

MAY-JUNE 2006 NACC CLEARINGHOUSE ON ICF MONTHLY MESSAGE

1. **VANCOUVER ICF CONFERENCE SUCCESSFUL WITH RECORD NUMBER OF ABSTRACTS AND ATTENDEES**
2. **ICF COMMUNITY OF PRACTICE ESTABLISHED AT:**
<http://cirrie.buffalo.edu/icf/cop/>
3. **SAVE THE DATE: JUNE 5-7, 2007 --- 13TH ANNUAL NACC CONFERENCE ON ICF IN NIAGARA FALLS, NY**
4. **SEEKING SPINAL CORD INJURY EXPERTS FOR RESEARCH ON ICF CORE SETS**
5. **SPANNING THE GLOBE: WELCOME, ADDITIONAL EUROPEAN READERS OF THIS NACC CLEARINGHOUSE NEWSLETTER**
6. **REED AND STARK TO GIVE ICF WORKSHOP OCTOBER 1, 2006 AT ACRM - ASNR JOINT CONFERENCE**
7. **STEINFELD'S CENTER RETHINKS UNIVERSAL DESIGN USING ICF**
8. **EARLY CHILDHOOD EDUCATION PROJECTS AT THE NATIONAL DISABILITY AUTHORITY OF IRELAND**
9. **JULY 20 ABSTRACT DEADLINE FOR FEB. 22-24, 2007 ACTIVE LIVING RESEARCH CONFERENCE IN CALIFORNIA**
10. **LET OTHERS KNOW ABOUT YOUR ICF ACTIVITIES**
11. **SPOTLIGHT ON MARCIA SCHERER, Ph.D.**

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1. **VANCOUVER ICF CONFERENCE SUCCESSFUL WITH RECORD NUMBER OF ABSTRACTS AND ATTENDEES**

Between June 5-7, 2006, the North American Collaborating Center (NACC) for the World Health Organization Family of International Classifications (WHO-FIC) conducted its 12th Annual Conference on the International Classification of Functioning, Disability and Health (ICF) in Vancouver, British Columbia. The NACC Conference

featured outstanding opening and closing keynote speakers, popular plenary speakers, more than 120 attendees, and a record number (48) of papers and posters accepted for presentation.

The overall conference theme was "Living in Our Environment: The Promise of ICF," and one of the two concurrent session tracks throughout the Conference had been exclusively dedicated to that theme. This was the first NACC Conference thematically devoted to dialogue and current research on the Environmental Factors domain within ICF.

Many of the PowerPoint files representing the NACC Conference plenary and concurrent session presentations have been posted on the ICF Conference website, for your retrospective review. Visit this web page:

http://www.icfconference.com/prog_pres.html

. . . and scroll down the page to the links for paper topics that interest you.

This year's NACC Conference was also unique because it was a "shared conference" with the Canadian organization known as RehabNet, an association of Canadian rehabilitation facility administrators, executives and clinicians concerned about quality of care and adequately measuring outcomes in rehabilitation settings. RehabNet is also a component of the Canadian Association of Physical Medicine and Rehabilitation, which also met in Vancouver at an alternate venue later in the week. Day 2 of the two-day NACC ICF Conference was a shared day between the two conferences; it represented Day 1 of the two-day RehabNet Conference at the same hotel venue. This "shared conference" inspired a good amount of cooperative learning, synergy, and cross-fertilization of ideas about how the ICF can be optimally utilized in clinical rehabilitation settings for characterizing caseloads or subpopulations, measuring outcomes, and evaluating intervention strategies.

A brief description of RehabNet, and the Welcoming Message to its members from the Conference Chair, Ms. Patty Flaherty from the G.F. Strong Rehabilitation Centre in Vancouver, can be found at this web page:

<http://www.theciainc.com/conferences/rehabnet/>

The NACC Conference began on Monday, June 5, with Poster Session authors setting up their display materials, and a Welcome Reception hosted by the Conference sponsors, the Canadian Institute for Health Information (CIHI), Statistics Canada, and the U.S. National Center for Health Statistics (NCHS).

On Tuesday, June 6, representatives of the three sponsoring organizations delivered welcoming remarks to kick off the Conference in a spirited manner. The opening keynote speaker was the Honorable Sam Sullivan, Mayor of Vancouver. As a teenager, Mayor Sullivan experienced a spinal cord injury that yielded his quadriplegia, but his story does not end there. Confronting his injury and the characteristics of his disability, this young Vancouverite achieved an inspiring array of accomplishments. During his

keynote presentation, Mayor Sullivan briefly described some of his avocations which quickly became his vocations:

- founding the Disabled Sailing Association in British Columbia, which features Martin 16 sailboats that can be operated by persons with paraplegia or quadriplegia using only their mouths for steering and control; their website is at: <http://www.reachdisability.org/dsa/>
- founding the Vancouver Adapted Music Society, which works coordinates the talents and activities of more than 50 disabled musicians in the Vancouver area, including Sam's former pun-inspired band, "Spinal Chord"; the VAMS website is at: <http://www.reachdisability.org/vams/index.htm>
- founding the Tetra Society, which recruits skilled volunteer engineers and technicians to develop simple assistive devices toward greater independence and community integration; the Tetra Society of North America's website is located at: <http://www.tetrasociety.org/>; and
- founding the British Columbia Mobility Opportunities Society, which utilizes "TrailRider" devices that allow persons with substantial mobility impairments to gain access to wilderness areas; although the TrailRider vehicle requires the cooperation of personal assistants, the opportunities provided for broadened disabled access over rough terrain make this a unique, special program. The Mobility Opportunities Society's website is located at: <http://www.reachdisability.org/bcmos/>.

