

A Systematic Approach for a Functional Assessment Process: Guidelines for Use with Injured Workers



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The Functional Assessment Network (FAN)

*A Systematic Approach for a Functional Assessment Process:
Guidelines for Use with Injured Worker - The Functional Assessment Network(2003)*

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Table of Contents

Introduction.....	2
Functional Assessment Network’s Statement of Values.....	3
A Systematic Approach for a Functional Assessment Process: Guidelines for Use with Injured Workers	
 Stage 1: Initiation of a Functional Assessment (FA) with Injured Workers.....	5
 Stage 2: The Functional Assessment with an Injured Worker.....	8
 Stage 3: The Opinion.....	11
 Stage 4: The Report.....	12
 Stage 5: Use of FA Information.....	14

Moving Toward Our Vision of Functional Assessment Practices for Injured Workers Introduction

On September 25-28, 2002, eighty-seven stakeholders participated in an interactive participatory conference called *Functional Assessment: A Time for Consensus, A Time for Change* at McMaster University, Hamilton, Ontario. These stakeholders represented the 'whole system' of people involved in all aspects of FA practices including those who experience, conduct, interpret and use FAs with injured workers. They set out to:

- Develop a common understanding of the issues related to functional assessment (FA) practices.
- Develop an awareness of evidence that relates to FA issues.
- Develop strategies for facilitating an evidence-based FA process that promotes excellence and accountability.

Through a series of exercises in various mixes of stakeholder groups, participants explored the present context of FAs through reflections on the past and global perspectives, and identified a range of potential actions for a better future. Participants were given recent study findings about FA practices in employer-compensation systems for discussion. Activities culminated in the commitment of many participants to Action Groups that continued to work after the conference in order to make the better future become a reality. This initiative was begun by a McMaster University research team who were evaluating its potential contribution towards research dissemination and changing practices. Six months later (April 9, 2003), stakeholders met to further the work of the various Action Groups, and named this new community of stakeholders: the Functional Assessment Network.

The Action Groups have generated educational materials and other written documents. These include the Statement of Values below, written to express the groups' aspirations. The attached guidelines for FA practice grew out of these values as a way of articulating basic expectations of FA practices in relation to each section of the *McMaster FA Model: Towards an Optimal Process*.

Functional Assessment Network's Statement of Values

Research / Evidence-Based Principles (EBP)

We support the application of evidence-based principles in the delivery of FA's.

We acknowledge that evidence-based practice incorporates the best evidence available.

'Best' evidence includes:

- injured workers' opinions and experience
- practitioners' opinions, experience and expertise
- scientific literature - both qualitative and quantitative

We support the application of evidence-based principles (EBP) in all stages of the FA process: initiation, assessment, professional opinion, report, and use of information.

We therefore will develop a FA research agenda to investigate issues of: safety, prevention, effectiveness, validity, lived experience, cost effectiveness, etc.

Systematic Process

We believe all parties involved in experiencing, conducting, interpreting and using FAs with injured workers should handle FAs systematically, consistently and with clarity of expectations.

We will develop guidelines that articulate basic expectations for decision-making at each step of the McMaster FA Model.

Prevention

We have a collective responsibility to eliminate all injuries and disease.

We believe that FA's are one method that may be used to provide useful information to enable an individual to function competitively and safely. By minimizing the effects of disability, the FA can assist with tertiary prevention.

We believe information from FAs can assist with appropriately matching the job's demands with the individual's abilities, and hence reduce the potential for further re-injury or contributing to deterioration and/or exacerbation of an injury. In this way, FAs support primary and secondary prevention of injury or illness.

Collaborative Approach

We recognize that the sum total of the whole is greater than the sum total of its individual parts.

Collectively, we have an equal responsibility to ensure that all stakeholders (e.g., injured workers, health care providers, advocates, employers, 3rd party insurers, WSIB and FA assessors) are focused on achieving the central goal which is optimal functional recovery of the injured person.

We believe this is achieved through a commitment to a collaborative approach that integrates all interests and perspectives towards the central good.

Whole Person Approach

All stakeholders involved in the FA process will respect, appreciate, value and consider the physical, psychological, emotional, cultural, developmental, socio-economic and spiritual complexity of the person in order to optimize the person's function in the home, work and leisure environments. In so doing, all in our society will benefit.

Assessor Competency

Our vision is that in the future, all FAs will be performed by assessors who meet defined competency criteria to ensure these skills exist, and to ensure a high standard of service and care.

