

July 2003 NACC CLEARINGHOUSE ON ICF MESSAGES

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1. Sixteen (16) ICF ARTICLES IN *DISABILITY AND REHABILITATION*

We are delighted that the special issue of *Disability and Rehabilitation* is out (Vol. 25, Numbers 11-12, 3 June 2003) edited by Marijke de Kleijn, and is now published! There are 15 articles:

"Comparing disability survey questions in five countries: a study using ICF to guide comparisons", by G. Swanson, L Carrothers and K.A. Mulhorn

"The ICF as a framework for national data: the introduction of ICF into Australian data dictionaries", by R. Madden, C. Choi and C. Sykes

"Reference to ICIDH in French surveys on disability" by P. Roussel and C. Barral

"The long way from the International Classification of Impairments, Disabilities and Handicaps (ICIDH) to the International Classification of Functioning, Disability and Health (ICF)" by M.W. de Kleijn-de Vrankrijker

"The International Classification of Functioning, Disability and Health: a new tool for understanding disability and health" by T.B. Ustun, S. Chatterji, J. Bickenbach, N. Kostanjsek and M. Schneider

"Measuring participation according to the International Classification of Functioning, Disability and Health (ICF)" by R.J.M. Perenboom and A.M.J. Chorus

"Applying the International Classification of Functioning, Disability and Health (ICF) to measure childhood disability" by R.J. Simeonsson, M. Leonardi, D. Lollar, E. Bjorck-Akesson, J. Hollenweger and A. Martinuzzi

"Functioning and disability associated with mental disorders: the evolution since ICIDH" by C. Kennedy

"Terrorism and the International Classification of Functioning, Disability and Health: a speculative case study based on the terrorist attacks on New York and Washington" by R. Seltser, M.A. Dicowden and G.E. Hendershot

"On the application of the ICIDH and ICF in developing countries: evidence from the United Nations Disability Statistics Database (DISTAT) M. Mbogoni

"The International Disability Rights Movement and the ICF" by Rachel Hurst

"The role of Environment in the International Classification of Functioning, Disability and Health (ICF)" by M. Schneidert, R. Hurst, J. Miller and B. Ustun

"The subjective dimension of functioning and disability: what is it and what is it for?" by S. Ueda and Y. Okawa

"Past and future use of the ICF (former ICIDH) by nursing and allied health professionals" by Y. Heerkens, Y. van der Burg, H.T. Napel and D. van Ravensberg

"Value and application of the ICF in rehabilitation medicine" by G. Stucki, T. Ewert and A. Cieza

A photocopy of the complete set of 16 articles is available free by emailing your snail mail address and telephone number to Paul Placek at PJP2@CDC.GOV

2. Six (6) ICF ARTICLES IN *HEALTH CARE FINANCING REVIEW*

The Spring 2003 Vole 24 No. 3 issue of HCFR has a number of articles which use ICF, including:

"Significance of Functional Status Data for Payment and Quality" by Steven B. Clauser and Arlene S. Bierman

"Measuring Function for Medicare Inpatient Rehabilitation Payment" by Grace M. Carter, Daniel A. Relles, Gregory K. Ridgeway, and Carolyn M. Rimes

"Capturing and Classifying Functional Status Information in Administrative Databases" by Lisa I. Iezzoni and Marjorie S. Greenberg

"WHO's ICF and Functional Status Information in Health Records" by T. Bedirhan Ustun, Somnath Chatterji, Nenad Kostansjek, and Jerome Bickenbach

"Functional Status and Health Information in Canada: Proposals and Prospects" by Jerome Bickenbach

"From Clinical Records to Regulatory Reporting: Formal Terminologies as Foundation" by Marcelline R. Harris, Alexander P. Ruggieri, and Christopher G. Chute

A photocopy of the complete set of 6 articles is available free by emailing your snail mail address and phone number to Paul Placek at PJP2@CDC.GOV

3. ICF ARTICLE IN *AJPH*

The July 2003 Vol. 93 No. 7 issue of the *American Journal of Public Health* includes an article entitled "Mobility Limitations and Complementary and Alternative Medicine: Are People with Disabilities More Likely to Pray?" by Gerry E. Hendershot. In it, he codes mobility functions to ICF codes. Reprints available from Gerry E. Hendershot, 4437 Wells Pkwy, University Park, MD 20782 or ghendershot@earthlink.net

4. RUGGIERI STARTS SNOMED/ICF SPECIAL INTEREST GROUP

"Terminology and Concept Representation Standards Convergence in the Human Functioning and Disability Domain"

A self-organizing core interest has developed among participants in the WHO North American Collaborating Center around the need for standardized concept representation in the human functioning and disability domain using ICF as a starting point.