Mayor Sullivan admitted he had only recently learned about the ICF, but acknowledged that identifying both barriers and facilitators in both physical and social environments represented important keys for enhancing the independence and community integration of disabled persons, throughout Canada and North America. Mayor Sullivan expressed optimism that the 2010 Winter Olympic Games and Paralympic Games, to be hosted in Vancouver, would yield not only new buildings and physical environmental changes in Vancouver, but also attitudinal changes about the capabilities represented by the populations with disabilities. He pledged to make Vancouver not only accessible but inclusive.

A biographical sketch of Mayor Sullivan can be found on this City of Vancouver web page: <http://www.city.vancouver.bc.ca/ctyclerk/councillors/sullivan/#bio>.

Another highlight of Day 1 of the NACC ICF Conference was a morning plenary panel featuring Professor David Gray from Washington University in St. Louis, and Professor Patrick Fougeyrollas from the Centre for Interdisciplinary Research in Rehabilitation and Social Integration at the University of Laval (Quebec). They provided a stimulating look at the measurement of participation and a comparison of ICF with the "Disability Creation Process" (DCP), which represents a social anthropological perspective. Later on Day 1, the closing plenary speaker was Professor Matilde Leonardi from the Italian National Neurological Institute, described "Italian Advances in ICF Education, Social Policy and the European Union." Dr. Leonardi reviewed an impressive array of advances

in ICF implementation and training, observing that well over 1,000 professionals have completed the Basic and Advanced ICF Courses in 16 countries.

On Wednesday, June, 8, Day 2 of the NACC Conference, the sponsors endeavored to maintain the consistently high-level of ICF training that has characterized the conference series, by presenting the tutorial entitled "ICF 101: A Primer Workshop." This one-hour workshop featured Susan Stark from Washington University, Lynn Bufka from the American Psychological Association, Andrew MacKenzie from Statistics Canada, and John Hough from the National Center for Health Statistics, serving as tutors. The tutorial included four coded clinical cases as examples, and an explanatory rendering of how ICF codes are integrated within the questions of the Canadian Participation and Activity Limitation Survey (PALS), a quinquennial national disability survey. Also on Day 2, Professor Rune Simeonsson from the University of North Carolina, and Dr. Don Lollar from the CDC National Center on Birth Defects and Developmental Disabilities, presented a plenary session entitled "Rights, Rehabilitation and Disability," demonstrating how ICF and the ICF Children and Youth version (ICF-CY) constitute a universal reference for developing national policies, legislation and practice that would embody or enact many components of a disability rights agenda. Tutorials also were presented on the ICF-CY and the American Psychological Association's Procedural Manual and Guide for a Standardized Application of the ICF (also referred to as the APA Manual for Health Professionals).

At the end of Day 2, the closing plenary speaker was the Honorable Michael Harcourt, former Mayor of Vancouver (1980-86) and former Premier of British Columbia (1991-96). Now retired from politics, Mr. Harcourt provides leadership to the organization known as "CitiesPlus," which is affiliated with the University of British Columbia and which focuses on urban economic, social and environmental priorities that yield sustainable metropolitan areas with healthy environments. Those credentials would be substantial enough for a plenary speaker at the NACC Conference, but the Premier's first-hand understanding of the importance of accessible environments was forged during his long recovery from a spinal cord injury he experienced in 2002. That gave him exposure to the fact that most urban environments are inaccessible, and led him to invoke disabled accessibility as a component of suitable, sustainable local community policies. Vancouver and British Columbia are among North America's most accessible environments, and efforts like those embodied by applying the ICF could even enhance that degree of accessibility, perhaps even in tandem with the oncoming 2010 Winter Games and Paralympics.

On behalf of the NACC, Marjorie Greenberg from the National Center for Health Statistics presented a conference wrap-up entitled "Challenges of ICF." Among these challenges are the following:

- Promoting the ICF framework as a conceptual organizer for projects and policies related to disability;

- "Using ICF to enter the debate" (quoting Dr. Leonardi), meaning that the level of constructive dialogue in contentious policy considerations could be enhanced by utilizing the ICF;
- Using ICF as a framework for research on health-related quality of life;
- Using ICF as a rubric for constructing and evaluating survey questions;
- The need to operationalize the Environmental Factors chapters more thoroughly and transparently;
- The need to delineate better the Activities and Participation (A&P) domain within ICF;
- The desirability of developing and maintaining a common information portal through which inquirers and investigators could view links to and among many different ICF research projects, which currently might only be known regionally or nationally rather than internationally;
- The need to continue "mapping" efforts that map existing functional assessment instruments to the ICF; and
- The need to finalize the ICF-CY during the coming year.

