australasian rehabilitation outcomes centre

FIM FACILITY TRAINER/COORDINATOR - NEWSLETTER

JUNE 2023

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

Benchmarking Reports

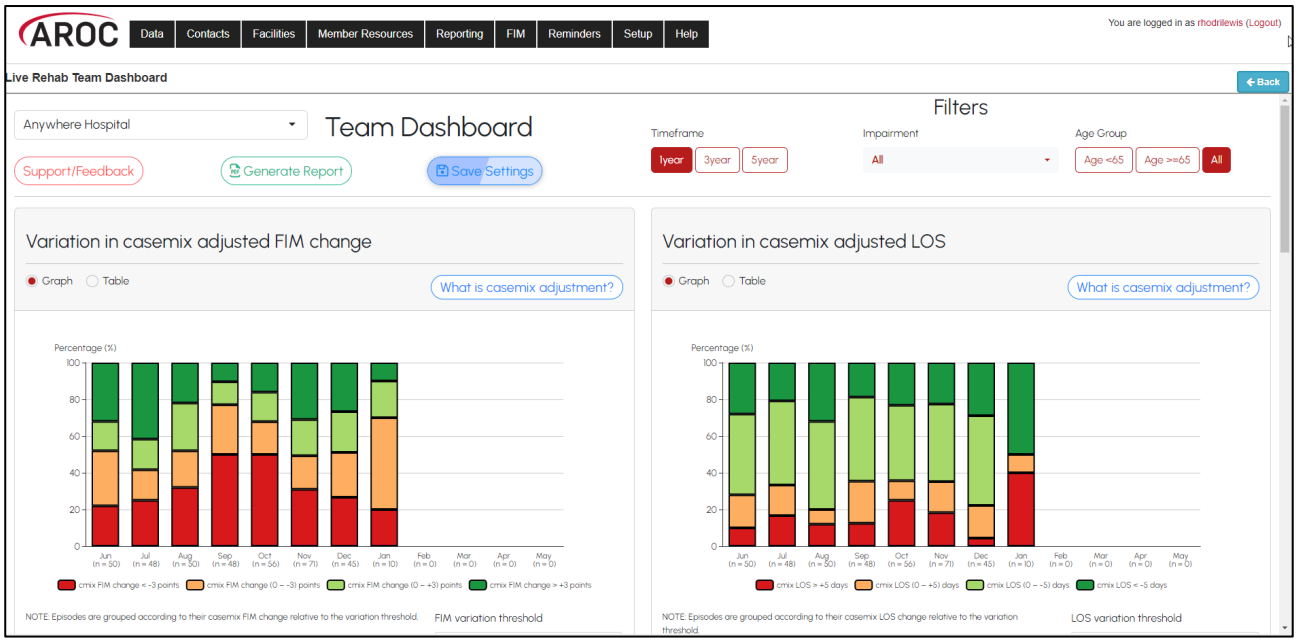
AROCs goal is to improve clinical rehabilitation outcomes. Collecting inpatient rehabilitation data (such as the FIM) enables AROC to provide a national benchmarking system, reports and specialist workshops. The latest member reports can be downloaded from AROC Online Services (AOS) – access your reports via the REPORTING menu, then click DOWNLOAD BENCHMARK REPORTS (or refer to the **AOS Download Benchmark Reports Quick Reference Guide**). Webinars on how to interpret your reports can be viewed at any time via **this link**.

How to interpret your Benchmarking Report

This webinar was recorded on 21/03/2019. In this video we go scroll through an AROC Benchmarking Report and discuss how to interpret the information

New – Live Rehab Team Dashboard

If you would like to look at your data in real time and visualise trends then please check out our new live reporting app, the "Live Rehab Team Dashboard". Simply click "Live Reporting" under the "Reporting" heading above and click through to the latest app. For a webinar that demonstrates the dashboard please follow **this link**.



Live Rehab Team Dashboard Webinar

Bec's book

Rebecca Schmidt - Lachlan, previously part of the FIM Team at AROC, has recently published a book based on her experiences.

"Shit!! I'm 26 and had a stroke" tells Rebecca's story from a patient-perspective and can be purchased from her website, through the link below.

