



australasian rehabilitation  
outcomes centre

## FIM FACILITY TRAINER/COORDINATOR - NEWSLETTER

MAY 2022

Welcome to the FIM Facility Trainer & FIM Coordinator Newsletter - we hope you find it informative. The purpose is to:

- Keep you updated with what's happening at AROC
- Direct you to some useful FIM resources
- Look at a few FAQs & Provide a few reminders

**AROC appreciates your hard work in championing FIM in your facility.**

### AROC NEWS

**AROC TWITTER** <https://twitter.com/uowaroc>

AROC's Twitter account is used to share current news relating to rehabilitation including the opening of new facilities, development of new rehab technologies and innovative rehab strategies and programs. We also share calls for research papers, information about upcoming conferences and new publications from rehab facilities and research organisations.

We aim to encourage conversation and education around the topic of rehabilitation, not just among rehab clinicians but rehab patients and the general public. One of our strategies to achieve this is to share data gathered by AROC and other rehab research facilities. We encourage anyone interested to view and follow our account.



### 20 Years of AROC a time for Strategic Review

AROC celebrates 20 years on 1 July 2022, with a celebratory event to be held on 14 October 2022. This important milestone, along with changes in models of care has presented AROC with an opportune time for a strategic review. The AROC Director (Dr Ross Clifton) and Clinical Director (Dr Maria Crotty) have been engaging with key stakeholders, jurisdictions and the FIM and WeeFIM Master Trainers, receiving feedback and suggestions to help inform AROC's future direction. The

AROC Team is currently summarising this feedback and identifying key projects to focus on for the coming months and years ahead.

### Driving quality and outcome improvements in rehabilitation for



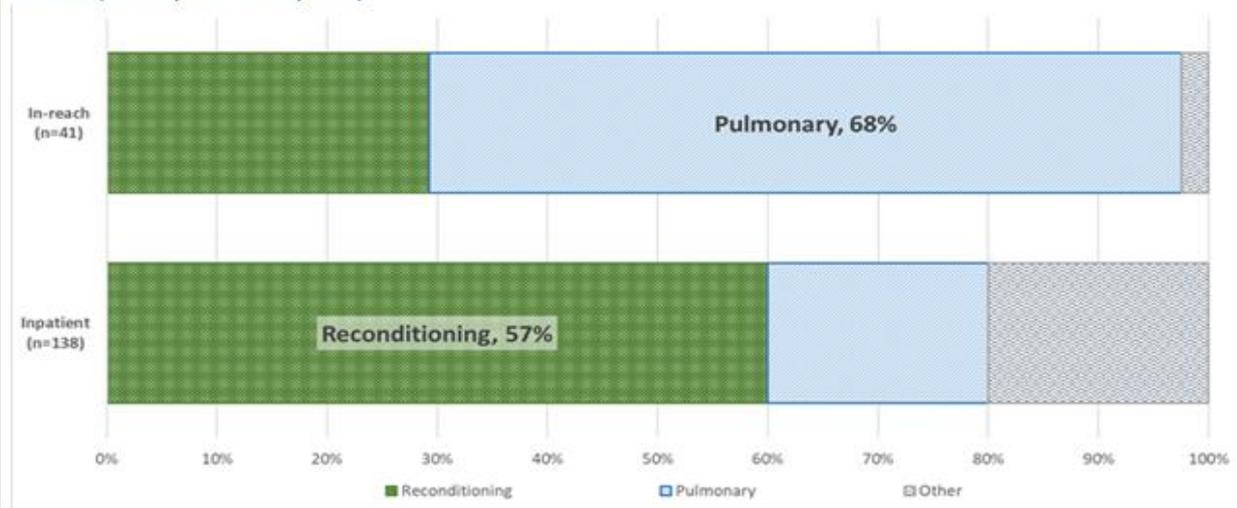
## AROC COVID DATA

In early 2020, AROC created the **National COVID-19 rehabilitation adjunct data collection** to monitor the impact of COVID-19. This data is completed for ALL patients participating in rehabilitation in any care setting who have had a positive diagnosis of COVID-19 (at the time of admission or prior). It includes patients whose primary diagnosis is COVID-19 related, as well as those with a secondary diagnosis where admission to rehabilitation is linked to having had COVID-19. Data received to date show that rehabilitation presentations are mirroring COVID cases (Figure 1) and that the reason for rehabilitation in an in-reach setting is different to the inpatient setting (Figure 2).