In her remarks, Marjorie also reiterated the importance of working with the WHO-FIC Implementation and Education Committees on an enhanced "ICF Educational Plan," designed to broaden the opportunities to learn about and subsequently use ICF as much as possible, particularly in African and other so-called "Information Paradox" countries, where the burden of disease and disability is high but information resources are scarce. To that end, Marjorie also encouraged all conference attendees to contribute to the development and eventual operation of the international information portal.

Finally, Marjorie introduced Professor John Stone from the University of Buffalo, who provided preliminary information about the 13th Annual NACC Conference on the ICF, which is scheduled to be held June 5-7, 2007 in Niagara Falls, New York. More information about the 2007 ICF Conference is presented in Item # 3, "Save The Date," below in this Newsletter.

A summary report outlining the full NACC Conference is under preparation, and upon its release the meeting summary will be posted on the ICF Conference website. We will announce that posting in a forthcoming edition of this NACC Clearinghouse Newsletter.

The NACC sincerely expresses its appreciation to all those who contributed to making this year's ICF Conference among the most successful events in the series. Join us again in 2007 in Niagara Falls!

- 2. ICF COMMUNITY OF PRACTICE ESTABLISHED AT:**
<http://cirrie.buffalo.edu/icf/cop/>

The new ICF Community of Practice (COP), a "virtual community" facilitated by the Center for International Rehabilitation Research Information and Exchange (CIRRIE), was unveiled during the NACC Conference in Vancouver. As described in our March, 2006 edition of this Newsletter, the COP has three interactive components:

1. ICF FORUM: an *interactive* venue dedicated to fostering online "threaded discussions" of various ICF topics suggested by our moderator, expert of the month, or our users.
2. ICF BULLETIN BOARD: post messages and *interactive* queries needing short answers.
3. ICF PRESENCE at Interagency Subcommittee on Disability Statistics (ISDS) teleconferences: a bi-monthly *interactive* presentation of an ICF topic during the ISDS teleconference, with abbreviated minutes of the ICF discussions subsequently posted on the CIRRIE website as a component of this Community.

Users determine the content of the ICF Forum and ICF Bulletin Board by submitting messages, message threads, and discussions. Within the ICF Forum component, it's important that Community members respond to threaded discussions directly within the website, rather than directly to the initiating authors of the thread; in this manner, every Community member can see the cumulative contributions of all other members. Users can interactively join the ICF presentations at ISDS meetings.

Initial message threads and discussions have been developed by Dr. Paul Placek, in collaboration with nine ICF experts. The website's architecture has been developed by Marcy Daumen at the University of Buffalo, and overall direction for the new Community has been provided by Professor John Stone at the University of Buffalo, who originated the idea for this virtual community. At the time of this Newsletter's distribution, there were 20 threaded discussions underway within the ICF Forum component, and seven announcements posted on the ICF Bulletin Board.

We are grateful to the ICF experts named below who have contributed their expertise by initiating the following topics, which are samples of the lively exchange already underway within the ICF Forum. Join them!

1. **Clinical applications with ICF-based assessment tools:** Professor Lise Poissant from the University of Montreal posed a position statement and then asked two questions:
 - a) How will the availability of ICF-coded functional status indicators on EHR [Electronic Health Records] optimize patient monitoring over the continuum of care?
 - b) How will the future availability of these functional status indicators on administrative databases facilitate population health surveillance, epidemiologic research and health services planning?

2. **Use of technology in processing electronic health records:** Professor Carl Granger from the University at Buffalo made a position statement and continues to seek comment on 12 related but distinct questions, including, for example, "How can we best manage the continuum of care?" and "How can a clinical program link services and outcomes across time and all levels of care?"
3. **Education:** Dr. Harry Feliciano, Medical Director for Palmetto GBA, a company operating throughout the U.S. as a fiscal intermediary for Medicare services and facilities, provided an opening statement and then posed two provocative questions for discussion:
 - a) The prevalence of chronic disease and disability increases with age. As our population ages, how do we ensure that clinicians know about the ICF?
 - b) How can we best support the collection of information describing the intervening variables between "disease/injury" and "functioning"?
4. **Policy:** Dr. Corinne Kirchner from the American Foundation for the Blind raised three questions for discussion on mobility issues among visually-impaired persons, focusing on assistive mobility technology and environmental descriptors at a neighborhood level.
5. **Assistive technology:** Dr. Marcia Scherer from the University of Rochester Medical Center asked the following stimulating questions:
 - a) How does the current ICF conceptualization of Assistive Technology (AT) fit with your perspective and your experiences?
 - b) How can we best address the importance of AT in consideration of the ICF and its components?
6. **The Life Cycle of ICF:** Dr. Gerry Hendershot asked two important thought-provoking questions:
 - a) Because the ICF is intended to be international and standardized, what general rules of procedure should be applied to the process of adding codes?
 - b) Are there reasonably-priced, user-friendly, and rigorous techniques available to use in creating additional codes?
7. **David Gray's Course Thread:** This is an individualized thread posted by Professor Gray that actually incorporates the ongoing classroom-oriented discussion and projects pursued by Occupational Therapy students enrolled in David's Washington University course entitled "Applied

