



INTRODUCTION

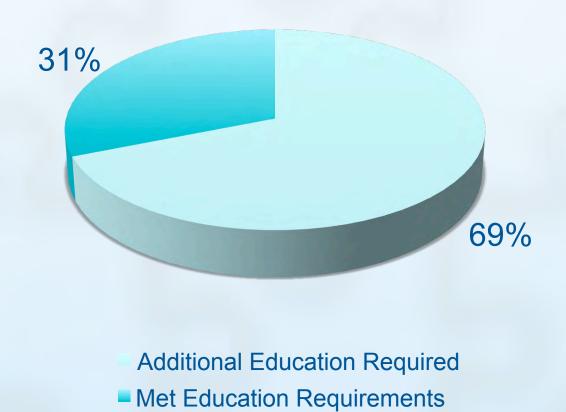
Functional Independence Measure (FIM) is a tool used by rehabilitation facilities to measure the functional level of a patient from the time of admission until discharge. FIM scores captured during the first three days of admission and the last seven days prior to discharge will determine how a rehabilitation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



- 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

Pre-Survey FIM Questionnaire



- 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

FIM: Nurses Putting The Pieces Together

Letitia G. Johnson, ADN, RN III, CRRN • April J. Lancaster, ADN, RN III, CRRN • Shelia K. Little, ADN, RN II, CRRN • Yolanda S. Ricks, BSN, RN II, CRRN Vidant Medical Center, Greenville N.C.

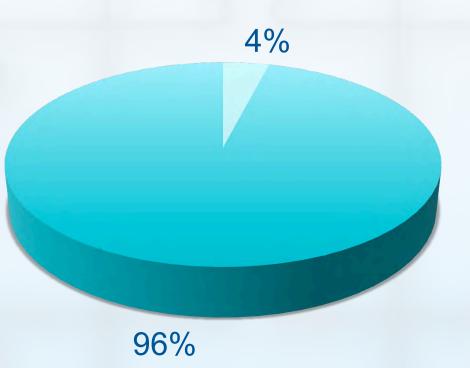
PROBLEM

PLAN

RESULTS

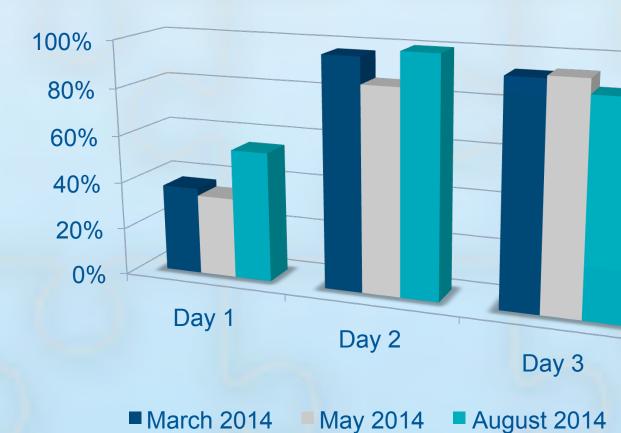
Interventions were evaluated through auditing accuracy and completion of FIM documentation. Prospective Payment Systems (PPS) Coordinators compiled data related to FIM compliance.