Background and Significance. The needs that drive the argument for common terminology and concept representation standards in health care include interoperable information across health care settings, comparability of information to identify best practices, and logical aggregation of data in like individuals to identify population characteristics important in policy formulation and decision. In a recent speech at an agenda-setting meeting of the [National Health Information Infrastructure](#) (NHII), [Secretary of HHS Tommy Thompson](#) added more fervor and purpose to the adoption of health care data and information standards by calling for their quick adoption, particularly within electronic health records, to help insure effective and efficient care, to

identify best practices, and to enable decision support for patient safety. His announcement of the purchase of a national license for SNOMED CT™, a widely acknowledged formalized medical terminology, signifies a major step forward in terminology and data standards adoption in the US health care system. Like other health related domains, the human functioning and disability domain (HFDD) needs mechanisms to develop, study, evaluate, adopt, and implement data and information standards to support universal meaning conveyance.

Prior Work. Concept representation standards in the functioning and disability domain have emerged from several efforts. Certain nursing terminology efforts have provided content relevant to this domain. When SNOMED RT converged with the National Health Service “Clinical Terms” in the UK, resulting in what now is SNOMED CT™, considerable content coverage relevant to the HFDD was added. Recently the WHO International Classification of Functioning and Disability (WHO ICF) has provided representation potentially important to the HFDD.

Aim. The purpose of this group will be to explore, foster, seek, and work to achieve convergence in concept representation in the domains covering health, human functioning and disability. The SIG will seek to realize this purpose by

- Enlisting broad participation from stakeholding domains within the HFDD
- Creating an infrastructure that will support constructive, purposeful shared interaction among stakeholders
- Identify and examine candidate terminology systems that support concept representation in the HFDD as a starting point for proceeding
- Foster convergence of these systems towards a common, universal concept representation system for HFDD that will be meaningful and useful to all domains
- Identify gaps and opportunity for further development and enhancement of a shared common concept representation system in the HFDD guided by the needs of all stakeholders in this domain

Approach. The group will use cost effective and mutually available means for interaction and communication such as conference calls, list servers, newsgroups, and e-mail. The group will look for opportunities to meet and interact through mutual attendance at national and mutual professional society meetings and at meetings of the NACC. The SIG will generate informative work products such as documents containing recommendations and consensus statements on the path and direction of terminology convergence in the human functioning and disability domain. Processes for terminology development, management, and implementation will be elaborated and communicated. Please contact Alex Ruggieri, MD, MHS Assistant Professor of Medicine and Medical Informatics, Division of Medical Informatics Research, Department of Health Sciences Research, Mayo Clinic Ruggieri@mayo.edu, 507-538-0630 about interest in participation at any level.

5. NEW BROCHURE AND TABLE TOP EXHIBIT ON NACC CLEARINGHOUSE ON ICF

A new brochure and also a table top exhibit debuted at the St. Louis NACC Meeting on ICF in June 2003. The trifold brochure covers: The ICF, The North American

Collaborating Center, How ICF Enhances ICD-10, Recent Topics Covered in the NACC ICF Clearinghouse E-mail Newsletter, and a coded case example. The table top exhibit has parallel information to the brochure, and is about 1' x 4' in size, but folds down to airline carry-on size. Several extra table top exhibits have been produced, and they are available free as short term loaners for your ICF workshops/professional meeting displays/seminars. About 1,000 brochures are available, free, for use in courses and seminars. For free brochures or the loaner table top exhibit, contact Paul Placek at PJP2@CDC.GOV or Linda Washington at LRW1@CDC.Gov with your needs.

6. UPDATE ON ICF USE IN COLLEGE COURSES

Dr. Kristine Mulhorn of the University of Michigan has completed another update of North American Colleges and Universities which use ICF in their curricula. It is attached.