of a comprehensive North American Research Agenda for ICF. The purposes of this research agenda are to develop a science base for ICF implementation, identify areas for ICF improvement and expansion, engage the research community in ICF applications and identify research for future funding by public and private organizations. The major crosscutting themes identified at the conference were: 1) The Life Cycle of ICF, including development and enhancement; 2) Applications across the full range of settings, including reliability and validity studies; 3) Convergence and integration with other terminologies, instruments and frameworks; and 4) Education and Training, including raising awareness about functioning and disability. Participants in the Halifax meeting were asked to rank the highest priority topics, which will help guide implementation of the research agenda. The conference website www.icfconference.com will soon have PowerPoint presentations from the conference, and will eventually have registration materials for the 11th Annual ICF Conference to be held June 13-17, 2005 at the Mayo Clinics in Rochester, Minnesota. Authors of papers presented in Halifax are being invited to submit full papers by fall 2004 for possible publication in 2005 as Volume 3 in "Disability and Health: ICF - Setting a Research Agenda." Persons may check monthly messages at the Monthly NACC Clearinghouse on ICF at <http://www.cdc.gov/nchs/about/otheract/icd9/icfhome.htm> for more information on the Halifax and Rochester conferences.

2. CONSOLIDATED HEALTH INFORMATICS INCLUDES CONSIDERATION OF ICF

On May 6, 2004, the Secretary of Health and Human Services (HHS) announced that HHS, The Department of Defense, The Veterans Administration, The Office of Management and Budget, and other participating Federal partners adopted fifteen **clinical** vocabulary standards that were recommended by the Consolidated Health Informatics Initiative (CHI), as part of the President's E-Government initiatives. The May 6, 2004, adoption augmented the first five **messaging and vocabulary** standards that were adopted in March 2003, and completed the initial CHI portfolio. The CHI

initiative began in October 2001 as one of twenty-four E-Government initiatives included in the President's Management Agenda (PMA). The completed portfolio of the twenty adopted standards will be used by all Federal agencies as they develop and implement new information technology systems. Details can be found at:

http://www.whitehouse.gov/omb/egov/gtob/health_informatics.htm. Marjorie Greenberg represented the National Center for Health Statistics (NCHS) on the CHI Council, and she and Paul Placek worked on the Disability Vocabulary Group. This involved some comparisons of ICF and SNOMED-CT as they relate to the FIM, and other disability measurements. [The Disability Work Group concluded that no vocabulary standard should be recommended to be adopted at this time for disability content needed by the federal government; however, future research, including mappings between SNOMED CT and ICF, was recommended.](#)

3. BIRTH DEFECTS CONFERENCE

The National Center on Birth Defects and Developmental Disabilities conference, "Navigating Our Future: Aligning Strategies and Science," will be held in Washington, DC on July 26-28, 2004. The on-line registration has been extended until July 21st. For more information, please refer to the websites:

<http://www.psava.com/ncbddd2004/registration> and <http://www.cdc.gov/ncbddd/>.

4. NANCY MAYO WINS \$225,000 FROM CANADIAN INSTITUTES OF HEALTH RESEARCH

Nancy Mayo is pleased to announce that her ICF project has been funded by the Canadian Institutes of Health Research (CIHR) @ \$75,000 for three years (total \$225,000). The title is: "Integration of the International Classification of Functioning (ICF) into Electronic Health Records and Administrative Data Bases. The work involves developing a methodology to create a standard, coded list of problem-indicators common to four disease groups; strokes, respiratory disease, heart disease and musculoskeletal disorders. Her paper (with colleagues) on mapping the SF-12 to ICF and the value of this for describing the stroke population was recently accepted for journal publication. For more information, contact: Nancy E. Mayo, BSc(PT), MSc, PhD; James McGill Professor; Department of Medicine; School of Physical and Occupational Therapy; McGill University; Division of Clinical Epidemiology; Division of Geriatrics; McGill University Health Center; Royal Victoria Hospital Site; Ross Pavilion R4.29; 687 Pine Ave W; Montreal, QC, H3A 1A1; Tel. (514) 842 1231 36922; FAX (514) 843 1493; nancy.mayo@mcgill.ca.

5. SCOTT BROWN ICF PAPER

An online paper, "Explaining Variations in Expenditures for Students with Disabilities: Comparing the Roles of the IDEA Disability Categories and the Abilities Index" is now available; authors are Jay G. Chambers, María Pérez, Miguel Socías, Jamie Shkolnik, Phil Esra and Scott Brown. The paper employs the ICF severity qualifiers to Rune Simeonsson's ABILITIES Index (it's website is <http://csef.air.org/>).

