CALL FOR PARTICIPATION

CONFERENCE OVERVIEW
The 9th North American Collaborating Center Conference on ICF – is hosted by Washington University in St. Louis and sponsored by the World Health Organization Collaborating Center for the Family of International Classifications for North America. It is being held in St. Louis, Missouri, June 16-19, 2003. This conference will bring together people from across the United States and Canada involved with the ICF. WHO representatives are invited and other international colleagues are welcome.

The overall aim of the ICF classification is to provide a common language and framework for the description of human functioning and disability as an important component of health and social care. Such standardization of language supports improved communication between sectors and people with disabilities, and facilitates the comparison of data nationally and internationally. It establishes a culturally applicable operational tool covering the whole life span.

CALL FOR ABSTRACT PROPOSALS
Individuals who wish to participate in the 9th NACC Conference program may submit proposal(s), in English, to the Program Committee. The proposal(s) must be received by April 1, 2003 and address one or more of these topics:

- ICF use in surveys
- ICF in clinical practice
- ICF use in administrative records
- Using ICF as a code set to record and classify functional status for payment and quality purposes
- Coding with ICF
- Using ICF and ICD together
- Preparing ICF codebooks, operations and procedures manuals
- ICF conceptual and issue areas
- Addressing strategies for ICF implementation
- Discussing ICF assessment tools crosswalked with other assessment tools
- Basic ICF research
- Developing ICF training tools and identifying ICF educational needs.
- ICF and Teaching
- ICF and Environment
- ICF and Participation
- International Updates

If you wish to discuss your abstract prior to submission, please contact Paul Placek or David Gray.

Paul J. Placek, PhD, Senior Health Statistician, Data Policy and Standards Staff, Office of the Center Director, National Center for Health Statistics, Centers for Disease Control and Prevention, 6525 Belcrest Road – Room 1100, Hyattsville, MD 20782, tel 301-458-4437, fax 301-458-4022, pjp2@cdc.gov.

David B. Gray, PhD, Associate Professor, Program in Occupational Therapy, Washington University, Box 8505, 4444 Forest Park Ave, St. Louis, MO 63108, tel 314-286-1658, fax 314-286-1601, grayda@msnotes.wustl.edu.

PROPOSAL REQUIREMENTS
A proposal must not exceed two pages in length (approximately 300-500 words) and must conform to the formatting guidelines provided below. It must provide a concise overview of the information to be presented. The following must also be submitted with the proposal:

1. Completed proposal cover form (enclosed) including the name, title, organization, address, telephone, facsimile and e-mail address of each presenter
2. A signed copy of the "Permission to Duplicate" (enclosed).

PROPOSAL FORMAT REQUIREMENTS
- 1” margins (width and length)
- Single-column format only
- Title: 12 point "Times Roman" font in bold
- Text: 10 point "Times Roman" font; single line spacing; section headers in bold
- Do not use smaller font sizes for footnotes, references, etc.
SUBMISSION OF ABSTRACT PROPOSALS
Proposals and bios may be forwarded to the Program Committee by electronic format ONLY; fax copies will not be
accepted. Forward proposals and bios as e-mail attachments (Microsoft Word for PC-format) to
welchp@gwbmail.wustl.edu. The subject line of the e-mail should read "NACC Conference - Proposal" and be
followed by the name of the submitter, e.g. "NACC Conference - Proposal for Paul Placek"

PROPOSAL ACCEPTANCE PROCESS
All proposals will be acknowledged by email. Acceptance, rejection, or Modify and Resubmit feedback will
be given within 10 days of receipt. Plenary presentations are most typical but panel discussions and other
presentation formats will be considered.

• Proposals will be judged on the following criteria:
  a. The proposal being presented is innovative and/or original
  b. The proposal has sufficient detail explaining what is being addressed and presented
  c. The proposal is well organized
  d. The proposal being presented adds new insights and/or knowledge
  e. The proposal will be of interest to a broad audience.

• If a proposal is accepted, the Program Committee will determine the duration and presentation format of the
  presentation, as well as the presentation date and time. If there is a date that you will not be able to present,
  please note it on the Proposal Cover Form. Once a date and time has been confirmed to you, no changes will be
  made.

ACCEPTED PROPOSALS
The submitter of accepted proposals will be notified by April 25, 2003, by e-mail or fax. The Program Committee
must receive final speaker’s notes and presentation materials by May 26, 2003.

PRESENTATION FORMAT
As noted above, PowerPoint visual support is preferred although an overhead projector will be available as a
backup.

CONFERENCE ATTENDANCE AND REGISTRATION
Speakers are requested to submit a registration form for the conference, in addition to submitting their proposal
request. Travel and accommodation for accepted speakers will not be covered. Attendees should make their own
hotel reservations - further information available on the Conference registration form.

REJECTED PROPOSALS
The submitter of rejected proposals will be notified by April 25, 2003 by e-mail or fax.

DEADLINES
a. The Program Committee must receive proposals by April 1, 2003.
b. The Program Committee must receive final speaker’s notes and presentation materials by May 26, 2003.
PROPOSAL COVER FORM

Please note that the name, title & organization name provided here will be used in the preliminary and final programs. Should any changes arise to this information, please inform the Conference Office immediately.

PRESENTER

Name:  
Title:  
Organization:  
Address:  
City:  Province/State:  
Postal/Zip Code:  Country:  
Tel:  Fax:  
E-mail:  Web site:

CO-PRESENTER (if applicable)

Name: 
Title: 
Organization: 
Address: 
City:  Province/State:  
Postal/Zip Code:  Country:  
Tel:  Fax:  
E-mail:  Web site:

**Please attach an additional sheet if there is more than one co-presenter.

Preferred participation venue/format: (please check one only)

☐ Plenary Presentation
☐ Panel Discussion
☐ Other ____________________________

Topic:

☐ ICF use in surveys
☐ ICF in clinical practice
☐ ICF use in administrative records
☐ Using ICF as a code set to record and classify functional status for payment and quality purposes
☐ Coding with ICF
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☐ Addressing strategies for ICF implementation
☐ Discussing ICF assessment tools crosswalked with other assessment tools
☐ Basic ICF research
☐ Developing ICF training tools and identifying ICF educational needs
☐ ICF and Teaching
☐ ICF and Environment
☐ ICF and Participation

Call for Participation - FINAL

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Please return completed forms and abstract proposal submission by e-mail to: welchp@gwbmail.wustl.edu

Complete forms only may be faxed to: Trish Welch Saleeby, Conference Coordinator
Washington University
Program in Occupational Therapy
(314) 286-1601
Permission to duplicate the document entitled:

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Author(s):

______________________________________________________________________________________

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If the document has been written in the course of employment by a government agency such that no copyright exists, please mark an X here _____.

9th North American Collaborating Center Conference on ICF reserves the right to duplicate all or part of the presentations submitted for the purposes of Conference Proceedings

"I represent and warrant that I am authorized to grant permission to duplicate materials submitted as they pertain to the 9th North American Collaborating Center conference on ICF "

(Signature)

(Print Name)

(Title, if not author)

(Date)

9th North American Collaborating Center Conference on ICF Conference Office must receive this signed agreement before the proposal can be accepted.