Education

Through a variety of delivery methods/tools/strategies, we can increase others' awareness and understanding of FAs.

We will develop, and assist others to develop consistent, evidence-based education materials for use by all stakeholders involved in the FA process.

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The Functional Assessment Network (Aug/03)

Stage 1 Initiation of a Functional Assessment (FA) with Injured Workers

Key Activities: Decide when and if to proceed with a FA. Gather and share information. Develop collaborative relationships.

Principle

For an effective FA process, there needs to be respectful dialogue, collaboration and trust between the worker, FA user (employer, WSIB if involved), and FA provider from the beginning. Efforts need to be made to establish communication. The individual or organization that initiates a request for a functional assessment must ensure that the worker is informed and involved in the process. The initiating party is responsible for ensuring the appropriate background information is provided to those involved in the process to ensure a safe and effective functional assessment is completed.

Examples of initiating parties:

WSIB - adjudicators, nurse case managers, labour market re-entry case managers, appeals resolution officers;

Employers - occupational health personnel (physician, OHN, OT), human resources personnel, supervisors, health and safety representatives

Workers - injured workers and representatives, union

Others - insurers, legal representatives, rehab consultants, healthcare community (family physicians, physiotherapists, etc.)

Performance Criteria

1. The initiating individual/organization will utilize a decision-making process to determine if it is appropriate to proceed with an FA. Before proceeding with an FA referral, the initiating individual/organization will ensure the following key elements exist as defined by the algorithm "*Guidelines For Considering A Functional Assessment*"¹:
 - It is a complex situation with an injured worker.
 - The return to work process is not working.
 - The FA will be used: as one piece of information for return to work planning, for validation of an opinion or direction, to bring all parties to the table, to allow the worker to explore her/his abilities and limitations, to address suitability of job offer. If the purpose is to determine if the worker is cooperating or giving full effort or malingering, do not proceed with the FA.
 - The timing is appropriate when:
 - a) screening has been completed for underlying medical conditions including mental health issues, critical health issues, i.e. surgery, heart condition, HBP etc.

¹ *Guidelines For Considering A Functional Assessment* is a decision-making flowchart available at <http://www.fhs.mcmaster.ca/rehab/faculty/research/wfu/wfuactivities.html> or by contacting Susan Strong at strongs@mcmaster.ca

- b) the worker is able to participate in the assessment
 - c) the worker has reached maximum medical recovery and a job type has been identified or the worker is off work and suitable modified work needs to be identified,
 - The worker and employer parties support the use of the FA.
2. The initiating individual/organization will meet with the worker, and when possible with the provider, to:
- Review the reason and objective for the FA process. It will be explained how the FA will fit into the overall return to work plan, and disability management practices.
 - Review the current Physical Demands Analysis or PDA and ensure it has been signed off by the worker and position supervisor (if available). If the purpose of the FA is for a job match then a current PDA is required. It is inappropriate to proceed with an FA if there is no PDA in these cases.
 - Explain and provide written information on what is involved during the assessment, what the worker can expect, including that inconsistencies in performance will be discussed and documented by the assessor.
- Note: It would be helpful to provide an information pamphlet or FACT SHEET that the worker can use for themselves and to inform others as necessary (e.g. doctor, family members)*
- Review what decisions will be made, in part, based on the assessment report. The FA is intended to be used as one piece of information for:
 - a) return to work planning; including setting up graduated return to work programs, job modifications, consideration of therapy and aids/assistive devices
 - b) validation of an opinion or direction
 - c) bringing all parties to the table
 - d) enabling the worker to explore her/his abilities and limitations
 - e) confirmation of the suitability of a job offer.
- If the purpose is to determine if the worker is cooperating or giving full effort or malingering, **do not** proceed with the FA.
- Obtain informed consent for release of the assessment information for each party involved and explain the process for how the client will receive the assessment information.
 - Determine the worker's comfort with the process, and address any concerns the worker may have about the process.
3. The initiating individual/organization will ensure that at least one week prior to the assessment by what ever means (e.g., themselves or by ensuring provider takes action):
- Medical clearance is requested and obtained prior to proceeding with the FA from the treating practitioner. A cover letter stating the purpose of the FA and how the information will be used is sent with the medical clearance request.
- Note: The clearance letter should indicate if the worker is able to participate in the FA. The clearance letter should only identify any medical conditions or medical restrictions that will impact on the worker's ability to participate in the FA. The letter **should not** specify what the employee can do (i.e., function will be addressed by the FA). Medical clearance should also include any medication the worker is taking that may affect heart rate, blood pressure or performance during the FA.*

- A copy of the clearance letter will be made available to provider/assessor.
- Costs related to the clearance letter will be borne by the initiating individual/organization.
- A provider/assessor with the appropriate competency, experience and scope of practice is selected to address the needs of the FA for the worker.
 - Note: In order for the initiating individual to be a discriminating consumer of FA services, there is a need for the initiating individual to be reflective and research informed concerning FA practices.*
- Any conflicts of interest with parties involved in the FA process are identified and managed.
- Identify any potential barriers to the worker's full participation in the FA (communication, language, cultural issues, transportation) and arrange for the necessary supports or resources (e.g., interpreter, scheduling of assessment).

