



## USING ICF as planning and evaluation instrument in Early Childhood Intervention

Manfred Pretis

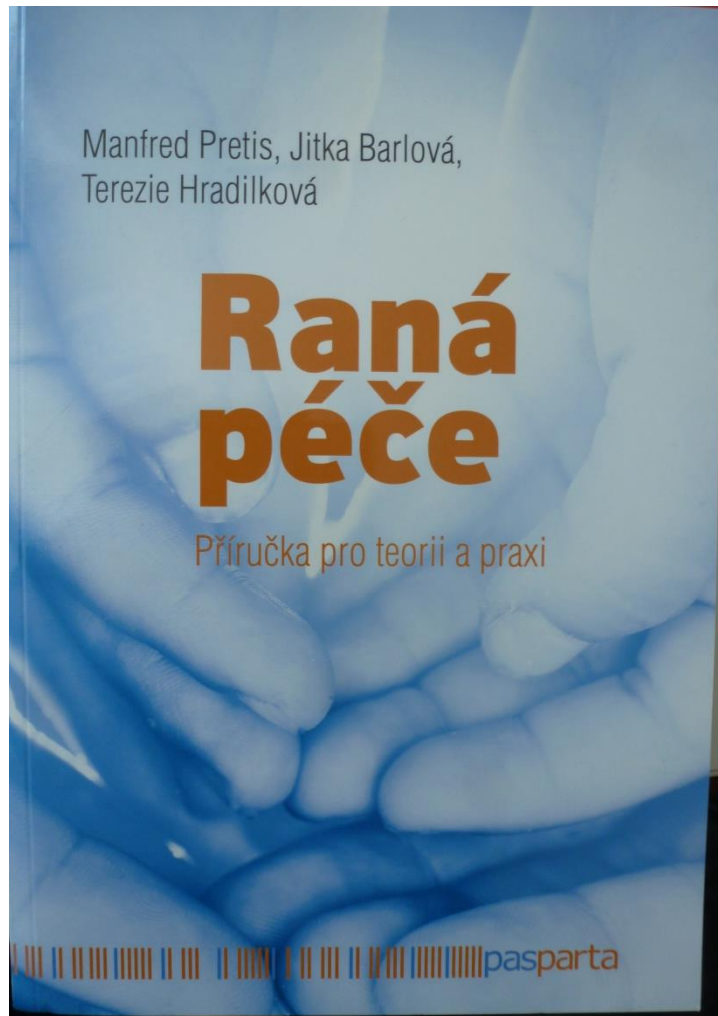
[www.icf-inclusion.net](http://www.icf-inclusion.net)

[www.icf-plan.eu](http://www.icf-plan.eu)

[www.icf-implement.net](http://www.icf-implement.net)



# 1) What this presentation is about: the International Classification of Functioning, Disability and Health (WHO, 2001 ff)



**Ústav zdravotnických informací a statistiky ČR**  
Institute of Health Information and Statistics of the Czech Republic

COVID-19O NÁSNZISKONFERENCekomunikace s ÚZISAKTUALITY

Registry a sběr datStatistické výstupy

Plán sběru dat  
Registrace a vstup do registrů  
Roční výkazy  
Národní registr poskytovatelů zdravotních služeb  
Národní registr zdravotnických pracovníků  
Národní registr hrazených zdravotních služeb  
Národní zdravotní registry  
Ostatní rezortní registry  
Ochrana veřejného zdraví  
**Klasifikace**  
IS z datových souborů ČSÚ  
IS z datových souborů ČSSZ

## Mezinárodní klasifikace funkčních schopností, disability a zdraví

O klasifikaciPublikaceNástrojeVzdělávání

Aktivitty související s aktualizací, implementací a podporou české verze MKF v letech 2020–2022 jsou řešeny v rámci projektu [Národní centrum pro medicínské nomenklatury a klasifikace \(NCMNK\)](#) Operačního programu Zaměstnanost, registrační číslo projektu: CZ.03.4.74/0.0/0.0/15\_025/0016089.