Clinical Research." Dr. Gray encourages other members of the Community of Practice to join him and his students in these threaded discussions, to enrich their overall discussion. David asked a set of 13 thematic questions that would not only prompt discussion within this Community, but also induce important analytic skills among all his students --- whether enrolled or not!

8. **Ethical Issues; self-assessments by persons with disabilities:** Professor Kim MacDonald-Wilson from the University of Maryland commented on persons with psychiatric disabilities, and asked four questions for discussion, including: "Given that the ICF is a biopsychosocial approach that seeks to include the perspective of people with disabilities, and is intended to focus on functioning and not only on problems in functioning, what are the implications of framing the ICF to focus on both strengths and limitations so that a consumer perspective and a truly neutral approach is incorporated?"
9. **ICF in outcomes research:** Professor Nancy E. Mayo from McGill University reviewed rehabilitation strategies pertinent to the conceptual framework of the ICF, and asked the following questions:
 - a. Could the ICF be used in evaluative research to identify the outcomes that are targeted by the rehabilitation modalities?
 - b. How can multiple approaches or techniques (strategies) be combined into a rehabilitation intervention with the aim of normalizing an individual's performance or capacity for activity?

Because the Community of Practice is operating from this new interactive website, Dr. Stone, Dr. Placek and Ms. Daumen have encouraged users to report bugs or other difficulties associated with navigating through the site. There is a feedback section, and the Community stewards have asked that each Community member who visits the website also will answer several questions about the degree of ease or difficulty associated with navigating the site. The Community stewards are also planning a "second launch," with even more ICF expert contributions coming soon to fill out the Community's space. Therefore if this sampler of this month's message threads does not immediately motivate you to engage in a threaded discussion, tune in again for still more new message threads, topical and in-depth discussions, and didactic resources that will help us all enjoy the benefits of being in a worldwide Community of Practice.

3. **SAVE THE DATE: JUNE 5-7, 2007 --- 13TH ANNUAL NACC CONFERENCE ON ICF IN NIAGARA FALLS, NY**

Thanks to Dr. John Stone and his colleagues at the University of Buffalo, preliminary information about the 13th Annual NACC Conference on the ICF has already been posted on this CIRRIE website:

<http://cirrie.buffalo.edu/icf/icfconference.html>

The meeting theme will be determined by the NACC during the coming months, but a tentative theme has been expressed as "Educating on the ICF," which would certainly align well with the conclusions from the 12th Annual NACC Conference in Vancouver that have prompted the development of more and better ICF training and educational materials and processes.

A pre-Conference Workshop is planned for Tuesday, June 5, 2007, although the topic has not yet been finalized. At the time this Newsletter was distributed, a \$50 registration fee had been proposed for this didactic Workshop.

The full content of the Conference would be presented on the subsequent days, Wednesday and Thursday, June 6-7. Conference planners are contemplating charging a very reasonable registration fee, provisionally estimated to be about \$220, for the two-day conference. As in previous years, another iteration of the optional but nevertheless very popular "Evening Social Event" is being planned for your enjoyment and professional networking, and it will be similarly reasonably priced.

Even though most of the plans for next year's event are only preliminary at this time, the actual Conference venue has been determined: our Conference will be held at The Conference Center Niagara Falls, a new full-service conference facility only a short distance from the attractive beauty of the Niagara Falls themselves. The new Conference Center is also adjacent to the hotel proposed for our Conference accommodations, the Holiday Inn Select Hotel, which during 2006 is undergoing substantial renovations in anticipation of its new operation as a Crowne Plaza Hotel property in 2007.

NACC anticipates that the 2007 Conference Sponsors will include not only CIHI and NCHS, but also CIRRIE itself operating from the nearby University of Buffalo, as well as the U.S. National Institute for Disability and Rehabilitation Research (NIDRR) within the Department of Education's Office of Special Education and Rehabilitative Services.

For more information, visit the CIRRIE website listed at the beginning of this entry, or directly contact Dr. John Stone at CIRRIE:

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4. SEEKING SPINAL CORD INJURY EXPERTS FOR RESEARCH ON ICF CORE SETS

Research continues around the world into the compilation and testing of the properties of "Core Sets" of ICF codes that can be used in daily practice, among a wide variety of clinical specialties or applications.

