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FIM: Nurses Putting The Pieces Together

**PROBLEM**
- 69% of license staff required more education after Pre-Survey FIM Questionnaire
- Inaccurate scoring identified by unlicensed staff
- Increase staff workload with high patient acuity
- Lack of allied health documentation
- Multiple FIM flowsheets for interdisciplinary team

**RESULTS**
Interventions were evaluated through auditing accuracy and completion of FIM documentation. Prospective Payment Systems (PPS) Coordinators compiled data related to FIM compliance.

**CONCLUSION**
- Day 1 and Day 2 admissions scores for Neuro team increased over 6 months
- Admissions scores for Day 3 declined slightly
- Post-Survey FIM Questionnaire revealed only 4% of staff required more education

**WHAT’S NEXT?**
- Organize a FIM Focus Committee including a group of 6 RNs
- Provide a FIM workshop coordinated by Uniform Data System for Medical Rehabilitation (UDSMR) for license staff including nursing and allied health
- Implement carepartner FIM Tool for better communication between licensed and unlicensed staff

**REFERENCES**

**ACKNOWLEDGEMENTS**
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**INTRODUCTION**
Functional Independence Measure (FIM) is a tool used by rehabilitation facilities to measure the functional level of a patient from the time of admission until discharge. FIM scores captured during the first three days of admission and the last seven days prior to discharge will determine how a rehabilitation center will receive payment.

At Vidant Medical Center Rehabilitation Services in Greenville, North Carolina, there was a decrease in Medicare reimbursement due to incorrect FIM scoring during the admission process and lack of scores to provide evidence needed for increase length of stay.

**PLAN**
- FIM education was provided by PPS Coordinator to nursing staff.
- Unlicensed staff were no longer required to document functional levels in the EHR.
- A flowsheet was created in the EHR for nurses and allied health to document FIM ratings under the same interdisciplinary care plan

**WHAT’S NEXT?**

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