**Figure 1: Rehabilitation following COVID-19 diagnosis and reported COVID-19 cases (National COVID-19 rehabilitation adjunct data collection, January 2020 to May 2022)**

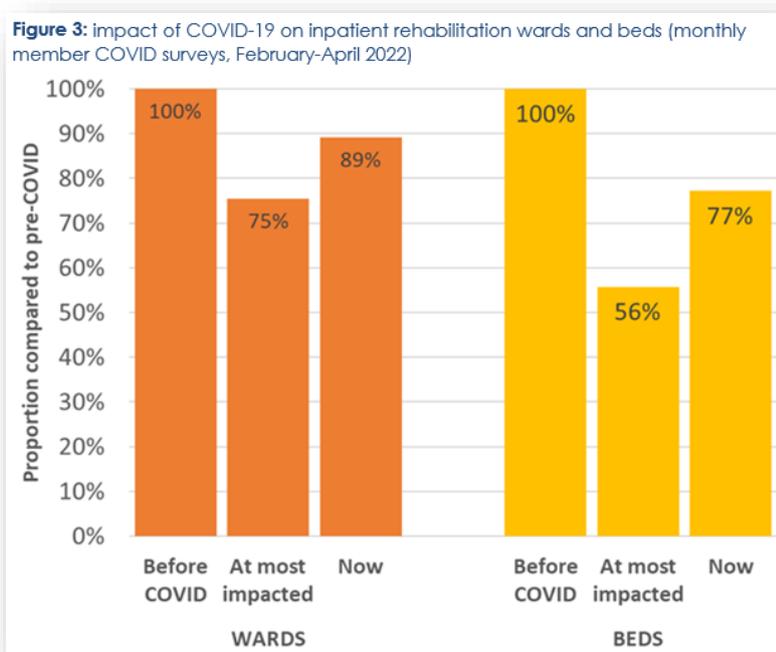


**Figure 2: Reason for rehabilitation following COVID-19 diagnosis by care setting (National COVID-19 rehabilitation adjunct data collection, January 2020 to May 2022)**



In September 2021, AROC commenced **monthly member COVID surveys** to identify changes brought about in rehabilitation services across Australia and New Zealand as a direct result of COVID. In February 2022, questions measuring services' return to pre-COVID levels, impact on referrals to rehabilitation and services' ability to discharge from rehabilitation were added.

In 2021, 143 rehab services in Australia and New Zealand completed at least one survey, and since the survey was updated, 97 services have completed at least one survey. In the updated survey, 85% of services reported being directly impacted by COVID-19. As of April, one in five reported they were starting to recover. Figure 3 shows that when services were at their most impacted, 25% of inpatient wards were either closed, repurposed (to COVID units or to accept medical patients) or relocated, with 44% beds lost (less than half of these beds have been returned to rehabilitation). Non-rehabilitation patients are still being accommodated by 39% of rehab services.



Rehabilitation nurses and allied health staff were redeployed in 43% of services impacted by COVID-19. Of these redeployed staff 40% were not due to ward/bed closures or repurposing. Most (83%) rehabilitation nurses were not replaced with rehabilitation nurses, while 20% of the allied health staff redeployed were mostly senior. A change in referral patterns for inpatient services due to COVID was reported by 61% of services, with 85% reporting fewer orthopaedic referrals and 75% reporting more reconditioning referrals. Services reported less capacity to discharge to respite care (38%) and nursing homes (44%) and longer waiting times (75% and 81%, respectively). More difficulty accessing NDIS and TCP services, again with longer waiting times, is resulting in bed block and longer waiting list to get into rehabilitation, which is not helped with fewer beds available and more complex patient casemix.

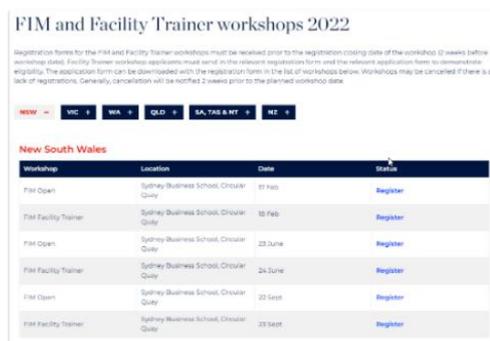
If you have any COVID-19 patients please ensure this data is collected. For details about the AROC COVID adjunct data collection or entering data for your facility, please send an enquiry to AROC:

**CONTACT AROC - COVID adjunct data collection**

## WORKSHOPS & TRAINING OPPORTUNITIES

### 2022 Refresher & Candidate FT Training

FIM training and refresher or candidate Facility Trainer sessions are currently being conducted on set dates. Where possible these are face-to-face (F2F), otherwise there are virtual options. Refer to the [AROC website](#).