The "Development of ICF Core Sets for Spinal Cord Injury" (SCI) Project at Ludwig-Maximilian University in Munich is one such research activity currently underway. This project is now soliciting the participation of nurses, occupational therapists, physical therapists, physicians, psychologists, and social workers who have expertise in treatment of individuals with spinal cord injury, to join in this effort to develop SCI-oriented Core Sets. This SCI Project is an international research project in cooperation with the International Spinal Cord Society (ISCoS), the International Society of Physical Medicine and Rehabilitation (ISPRM), and WHO.

If you practice as one of these types of clinicians, and if you can contribute your expertise to the SCI Project or know of another professional who might be able to do so, please send the project personnel an E-Mail message and ask for a summary of the project and a copy of their expert survey. Our German colleagues would certainly welcome your participation!

The Department of Physical Medicine and Rehabilitation at Ludwig-Maximilian University in Munich houses the "ICF Research Branch," which is directed by Professor Gerold Stucki. This Branch is actively engaged in developing practical methods for implementing the ICF in many different modes of daily clinical practice. One such method involves the compilation, testing, and dissemination of "Core Sets" of ICF codes, representing a substantial qualitative and quantitative research endeavour but one which bears great promise for near-term successful applications of the ICF. You can read more about the ICF Research Branch at its website, located at:

<http://www.ICF-research-branch.org> .

To date, 12 sets of ICF Core Sets have been compiled and tested, bringing together during their development the collaboration and skills of a large number of international partners familiar with the ICF and its actual and potential applications. In keeping with its standard protocol for the development of ICF Core Sets, scientists affiliated with the ICF Research Branch are planning to conduct a worldwide expert survey among clinical experts to identify the complement of problems associated with functioning among individuals with SCI. There is already a rich body of literature about developing Core Sets; specifically, a new article about the SCI Core Sets development process is in press.

Professor Stucki and others at the ICF Research Branch would benefit greatly from the expertise of SCI experts among this Newsletter's readership, or SCI experts you could identify at your institutions who might be willing to participate in their forthcoming expert survey. Upon request, the ICF Research Branch would send to interested persons by E-Mail a specialized Excel spreadsheet that can be used to identify SCI experts from a wide range of health professions.

Sybille Schwarz and Monika Scheuringer serve as the the steering committee of the SCI Core Sets Project. The international project coordinators include Michael Baumberger, Fin Biering-Sørensen, Susie Charlifue, Marcel Post, Gerold Stucki, Federico Montero, and Nenad Kostanjsek.

To request more information about the expert survey, and to obtain the specialized Excel spreadsheet, please send an E-Mail request to Sybille Schwarz at this address: ICF.delphi@med.uni-muenchen.de

The postal mailing address for the ICF Research Branch can be found at this related website: <http://www.icf-research-branch.org/contactus/contactus.htm> .

5. SPANNING THE GLOBE: WELCOME, ADDITIONAL EUROPEAN READERS OF THIS NACC CLEARINGHOUSE NEWSLETTER

During the 12th Annual NACC Conference on the ICF recently conducted in Vancouver, one interesting anecdote arose demonstrating that ICF researchers represent a growing, worldwide community. Dr. Matilde Leonardi, a pediatric neurologist and one of our invited plenary speakers at the Vancouver meeting, revealed that she routinely forwards E-Mail copies of this NACC Clearinghouse Newsletter on the ICF to many of her colleagues involved in the HEADNET working group, the "Health and Disability Network" which is also affiliated with the "Measuring Health and Disability in Europe" (MHADIE) Research Group also coordinated by Professor Leonardi. Bravo and thank you, Matilde!

Dr. Leonardi indicated that most of her "forwarded circulation" of this NACC Clearinghouse ICF Newsletter involves about 700 English-reading collaborators throughout Europe, mainly associated with the Disability Italian Network. We welcome your readership! We certainly would also welcome your contributions to future editions of this Newsletter, by informing us (and all Newsletter readers) about your ICF activities --- in any nation!

We would also welcome your individualized subscriptions, which would result in our sending the ICF Newsletter directly to your preferred E-Mail address, and which would enable us to maintain a current roster of our actively subscribed readers. For those

readers who are content to receive this Newsletter through Dr. Leonardi's helpful forwarding, no action is required or suggested. But if you would like to receive your copy sent directly to your preferred E-Mail address, simply make that request in an E-Mail message to Dr. Paul Placek, Newsletter Editor, at the following address: PJPLACEK@VERIZON.NET

Thank you, Matilde, for helping us spread the word about ICF more efficiently!

6. REED AND STARK TO GIVE ICF WORKSHOP OCTOBER 1, 2006 AT ACRM - ASNR JOINT CONFERENCE

The American Congress of Rehabilitation Medicine (ACRM) and the American Society of Neurorehabilitation (ASNR) will conduct a Joint Conference between September 27 through October 1, 2006 in Boston, Massachusetts. The ACRM is the organization that publishes the prominent journal *Archives of Physical Medicine and Rehabilitation*.

An important ICF-oriented course will be presented at this joint meeting, toward expanding the number of practicing American physicians and other diagnosing clinicians who are familiar with ICF.