After leaving AROC in 2022, Rebecca decided it was time to commit her story to paper, as well as focus her energy on her business **Altered Abilities**.

Rebecca describes her book as *"an honest and authentic account of recovery in Rehabilitation"*

Altered Abilities Website

WORKSHOPS & TRAINING OPPORTUNITIES

Upcoming Facility Trainer Support Meetings

We are in the process of arranging Facility Trainer Support Meetings for 2023. We hope to have dates for VIC, SA & Tasmania very soon.

It is recommended that Facility Trainers attend at least one Facility Trainer Support Meeting per year. It's a great opportunity to network, ask questions and give feedback

The upcoming Meetings will cover topics such as:

- website and AOS updates,
- current and upcoming resources,
- clinical questions from Facility Trainers.

"A chance for discussing using the FIM with other Facility Trainer's in your State"
– Wendy Maxwell, AROC Master Trainer

Facility Jurisdictional Meetings 2023	
NZ	Wed 14th June
NSW & ACT	Fri 23rd June
QLD	Thu 29th June
VIC, SA & Tas	TBC
WA & NT	Wed 5th July

Upcoming Tasmania and South Australia Workshops

We have recently announced that a Tasmanian FIM and Facility Trainer Workshop. Will be held in Launceston on **Thursday 28th September** and **Friday 29th September 2023**. This will be the first time that AROC have conducted face-to-face open workshops in Tasmania since 2019.

South Australia FIM and Facility Trainer Workshops will also be announced shortly.

2023 FIM & Facility Trainer Workshop dates

RESOURCES & SUPPORT

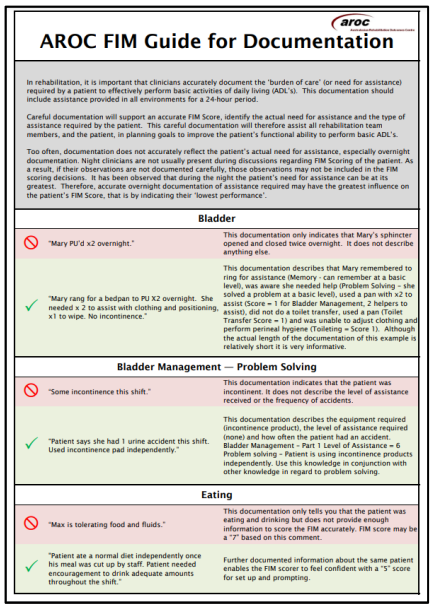
FIM Guide for documentation

A reminder about this useful guide that assists clinical staff in documenting a patient's behaviour. Better documentation leads to more accurate FIM scoring. You can download the FIM Guide for Documentation below.

"Documentation doesn't need to be lengthy – it just needs to be concise and informative" – Wendy Maxwell, AROC Master Trainer.

"Careful documentation supports an accurate FIM score. An accurate FIM score supports accurate rehabilitation data which in turn supports accurate benchmarking reports" – Ann Croker, AROC Master Trainer

FIM Guide for documentation



AROC FIM Guide for Documentation

In rehabilitation, it is important that clinicians accurately document the 'burden of care' (or need for assistance) required by a patient to effectively perform basic activities of daily living (ADL's). This documentation should include assistance provided in all environments for a 24-hour period.

Careful documentation will support an accurate FIM Score, identify the actual need for assistance and the type of assistance required by the patient. This careful documentation will therefore assist all rehabilitation team members, and the patient, in planning goals to improve the patient's functional ability to perform basic ADL's.

Too often, documentation does not accurately reflect the patient's actual need for assistance, especially overnight documentation. Night clinicians are not usually present during discussions regarding FIM Scoring of the patient. As a result, if their observations are not documented carefully, those observations may not be included in the FIM scoring decisions. It has been observed that during the night the patient's need for assistance can be at its greatest. Therefore, accurate overnight documentation of assistance required may have the greatest influence on the patient's FIM Score, that is by indicating their 'lowest performance'.