Workshop	Location	Date	Status
FIM Open	Sydney Business School, Circular Quay	17 Feb	<a href="#">Register</a>
FIM Facility Trainer	Sydney Business School, Circular Quay	18 Feb	<a href="#">Register</a>
FIM Open	Sydney Business School, Circular Quay	23 June	<a href="#">Register</a>
FIM Facility Trainer	Sydney Business School, Circular Quay	24 June	<a href="#">Register</a>
FIM Open	Sydney Business School, Circular Quay	23 Sept	<a href="#">Register</a>
FIM Facility Trainer	Sydney Business School, Circular Quay	23 Sept	<a href="#">Register</a>

### 2022 Webinars and Service Meetings

The 2022 AROC state Benchmarking and Quality webinars are complete for VIC and SA, with WA scheduled for 14 June. The NSW, QLD, NT and TAS webinars are still to come. Service meetings, specific for your facility or organisation, are also being conducted. These meetings are an opportunity to engage with your data and review outcomes in an informative and interactive way. If you are interested in a service meeting for your facility or organisation, please enquire to AROC.

[CONTACT AROC – webinars & service meetings](#)

## RESOURCES & SUPPORT

### UPADTE – Bladder & Bowel: Part 2 Frequency of Accidents

On the **1st January 2023** a new criteria for scoring FIM bladder and bowel part 2: frequency of accidents will be implemented across Australian and New Zealand. This new criteria will be in line with the current Uniform Data System for Medical Rehabilitation (UDSMR) criteria for scoring this item. AROC believes this change will have several benefits including:

- A simplified criteria for clinicians,
- Improved consistency and accuracy of scoring,
- A more clinically relevant representation of a patient's function,
- Consistent scoring with international users of FIM,

Further announcements will be made and resources be updated ready for the scoring change.

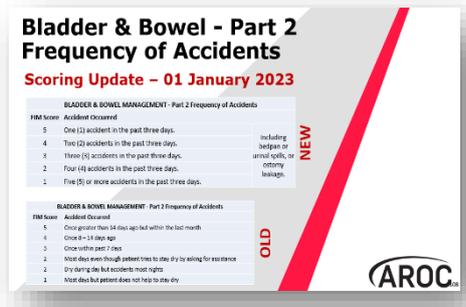
[DOWNLOAD summary of scoring criteria and decision-making process](#)

### UPADTE – FIM Slide Presentation v4.7

The FIM slide presentation is being updated from version 4.6.2 to version 4.7. It will be available to download from AOS early June 2022. Updates include:

- Additional slide - dressing and undressing example,
- Additional slide - notification regarding Bladder and Bowel Part 2: Frequency of Accidents scoring change to be implemented from 01 January 2023,
- Clarification for scoring cognition items level 5.

**DOWNLOAD table of v4.7 updates**



### Manage Keys creating an exam report

Exam key information can be downloaded as an excel report. You can tailor the report by using the field criteria eg: Status, Issued dates, Purchaser Name etc.

1. Log into AOS with your username and password, then navigate to Manage Keys,
2. Select your facility and any other fields to narrow your search,
3. Click the blue 'Search' button. Your selection of keys will be listed in the table,
4. Download the 'Manage Keys Report (Export to CSV)',
5. Read the 'Report Data Description' to learn how to interpret your report.

Facility	Product	Purchaser	Participant	Status	Expiry	Result	Actions
Anywhere Hospital	FIM Exam Only	Patrick	Donna	NotCompleted	13/04/2019		View Go to activity
Anywhere Hospital	FIM Exam Only	Donna		Expired			View
Anywhere Hospital	FIM Exam Only	alex		Expired			View
Anywhere Hospital	FIM Exam + Refresher	alex	alex	Expired			View
Anywhere Hospital	FIM Exam Only	Peter	Peter	Expired			View
Anywhere Hospital	FIM Exam Only	Roslyn	Ruth	Completed	06/08/2020	94	View

## CLINICAL QUERIES & EXPLANATIONS

### FIM & therapy sessions

**Clarification:** Do not score FIM based on a therapy session. Such as an OT shower, PT session or a cognitive assessment. Score FIM when the person is going about their ADL's on the ward - what and how help much they require completing their basic ADL's.

### Expression

**Question:** Is an implanted voice prosthesis considered an assistive device for Expression? I.e. Not one you have to hold, but one that is surgically implanted to your body.

**Answer:** Yes, they are considered an assistive device for the Expression item. They are a device that require a lot of care and maintenance. As a speaking valve on a tracheostomy is considered a device, so is an implanted voice prosthesis.

## REMINDERS

### ARNA Conference

31<sup>st</sup> ARNA National Conference: 20-21 October 2022

"Rehab nurses stronger together" – Adelaide Convention Centre.



Thank you for all your hard work supporting your clinicians. All our Newsletters and other resources can be found on the [AROC Resources](#) website page.

**Warm Regards, the team at AROC**

If you have any questions please don't hesitate to [contact us](#)