The straightforward title of this full-day course will be "The International Classification of Functioning, Disability and Health (ICF)," and it will be presented by two recognized experts in our field: Geoffrey Reed, Ph.D., representing the American Psychological Association, and Susan Stark, Ph.D., OTR/L, from Washington University in St. Louis.

This course will be sponsored at the Joint Conference under the auspices of CIRRIE. The course will be presented between 9:00 a.m. to 4:00 p.m. on Sunday, October 1, 2006. The registration brochure supporting this Joint Conference includes a robust description of the ICF itself, in addition to the course description. For example, page 14 of the registration brochure includes this pertinent instructional passage about the ICF:

"The classification system permits clinicians to fully record the complex issues encountered in clinical situations. The ICF recognizes human functioning as multi-faceted and more than a purely biological perspective on health. Impairment is related to functional status, but it is not strictly predictive of functional independence and performance on an everyday basis in one's natural environment. By capturing information about areas of difficulty as well as level of impairment, the ICF allows for a more comprehensive description of functioning."

The full-day course manifests these clinical and research objectives:

"At the conclusion of this session, participants should be able to:

- Identify conceptual organization of the ICF and the basic mechanism for coding clinical encounters;
- Discuss conceptual issues that hinder the use of the ICF by clinicians;
- Evaluate the purpose and conceptual organization of the ICF Manual for Health Professionals; and
- Discuss applying ICF codes to clinical case examples using the ICF system and the Manual."

You can view the Joint Conference's registration brochure, and this course description on pages 13-14, at the following website:

<http://www.acrm.org/conference/Prelim%20Prog%202006%20web.pdf> .

Many of our NACC Clearinghouse Newsletter readers might recognize the prominent names of some of the members of the ACRM Board of Governors who have already exhibited their familiarity with the ICF, including Professor Marcel Dijkers from Mount Sinai School of Medicine (Vice President), and Professor Marcia Scherer from the University of Rochester (Secretary). Similarly, several members of the ASNR Board of Directors might also be familiar to readers of this ICF Newsletter, including Dr. Michael Weinrich from the U.S. National Institutes of Health (Past President of ASNR). Moreover, Professor Leora R. Cherney from Northwestern University served this year on the ACRM-ASNR Program Committee planning this Joint Conference. Thank you for your service!

7. STEINFELD'S CENTER RETHINKS UNIVERSAL DESIGN USING ICF

Dr. Edward Steinfeld, Professor of Architecture and Director of the Center for Inclusive Design and Environmental Access (IDEA) at the University of Buffalo, and Dr. Scott Danford, Project Director at the IDEA Center, are spearheading a collaborative effort to re-examine the well-known "Seven Principles of Universal Design" (UD). Many of the components of their activity pertain directly to applications of the ICF and its conceptual model.

In fact, in the concurrent session entitled "Environmental Factors" at the recent NACC Conference on the ICF conducted in Vancouver, on behalf of his IDEA Center colleagues Dr. Danford presented an interesting paper outlining the ICF-relevant shortcomings of the current roster of Universal Design Principles.

You can review a rendering of Dr. Danford's Vancouver slide presentation on the ICF Conference website at:

http://www.icfconference.com/prog_pres.html

. . . and then scroll down to the link for "G. Scott Danford."

Similarly, you can also view a reprint of the Steinfeld and Danford position paper at their group's website, located at:

<http://futureofud.wikispaces.com/> ,

then navigate to the paper entitled "Universal Design and the ICF" at:

<http://futureofud.wikispaces.com/UD+and+the+ICF>

The IDEA Center website is located at:

<http://www.ap.buffalo.edu/idea/Home/index.asp>

In their position paper, and also during Dr. Danford's presentation at the NACC Conference, Steinfeld and Danford rendered the following arguments:

- Universal design represents a new paradigm for removing or mitigating environmental barriers that preclude desired function, activity participation and social participation;
- UD is highly compatible with the ICF model;
- A body of evidence for "practicing UD" needs to be assembled;
- The ICF can be used to organize that body of evidence and guide research;
- A crosswalk is needed to reconcile the ICF with UD; and
- Participation of all stakeholder groups is desirable in developing the body of evidence.

Within their Vancouver presentation, Dr. Danford explained that the IDEA Center is home to the NIDRR-funded Rehabilitation Engineering Research Center (RERC) on Universal Design, and its Built Environment Project. One important thematic activity pursued by this RERC is the development of Evidence-Based Guidelines that would bolster scientific and non-scientific claims for modifying UD principles or existing designed structures and processes. They used the ICF framework to develop such evidence based guidelines, and have built a database of relevant research evidence. This effort will involve these initial activities:

- Develop low-cost methods for measuring UD effectiveness;
- Develop benchmarks for effectiveness;
- Reconcile the ICF conceptual model and the existing Principles of UD;
- Develop evidence-based guidelines; and
- Involve stakeholders in developing the evidence-based guidelines.