Evropská unie  
Evropský sociální fond  
Operační program Zaměstnanost

NÁRODNÍ CENTRUM  
PRO MEDICÍNSKÉ NOMENKLATURY  
A KLASIFIKACE



UNIVERZITA  
KARLOVA

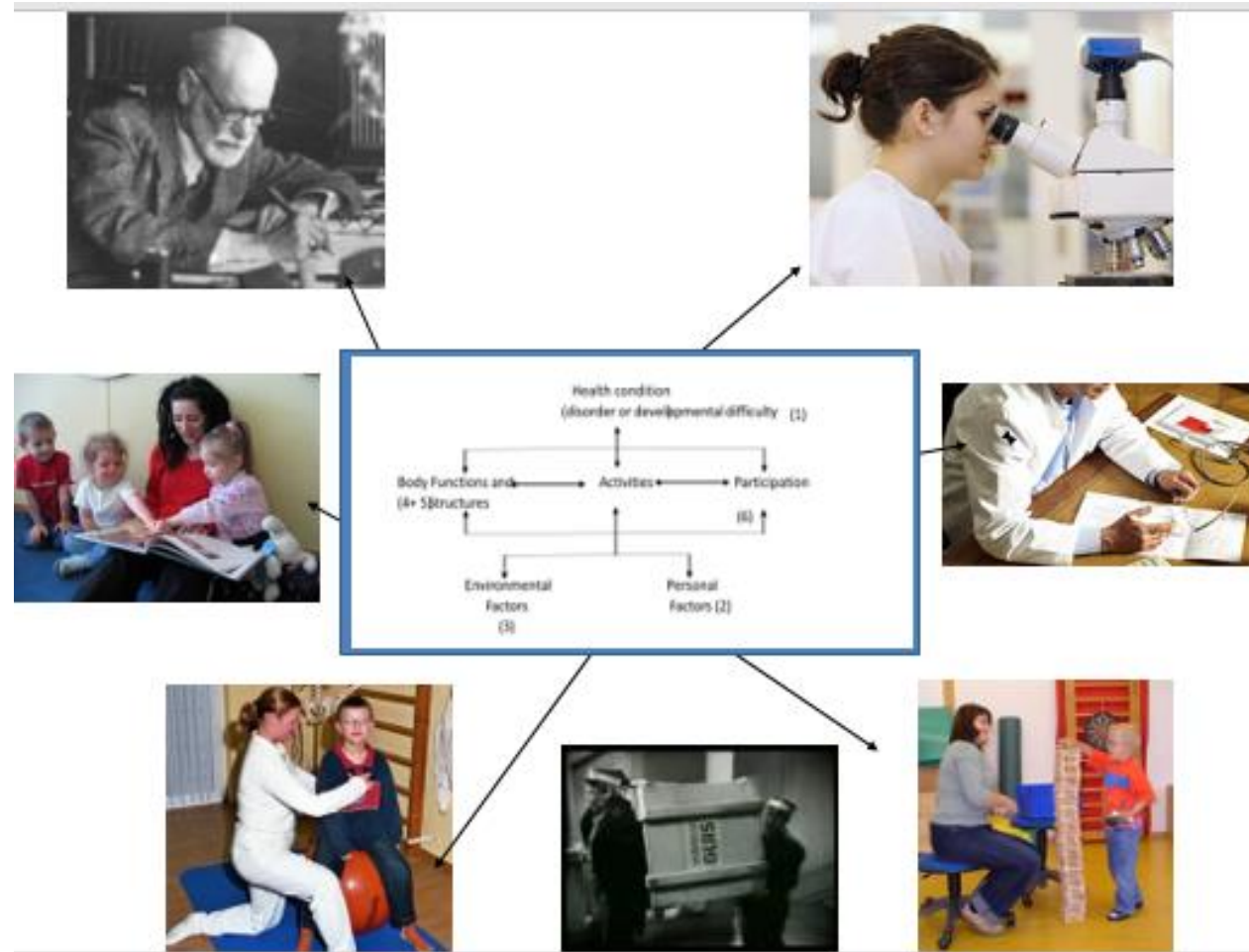
### Úvod k MKF

Mezinárodní klasifikace funkčních schopností, disability a zdraví – MKF (v originále [International Classification of Functioning, Disability and Health – ICF](#)) patří do skupiny klasifikací vyvinutých Světovou zdravotnickou organizací (WHO).