Bladder	
✗ "Mary PU'd x2 overnight."	This documentation only indicates that Mary's sphincter opened and closed twice overnight. It does not describe anything else.
✓ "Mary rang for a bedpan to PU X2 overnight. She needed x 2 to assist with clothing and positioning, x1 to wipe. No incontinence."	This documentation describes that Mary remembered to ring for assistance (Memory - can remember at a basic level), was aware she needed help (Problem Solving - she solved a problem at a basic level), used a pan with x2 to assist (Score = 1 for Bladder Management, 2 helpers to assist), did not do a toilet transfer, used a pan (Toilet Transfer Score = 1) and was unable to adjust clothing and perform perineal hygiene (Toileting = Score 1). Although the actual length of the documentation of this example is relatively short it is very informative.
Bladder Management — Problem Solving	
✗ "Some incontinence this shift."	This documentation indicates that the patient was incontinent. It does not describe the level of assistance received or the frequency of accidents.
✓ "Patient says she had 1 urine accident this shift. Used incontinence pad independently."	This documentation describes the equipment required (incontinence product), the level of assistance required (none) and how often the patient had an accident. Bladder Management - Part 1 Level of Assistance = 6 Problem solving - Patient is using incontinence products independently. Use this knowledge in conjunction with other knowledge in regard to problem solving.
Eating	
✗ "Max is tolerating food and fluids."	This documentation only tells you that the patient was eating and drinking but does not provide enough information to score the FIM accurately. FIM score may be a "7" based on this comment.
✓ "Patient ate a normal diet independently once his meal was cut up by staff. Patient needed encouragement to drink adequate amounts throughout the shift."	Further documented information about the same patient enables the FIM scorer to feel confident with a "5" score for set up and prompting.

FIM Audit Tool details

This tool is provided as a resource for use by appropriately trained FIM clinicians as a basis for documenting a formal FIM audit undertaking. The aim of a FIM audit is to review the accuracy of FIM scoring in relation to written documentation from rehabilitation staff. You can **download the FIM Audit Tool** (pdf).

Admission FIM Audit Form						
Audit Site:			Patient Audit Number:	Date Completed:		
FIM Item	Item Score	Supporting Documentation Yes/No	Supporting Documentation/ Relevant Comments	Correct Score (Auditor)	Completed on time	Discipline of Scorer
Eating	Example: 7	Yes	Occupational Therapist wrote "independent" and nursing wrote "tolerating food and fluid".	7	Yes	Nursing Staff
Grooming						
Bathing						

"A great opportunity for developing a quality initiative in your own place of work"
- Wendy Maxwell, AROC Master Trainer

If you have recently completed an audit at your facility and made improvements; or completed any quality projects involving the use of the FIM Tool; please let us know, we would love to hear about it.

Contact Us

Dressing and Undressing Example - FIM slide presentation v5.1

The helper fixes the patients collar, this could be seen as a step. If it is counted as a step in this scenario the patient will complete 12 of 18 steps (66%, score 3) and the score is not altered.

This clarification has also been added to the Presenter notes.

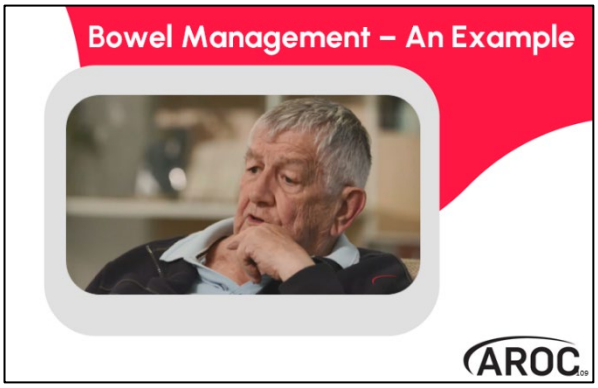
Bowel Video Example in FIM slide presentation v5.1

The Bowel Management video scenario score is based on the wife doing all the tasks for the use of the bedpan with no input from the patient. In the video for Bowel Management, Part 1 and Part 2 show a variety of scores:

Part 1:
- ✓ The use of medication = score of 6
- ✓ Asking to be toileted/for a bedpan = score of 2
- ✓ The wife manages all the physical steps of the bedpan use = score of 1

Part 2:
- ✓ Pt has had 2 accidents in past 3 days = score of 4

This clarification has also been added to the Presenter notes.