4. The worker will ensure:

- They communicate any concerns and expectations about the FA process.
- They are educated about how the return to work/compensation systems generally operate and everyone's roles and responsibilities, including their own.
- The FA provider is given any relevant medical information impacting participation at the FA or return to work.
- If medical information needs to be released, the worker contacts their physician to have the information forwarded to the FA provider at least one week prior to the assessment.

5. The initiating organization will ensure that the assessor is provided with detailed information about:

- Reason for referral
- Medical diagnosis
- Current treatment
- Future focus of rehab
- PDA
- Medical clearance

Stage 2 The Functional Assessment with an Injured Worker

Key Activities: Prepare and implement the assessment.

Principle

The assessment must be conducted by an assessor who has the appropriate training, experience and scope of practice to address the needs of the FA for the worker. *[Refer to skill set identified by Assessor Competency Action Group]* The assessor engages routinely in reflective appraisal of their own practices, and prepares for and performs the assessment according to evidence-based assessment practices. The assessor will take actions to enable the worker to participate safely to the best of their ability in a fair, independent assessment of the worker's current level of function in relation to work.

Performance Criteria

1. Prior to the assessment, the assessor will establish if they are the appropriate individual to conduct the assessment by asking themselves:
 - Do I have the knowledge, skills and experience to address the needs of the FA for this particular worker?
 - Is what is being asked by the initiating individual/organization within my scope of practice?
2. The assessor should have the following information prior to proceeding with the FA:
 - Worker's injured body part(s) – *there was discussion and disagreement about whether to include diagnosis and prognosis.*
 - Medical clearance, including medical restrictions for safety during the FA and any underlying medical conditions that may impact on work function.
 - Physical Demands Analysis (PDA) or Job Demands Analysis (JDA) or Worksite Assessment if a job match is being requested. Ideally the assessor will observe the job being assessed at the worksite and when possible obtain videotape for ongoing reference. (See #4 below)
 - Informed written consent by the worker with disclosure of who will receive copies of the final report.
 - What decisions will be made in part based on the FA, and the referral question(s).
3. The assessor is expected to evaluate the quality of any information provided by the initiating individual/organization before proceeding with the FA:
 - Do I have a clear picture of why I am asked to do the FA and how it will be used?
 - Do I have sufficient information about the particular context (i.e., medical, work and workplace) to proceed? Do I need to contact the FA referral source? Do I need to see the actual work setting?
4. The assessor must have a solid understanding of the work and workplace demands before proceeding.
 - When an assessor is asked to determine whether a worker can perform a particular job, the assessor must have an understanding of the work and workplace demands for that particular job.