The paper can be found at <http://csef.air.org/publications/seep/national/Rpt7.pdf>, and Dr. Brown can be found at Scott.Brown@ed.gov.

6. TOM SAVEL TO GIVE ICF PAPER AT MEDINFO

Medinfo is the premier triennial international meeting for the medical informatics community. Held every three years since 1974, the San Francisco meeting will be the first time that Medinfo has returned to the United States since 1986. At the September 7-11, 2004 meeting, Tom Savel will present: "The National Electronic Disease Surveillance System (NEDSS) and the International Classification of Functioning, Disability, and Health (ICF): Integrating Disability and Functional Status Data into the National Public Health Information Architecture". Tom Savel, MD is a first-year Public Health Informatics Fellow on assignment with the National Center on Birth Defects and Developmental Disabilities. His current projects have been in the areas of data modeling, data mining, knowledge management, controlled vocabularies and public health bioinformatics. He has been involved in the implementation of outpatient electronic medical record systems as well as the development of clinical software for handheld devices. Prior to coming to the CDC, he was director of clinical product development for the healthcare e-learning company, Medsn (formerly Medschool.com). Dr. Savel's media experience has included being a technology columnist for American Medical News, the weekly journal of the American Medical Association, an Editorial Advisory Board member for Physicians and Computers magazine, and an on-air technology consultant for the Fox News affiliate in Houston, TX (KRIV-TV 26). For more information, contact: Thomas G. Savel, MD; Public Health Informatics Fellow; Centers for Disease Control and Prevention; National Center on Birth Defects and Developmental Disabilities; Office of the Director; Mail-Stop E-87; 1600 Clifton Road; Atlanta, GA 30333; Ph: 404.498.3081; Fax: 404.498.3820; tsavel@cdc.gov.

7. SCHOPEN ANNOUNCES UPDATED DOCUMENTS FROM COLOGNE WHO-FIC MEETING

Besides many documents on ICD and ICF, [Dr. Michael Schopen, host of the 2003 WHO FIC Network Meeting](#), notes that ISO 9999 was adopted into the WHO FIC, and that ICPC-2 is regarded as a WHO-FIC related classification for general practice and primary care and reason for encounter coding wherever relevant. Updated documents are available from the meeting website at <http://www.rivm.nl/who-fic/meeting.htm>. For more information, contact, Michael Schopen, M.D., DIMDI - Deutsches Institut für Medizinische; Dokumentation und Information; Medizinische Klassifikationen; WHO-Kooperationszentrum für das System Internationaler Klassifikationen; Dr. med. Michael Schopen; Waisenhausgasse 36-38a; 50676 Köln; Tel. +49 (0)221 - 47 24 325; Fax: +49 (0)221 - 47 24 444; E-Mail: schopen@dimdi.de; Internet: www.dimdi.de.

8. JANICE MILLER IN THE ICF SPOTLIGHT

Janice is more than a North American ICF star, she has been an ICF international beacon. Janice served the ICF world during the grittier days of ICF revision, a challenging period when ICIDH-2 was being tested and the environment portion was being developed. From 1996 - 2001, at CIHI, Janice led the Canadian efforts in the ICIDH-2 revision process. As co-chair of the WHO Environmental Force Task Force with Rachel Hurst, she completed a four-month secondment with the WHO writing team in 1999. Janice is a physiotherapist and a health management consultant. She was educated in England as a physiotherapist, and returned to Canada to work and to complete her studies at the University of Alberta. In her clinical practice days she specialized in private practice (orthopaedic manual therapy) and cardiac rehabilitation. After completing an MBA in Ottawa, she moved into the health information field at the Canadian Institute for Health Information and recently at the Canadian Institutes of Health Research. Her other international activities include development of the OSCE certification examinations for the American College of Sports Medicine. Janice currently works as an independent consultant. In her spare time, she is an avid hiker and has trekked in the Canadian Arctic, the Himalayas, New Zealand and South Africa. This August she and her husband Nelson are heading for the Yukon for a week of trekking and camping above the tree-line. As the photo shows, Janice likes spending her winter weekends playing in the elements. The photo shows her standing on her 'Quinzee' or snow cave. She built it by piling snow up, out on a frozen lake. Then she let it settle or 'sinter'. After a few hours she shoveled out the inside. The sticks ensured that she didn't shovel through the wall of her shelter! She insists that it slept three persons very comfortably in this one at -25C temperatures!. One of Janice's two Scottish terriers, Abby, was in the snow cave too! To receive an invitation to sleep in her next snow cave, contact her at: Janice Miller BScBio BScPT MBA; JMiller & Associates, Ottawa Canada; miller.janice@sympatico.ca.