Presentation v5.0 to v5.1 Table of Updates

FIM Manual v7.0 to v7.1 Table of Updates

CLINICAL QUERIES & EXPLANATIONS

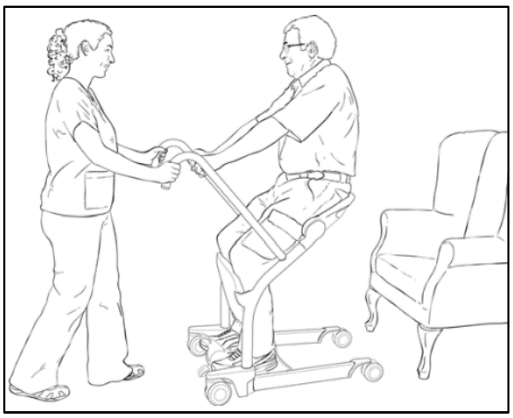
Eating

Question: If the serving size of a meal provided by the hospital is being restricted because of risk of overeating, is it rated a 6 Modified Independence or 5 Supervision/Setup?
Answer: If a food diary or any supervision is required to ensure the right amount of food is eaten then this will be a score of 5 Supervision/Setup.

Bladder Management

Question: "My patient is continent but has spills from his urinal. Does this affect the FIM score?
Answer: "The definition of an accident for the purpose of scoring FIM is defined as "the wetting of linen, bedclothes or clothing". If a patient has a spill from a bedpan or urinal and the linen, bedclothes or clothing are wet (or soiled) then the patient has had an accident. The new January 2023 Frequency of Accidents rules apply. If the patient has had five spills in the last three days the FIM score is 1 Total Assistance.

Sara Steady



Clarification: Majority of the time, as there is a no lift policy and 2 staff are used, it is scored a 1 Total Assistance. Sometimes on discharge or transferring in the community, it could be scored a 2 Maximal Contact Assistance. Score to be determined by how much of the activity the patient/client performs.

Locomotion

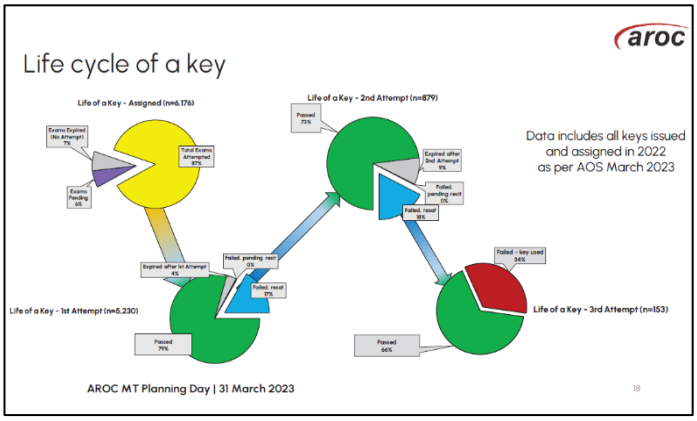
Question: Are podiatry made shoe insoles for normal shoes counted as modified independence for locomotion/mobility and stairs?
Answer: Ask the question - are they used in all footwear to assist and enable mobility? If the answer is yes, then they are considered an orthotic with no help required therefore score 6 Modified independence. However, if the innersoles are for a medical reason i.e. arch support/pain etc; they would not be counted for FIM scoring.

REMINDERS

Lifecycle of a key 2022

Please see below "Lifecycle of a key" infographic. The data includes all keys issued and assigned in 2022. Click on the picture for a link to the graphic. As you can see:

- 79% of clinicians passed their exam on the first attempt.
- 73% of those who re-attempted their exam passed on their second attempt.
- 66% of clinicians who were attempting their exam for the third time passed.
- Only 52 (out of 6,176) clinicians failed their exam three times.



ARNA Conference

ARNA National Conference – 19th -20th October 2023 in Canberra. For more details click the following link: **https://www.arna.com.au/ARNA/Events/Conference.aspx**

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