These projects and the ICF-oriented work of the IDEA Center are very promising, and we invite readers to stay informed about them, particularly in the context of expanding interest in the ICF Environmental Factors domain. For more information, contact either Professor Steinfeld or Dr. Danford at IDEA:

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8. EARLY CHILDHOOD EDUCATION PROJECTS AT THE NATIONAL DISABILITY AUTHORITY OF IRELAND

Dr. Hasheem Mannan, a disability statistician who served as an Associate Service Fellow at the National Center for Health Statistics, recently contacted some colleagues at NCHS to let us know about his new scientific position involving research, evaluation and impact studies related to disabilities in the areas of health, education, and social services. Hasheem is now employed by the National Disability Authority in Dublin, Ireland. The Authority will be funding up to €60,000 towards five research projects related to best practices in early childhood education. He is also working with his colleague Dr. Anne Good on the Measuring Disability and Health in Europe project (MHADIE; informative website located at: <http://www.mhadie.com/>). The partners in MHADIE are engaged in mapping disability questions used in their respective national surveys and censuses to their corresponding ICF domains. In due course, the MHADIE website will host a webpage in which all such questions would be compiled. Hasheem has informed us that, from Ireland, the surveys selected for the MHADIE mapping exercises include the National Census Questions; the Survey of Lifestyles, Attitudes, and Nutrition; and the Euro Student Survey. A detailed publication on this topic is also forthcoming from the National Disability Authority.

For more information about MHADIE in Ireland, and the National Disability Authority, contact Hasheem at:

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9. JULY 20 ABSTRACT DEADLINE FOR FEB. 22-24, 2007 ACTIVE LIVING RESEARCH CONFERENCE

ICF-oriented abstracts will be welcomed by the program known as Active Living Research (ALR), for prospective presentation at their 4th Annual Conference, scheduled for the dates February 22-24, 2007, in Coronado, California. Active Living Research is a Robert Wood Johnson Foundation-funded program that conducts and supports research examining "relationships among characteristics of natural and built environments, public and private policies, and personal levels of physical activity." These programmatic activities are directly relevant to ICF applications.

The website address for the ALR Call for Abstracts and for more information about the 2007 Conference is:

http://www.activelivingresearch.org/index.php/Call_for_Abstracts_2007/389

The theme of the 2007 Conference will be "Active Living in Diverse and Disadvantaged Communities." Abstracts are welcome on all topics related to active living policies and environments. The *American Journal of Preventive Medicine* (AJPM) has agreed to produce a special issue devoted to research on active living presented at the ALR conference.

For more information, contact Amanda Wilson, Research Coordinator, at:

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10. LET OTHERS KNOW ABOUT YOUR ICF ACTIVITIES

This NACC Clearinghouse Newsletter on the ICF depends on your contributions! Please send news about your ICF activities to the Editor, who will ensure that the larger community of ICF investigators reads about your work.

Send news of your ICF activities to:

Paul J. Placek, Ph.D.

103 Big Holly Court
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Remember also that all previous NACC ICF Clearinghouse messages published between 2002-2006 are archived at:

<http://www.cdc.gov/nchs/about/otheract/icd9/icfhome.htm>

11. SPOTLIGHT ON MARCIA SCHERER, Ph.D.

Each month we try to "spotlight" someone who is making a difference with ICF. Marcia Scherer directs the ICF part of the "Cornell ICF Project" (the NIDRR-funded Rehabilitation Research and Training Center [RRTC] on Disability Demographics and Statistics directed by Dr. Andrew Houtenville). She is also Editor of the journal *Disability and Rehabilitation: Assistive Technology*, an official journal of the International Society of Physical and Rehabilitation Medicine (ISPRM). We would not be surprised at all to see a future issue of this prestigious journal devoted to the ICF!

Marcia was also honored this spring with the invitation to serve on the National Advisory Board on Medical Rehabilitation Research, the officially chartered body advising the directors of the National Center for Medical Rehabilitation Research (NCMRR), National Institute on Child Health and Human Development (NICHD), and the National Institutes of Health (NIH) on scientific matters and policies related to NCMRR's programs. Appointment to this Advisory Board is indicative of all the members' substantial credentials as leaders in the various rehabilitation fields, including Assistive Technology (AT) in Professor Scherer's case.

Professor Scherer has earned fellowships in several important disciplines. She is a Fellow of the American Congress of Rehabilitation Medicine. Moreover, within the American Psychological Association (APA), she is a Fellow of the APA in Rehabilitation Psychology; and a Fellow of the APA in Applied Experimental and Engineering Psychology.

Marcia is a collaborator on the NIDRR-funded Rehabilitation Engineering Research Center (RERC) for the Advancement of Cognitive Technologies, based at the Department of Physical Medicine and Rehabilitation at the University of Colorado at Denver and Health Sciences Center. She regularly works with teams of rehabilitation professionals in Australia, England, Ireland and Italy on assistive technology assessments and services.

Marcia writes: "The ultimate focus of the ICF is on the whole person in a social context. The ICF is based on the *biopsychosocial model*, an integration of medical and social models. This has great appeal to me since the University of Rochester is the home of the

biopsychosocial model! – it all started here with George Engel, M.D., psychiatry, in the 1970's."