Post-Survey FIM Questionnaire



Additional Education Required Met Education Requirements

Neuro Team Admission FIM Frequency



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

| auinm | | | | | | | | | | | | | | |
|---|-------|-----------------------|--------------|------|--------------------|-------------|---------|-----------------|----------------|-------------------|--|-------------------------------|------------------------------------|----------------|
| auinm | | | | | | | | CA | REPAF | RTNE | R FIM TOO | L | | |
| Fauinm | | | | | | | | | | | TOILETING | | | |
| Equipment Dentures Pre-thickened Liquids Liquids thickened by staff on Assist w/ feeding 25% 50% 75% NPO | | | | | | | | | ied by staff _ | | Assistive Device Pants down | Urinal/Independent Hygiene | _ Supervision Steadyin Pants up | g/Balance |
| NG | | | | | BATHI | NG | | Sho | ower | | BLADDER | | | Time |
| Equipm | ent | As | sistive Devi | ce | Indepe | endent | | Assi | istive Device | | Pull-up/Diaper | Urinal Con | dom Cath Foley | BSC |
| | Ind | d Setup Min 50% Total | | | | Wash | | Rinse Dry | | | Continent | Incontinent | Accident (wet clothes/line | en) |
| | mu | Jetup | 30% | | Right a | | usri n | unse | bry | | Independent | Setup/Sup Bed | pan 50% | Total |
| sh Hair | | | | | Left an | m | | | | | | | | |
| | | | | | Chest | | | | | | BOWEL | | | Time |
| ds An lunuur | | | | | Abdom | | | | + | | Pull-up/Diaper/Pad | BSC | Colostomy | |
| 1akeup | | | | | Perine | | | | | | Continent | Incontinent | Accident (soiled clothe | es/linen) |
| Right leg | | | | | | | | | | | Independent Setup/Supervision Bedpan 50% Total | | | Total |
| | | | | | Left leg | | | | | | | | | |
| | | | | | Right fo | - | | | | | | | | |
| | | | | | Left for | ot | | | | | | | | |
| 6: UPPE | R BOI | DY | ndepender | nt | Brace/ | /Orthosis _ | | As | sistive Devic | e | UNDRESSING: UPPERI | BODY Independent | Brace/Orthosis As | sistive Device |
| Right | | Butto | | Tuck | | DSG | | | | sten | UNDSG Right Left | | UNDSG Right Let | |
| arm | arm | Overhe | ad down | | | Bra | arm | arm | twist | | Shirt arm | Overhead down tuck | Bra arm arr | n twist |
| | | DY | Independer | | TEDs// | AFO/Prost | thesis | As [,] | sistive Devic | e | | BODY Independent | | sistive Device |
| G: LOW | ER BO | | .eft | DSG | 3 | Right | | | Left Butto | n/Zip | UNDSG Right fo | oot Left foot | UNDSG Right Left Right | |
| G: LOW | Rij | | | | | leg | leg | hip | hip | | Socks | | leg leg hip | hip |
| i: LOW | Rij | | pot | Dor | +c / | | | | | | Shoes | | Pants/ Underwear | |
| G: LOW | Rij | | | Par | its/ derwear | | | | | | | | | |
| 6: LOW | Rij | | | | derwear | | Fasten | | | | Shoelaces/ties | | Belt Around Fasten | |
| 'ties | Rij | | | Un | derwear | | Fasten_ | | | | Shoelaces/ties | | Belt Around Fasten | |
| /ties RS | Rij | pot f | Dot | Bel | derwear t Arour | nd | | | | | | LOCOMOTION | Belt Around Fasten | |
| /ties RS | Rij | pot f | Dot | Bel | derwear t Arour | nd | | Lower/M | Move both legs | Lift <u>and</u> L | | LOCOMOTION Walk | | /e Device |
| /ties RS | Rij | pot f | Dot | Bel | derwear t Arour | nd | | Lower/N | /ove both legs | Lift <u>and</u> L | | | Wheelchair Assistiv | |





REFERENCES

0' Brien, S. R., Xue, Y., Ingersoll, G. and Kelly, A. (2013) Shorter length of stay is associated with worse functional Outcomes for Medicare beneficiaries with stroke.

(http://edphysicaltherapy,93,1592-1602)

Wang, Y., Byers, K. L., Velozo, C.A. (2008) Validation of FIM-MDS crosswalk conversion algorithm. Journal of Rehabilitation research & Development, 45, 1065-1076

ACKNOWLEDGEMENTS

Jennifer C. Smith, MBA, OTR/L **Rehab Admissions Clinical Documentation Specialist** Vidant Medical Center