- When the worker does not have a specified job to return to, and the assessor is matching a worker's abilities to a job type(s), the assessor must understand the typical work and workplace demands for the job type(s).
 - The assessor should not rely solely on job descriptions and the NOC (National Occupation Classification) or DOT (Dictionary of Occupational Titles) to provide sufficient information about job demands.
 - It is understood that PDA's vary with regard to their quality of information, and that the assessor having first hand experience with work environments is preferred.
 - The assessor needs to consider the relevant physical, emotional and cognitive demands of the job and work environment.
 - The assessor should always review the work and workplace demands with the worker for elaboration and verification when the worker is returning to a particular job or to another job with the previous employer.
5. The assessor is expected to engage the worker therapeutically, and as an individual.
- The assessor will establish a professional rapport with the worker and use interventions to facilitate safe optimal performance as appropriate (e.g., address any concerns or anxieties about the FA as they arise, provide pain management strategies, identify and correct unsafe body mechanics, provide aids or assistive devices).
 - The FA assessor will review with the worker the purpose of the FA, expectations of the worker and assessor, the referral information, address any concerns prior to starting the formal assessment, and encourage open dialogue.
 - The assessor will advise the worker that if any inconsistencies in performance occur, they will be discussed with the worker as they arise and documented.
6. A systematic testing protocol will be used driven by clinical reasoning.
- The assessor will approach the assessment on an individual case-by-case basis. Rather than using a 'cookie cutter' approach to assessment, there is expected to be variation for each individual as to how the FA is carried out and address the needs of the worker's condition(s), referral questions and particular context.
 - Using clinical reasoning, the assessor will select relevant tests and use a battery of assessment methods, which includes worker self-report (e.g. interviews, pain scales, depression inventories, ADL questionnaires), clinical observation, standardized instruments and systems, functional and work simulation tasks. It is insufficient to rely solely on standardized evaluation systems.
 - The assessor will ensure the assessment protocol will be sufficiently challenging to match the actual demands of the worker's job or the job type in question, including work pace, work stressors and physical tolerances.
 - In some circumstances, valuable information can be obtained using standardized testing tools in a non-standardized manner to more closely resemble the work situation.
7. The assessor will institute strategies to work within the limitations of the FA instruments and increase rigor including:
- Perform FA over a minimum of two days allowing a comparison of performance over time and pursuit of hypothesis testing (e.g. dealing with inconsistencies).
 - Repeat testing, and use varied methods for triangulation or comparison of information

- Use multiple data sources, including asking the worker being assessed.
 - Obtain and use contextual information (e.g., about medical condition, work and workplace demands) to adjust protocol and to consider during interpretation of findings.
 - Use individualized measures (e.g., work simulation) together with standardized testing for meaningful data.
 - View findings as capturing optimal performance that may not be sustainable in full time work and formulate conclusions accordingly.
8. When dealing with inconsistencies in worker's performance, the assessor:
- Will identify and discuss any inconsistencies as they arise with the worker in a professional and tactful manner, and provide an opportunity for the worker to explain and change his/her performance. The assessor will also address any concerns with the worker.
- Note: To clearly communicate instructions, the assessor could demonstrate the test along with providing verbal instructions. The worker may be given the opportunity, when appropriate, to practice the test prior to administration. Where appropriate, when inconsistencies arise, the worker may repeat the test.*
- Will identify if effort is a barrier to participation in the FA using multiple sources of data to recognize inconsistencies.
 - Must consider the whole picture. Effort cannot be determined solely on repeated strength testing using Jamar results or coefficient of variations (CV's). Research evidence shows that effort cannot be reliably determined by repeated strength testing.
 - Must remember that the focus of the FA is function. Effort during the FA is one factor that may interfere with being able to capture a worker's ability to work. Effort is not a separate evaluation and must be addressed as it relates to participation in the FA. There should be no comment as to whether there will be full effort at the workplace given there is no evidence to support that poor effort during a FA predicts poor effort at the workplace.

Stage 3 The Opinion

Key Activities: Perform process of data analysis, interpretation, and formulation or reframing of the information back into the context of the particular individual and their given work situation.

Principle

The opinion is an impartial, independent evidence based statement of the individual worker's abilities, limitations and barriers to returning to work. The opinion is formulated through consideration of the whole person and their particular situation as it relates to the functional assessment. The opinion relies heavily on the training and experience of the assessor, the parameters of what was assessed, how it was assessed, and the worker's performance.

Performance Criteria

1. The assessor will form an opinion that:
 - Needs to address the particular referral questions being asked within the individual worker's context. It should include an analysis and interpretation of the FA findings.
 - Should be based on interview, worker feedback or self-report, observation, standardized assessment, functional and work simulation tasks.
 - Will apply the assessor's knowledge, training and experience. Specifically, the assessor will apply knowledge and training concerning the impact of injury/illness on function, measurement of function, limitations of assessment instruments, demands of occupations within workplace environments and apply skills in occupational analysis. The assessor's formulation should be based on a theoretical framework or model that addresses the whole person.
 - Should include consideration of inconsistencies wherever they are present and are relevant, based on all the information gathered during the assessment.
 - Will be accompanied by a rationale based on the relevant/pertinent FA findings.
2. The assessor will evaluate information:
 - The assessor should not allow, 'forward feeding' of information that may impact the opinion. For example, unfounded opinions or 'off the record' comments from others should not be considered.
 - Additional or extraneous information should be evaluated for its objective relevance to the FA/opinion. This would include obtaining information and considering other life roles (e.g. caregiver, avocational) and/or activities (e.g. household management activities, leisure activities) and to determine if the information was relevant to the opinion.
3. The assessor will be objective and professional:
 - The assessor will be aware of personal biases and take steps to ensure such biases do not influence the FA opinion.
 - The assessor will provide an opinion that is within the scope of the assessor's knowledge, skill, ability and practice.
 - The assessor will provide an opinion that is based on all relevant information and is limited to what was assessed and observed during the assessment.