Marcia points out that even though ICF codes pertaining to AT are located in the Environmental Factors domain, in a category labeled *Products and Technology*, the overall value of AT resources are ultimately determined by their impact on daily activities and participation in community life, as well as on such personal factors as coping styles, education, profession, and current experience. For individuals with disabilities, ATDs (Assistive Technology Devices) can facilitate independence in accomplishing *activities* (i.e., the capacity or capability to execute tasks or actions such as reading, writing, walking or moving, dressing, and eating). She views ATDs as valuable facilitators of activity performance and participation in a wide variety of life situations. The evaluation of the impact of assistive technologies on daily activities and community participation, and measurement strategies for assessing these outcomes, represent important areas of AT research.

Marcia's ICF-specific publications include the following:

- 1) Scherer MJ, Sax C, Vanbiervliet A, Cushman LA, Scherer JV. Predictors of assistive technology use: The importance of personal and psychosocial factors. *Disability & Rehabilitation* 2005; 27(21):1321-1331.
- 2) Scherer MJ, Sax CL, Glueckauf RL. Activities and participation: The need to include assistive technology in rehabilitation counselor education. *Rehabilitation Education* 2005; 19(2-3):177-190.
- 3) Scherer MJ. Assessing the benefits of using assistive technologies and other supports for thinking, remembering and learning. *Disability and Rehabilitation* 2005; 27(13):731-739.
- 4) Scherer MJ, Glueckauf R. Assessing the benefits of assistive technologies for activities and participation. *Rehabilitation Psychology* 2005; 50(2):132-141.
- 5) Scherer MJ. Enhancing assistive technology selection and use: Connecting the ICF and ISO9999. (Newsletter entry.) *RIVM Newsletter on the WHO-FIC* (Bilthoven, The Netherlands: National Institute of Public Health and the Environment [RIVM]) 2004 (September); 2(1):10-11. Available on the World Wide Web at: <http://www.rivm.nl/who-fic/newsletter/newsletter2004-1.pdf>

Marcia's ICF-specific presentations include the following:

- 1) Federici S, Scherer M, Micangeli A, Lombardo C, Olivetti Belardinelli, M. A cross-cultural analysis of relationships between disability self-

evaluation and individual predisposition to use assistive technology. In Craddock GM, McCormack LP, Reilly RB, and Knops HTP (eds.), *Assistive Technology: Shaping the Future, AAATE'03* August 31 – September 3, 2003, Dublin, Ireland. (Conference Proceedings.) Amsterdam: IOS Press, 2003, pp. 941-946.

- 2) Scherer MJ, Sax C. Cross-walking the ICF to a Measure of Assistive Technology Predisposition and Use. Oral presentation at the 11th Annual North American Collaborating Center (NACC) Conference on the International Classification of Functioning, Disability and Health (ICF), June 22-24, Rochester, MN. Presented June 22, 2005.
- 3) Ruiz-Quintanilla A, Scherer MJ, Houtenville A. Barriers to Data Integration Among Various U.S. Rehabilitation Agencies. Oral presentation at the 11th Annual North American Collaborating Center (NACC) Conference on the International Classification of Functioning, Disability and Health (ICF), June 22-24, Rochester, MN. Presented June 22, 2005.
- 4) Scherer MJ, Cushman LA, Federici S. Measuring Participation and the Disability Experience with the "Assistive Technology Device Predisposition Assessment." Oral presentation at the 10th Annual North American Collaborating Center (NACC) Conference on the International Classification of Functioning, Disability and Health (ICF), June 1-4, 2004, Halifax, Nova Scotia, Canada. Presented June 2, 2004.
- 5) Scherer MJ. Relationships Between ICF Activity Domains and Individual Predisposition to Use Assistive Technology. Oral presentation in the Symposium entitled "International Classification of Functioning, Disability, and Health---Rehabilitation Psychology Implications," conducted at the 112th Annual Convention of the American Psychological Association, Honolulu, HI. Presented July 29, 2004.
- 6) Scherer M, Demers L, Jutai J, Fuhrer M, DeRuyter F. (2004, June 2-4). Application of the ICF in Assistive Technology Outcomes Measurement. Poster presentation at the 10th Annual North American Collaborating Center (NACC) Conference on the International Classification of Functioning, Disability and Health (ICF), June 1-4, 2004, Halifax, Nova Scotia, Canada. Presented June 3, 2004.

Dr. Scherer reports that her favorite hobby is "extreme rock hounding." Several times a year she can be found in Colorado or Utah digging around in the mountains and looking for minerals and fossils. Her favorite? Petrified wood from the Jurassic or Triassic periods.

Here is Professor Scherer's contact information:

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And, her journal editorial board address website is:

Editor, *Disability and Rehabilitation: Assistive Technology*
<http://www.tandf.co.uk/journals/journal.asp?issn=1748-3107&linktype=5>