Stage 4 The Report

Key Activities: Document and communicate the assessor's opinion together with a synthesis of the FA findings.

Principle

The report clearly communicates all necessary information in a manner that all parties can understand and use. The intent is to provide information to support a collaborative process for return to work planning and disability management.

Performance Criteria

1. The report will identify:
 - The referral source, and state the intended purpose and objective of the FA in order to clearly define the scope of the report and prevent interpretation of the results beyond the intended scope.
 - All sources of information that was used to formulate the conclusions and recommendations. This will include the assessment tools, methods, observations and the workers perceptions and/or feedback offered during the process.
2. The content of the report:
 - Will be written in language that is easily understood by all parties involved.
 - The terms used will be clearly defined to avoid inconsistent or misinterpretation. Jargon will be avoided.
3. The format of the report will be clear and concise.
 - A one-page summary is useful re: the relevant background information, all conclusions and recommendations, and supporting rationale.
 - Any report addressing job match questions will clearly describe the match or mismatch of the worker's abilities with the job criteria and work environment demands. A chart illustrating the matches and mismatches is helpful.
4. The report will state the assessor's opinion.
 - The report will provide conclusions that address the referral questions and identify the worker's abilities, limitations and barriers for return to work (e.g., fear of re-injury, pain management, non-occupational roles and responsibilities, mental health issues).
 - Each conclusion will be supported by rationale that flows logically from the findings.
 - All findings will be presented within an appropriate context in order to attempt to avoid potential misinterpretation.
 - Inconsistencies will be noted, actions taken and discussed where relevant.
5. Recommendations will place findings back into context (e.g., worker's medical condition, work and workplace demands, referral question) in order for the reader to use the information and facilitate practical implementation.
 - Recommendations may include items for consideration that are outside the scope of the referral objectives, but relevant to the workers return to work.

- Recommendations will consider environmental factors (e.g., technology, the natural environment, human changes to the environment, and available services) that may support or hinder the particular worker's situation.
6. The report will be accessible to all parties working together.
- The worker will be given a copy of the report.
 - Copies of the report will be circulated by the provider to all parties stated on the worker's consent obtained prior to the FA.
 - The report will be completed in a timely fashion (e.g., within 10 to 15 business days).

Stage 5 Use of FA Information

Key Activities: Review assessment information and consider how the information can be used to assist with return to work planning and disability management.

Principle

The information provided in the FA will be used as part of a constructive collaborative process focused on the worker's return to work. The information serves as one tool to assist with the return to work process. The users need to be discerning consumers of FA services and information.

Performance Criteria:

1. The "team" (including the worker) needs to review the report and consider the opinion and recommendations.
 - Rationale needs to be provided to the team if the information is not to be used.
 - The FA is not by itself an intervention. It is to be used in conjunction with good disability management practices.
2. The FA serves as one piece of information for:
 - Return to work planning (e.g., develop a return to work plan, identify needs of assistive devices/aids, work modifications, recommendations for therapy or rehabilitation)
 - Validation of an opinion or direction (e.g., labour market return's SEB plan, return to previous job and/or workplace)
 - Bringing all parties to the table (e.g. negotiate a joint understanding, prevent conflict, advance return to work process)
 - Allowing the worker to explore her/his abilities and limitations (e.g., when the worker has been off work for a length of time or now has a permanent impairment)
 - Confirming suitability of job offer (e.g., employer is fulfilling Duty to Accommodate requirements or adjudicator is establishing benefits)
 - It is **not to be used** solely as a method to determine the worker's effort or compliance.
3. The information needs to be used for and restricted to the intended purpose, as identified at the time of the original FA request.
4. The information needs to be considered for currency and continued relevancy.
 - The team needs to consider if the health and /or functional status of the worker has changed, the job demands have changed, or the work environment has changed from the time the FA was completed.
 - All FA's provide information that was gathered at a specific point in time.
 - Users of the information need to consider the context for which the assessment was conducted.
5. In order for users to be discerning consumers of FA information, they should:
 - Become familiar with FA practices and know the approach used by the particular provider selected.

- Understand the evidence for how FA's can be used and should be used.
- Seek clarification from assessors whenever they do not fully understand the information provided in their reports.
- Seek advice when they do not have experience with FA's.

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