MKF je víceúčelová klasifikace a slouží různým disciplínám a různým sektorům. Popisuje situaci každé osoby v řadě domén vztahujících se k funkčnímu stavu pacienta. Hlavním smyslem klasifikace MKF je poskytnout vědecké podklady pro porozumění a výzkum zdraví a stavů se zdravím souvisejících. Lze ji použít pro zlepšení komunikace mezi zdravotníky, vědci, veřejností a osobami se zdravotním postižením. Klasifikace umožňuje pozorování a porovnávání dat z různých oblastí a zemí. Poskytuje možnost systematického kódování pro zdravotnické a sociální informační služby.

Doporučené články  
Rodička a novorozenec 2016–2021

## 2) Where to use it: The „Team around the family“



What is new? -> a „meta terminology“ for all involved team members focusing on „PARTICIPATION“

No more	But MEANINGFUL participation
Social behaviour	Participation in interactions Participation in tasks
Gross motor behaviour	Participation in walking Grabbing objects Moving around + <i>Control of movements (=body functions)</i> + <i>Muscles tonus (=body functions)</i>
Cognition	Participation in learning + <i>Higher cognitive functions (=body functions)</i> + <i>Intellegence (=body functions)</i>
Social background	Environmental aspects
Expressive/receptive language	Participation in communication + <i>speech and language functions (body function)</i>
Autonomy	Participation in self care

### 3) What is the ICF and how does it work?

ICF is a complementary (ability-focused and environment-interacting) description system (by means of **health components** and well defined **common categories**) to address the complex situation of a person with a health problem in a holistic interconnected – non-stigmatizing way in order to empower participation.



# Key aspects

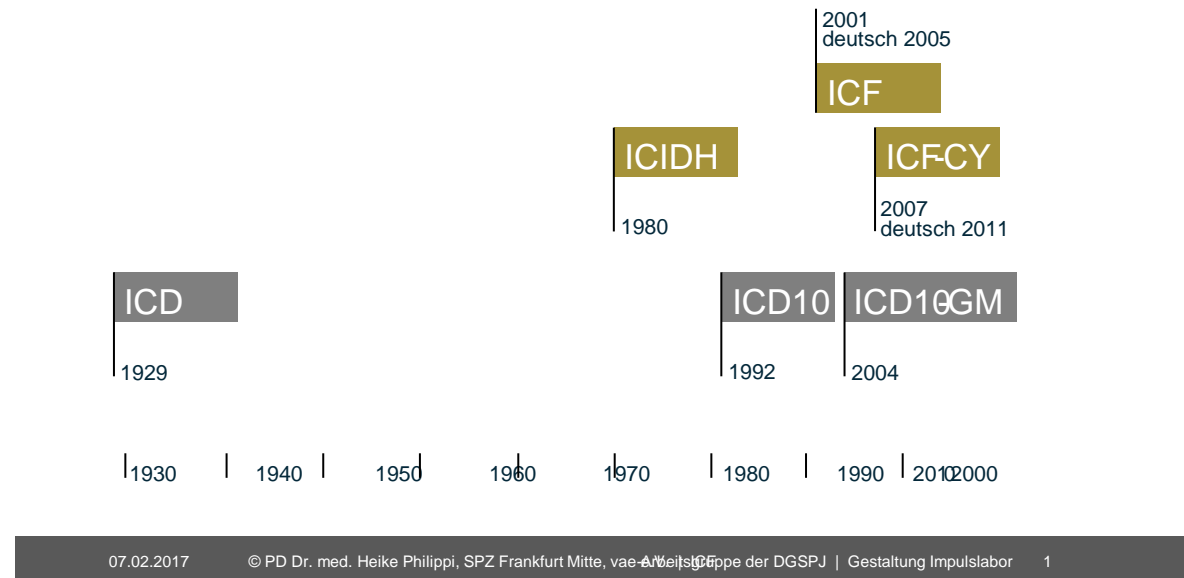
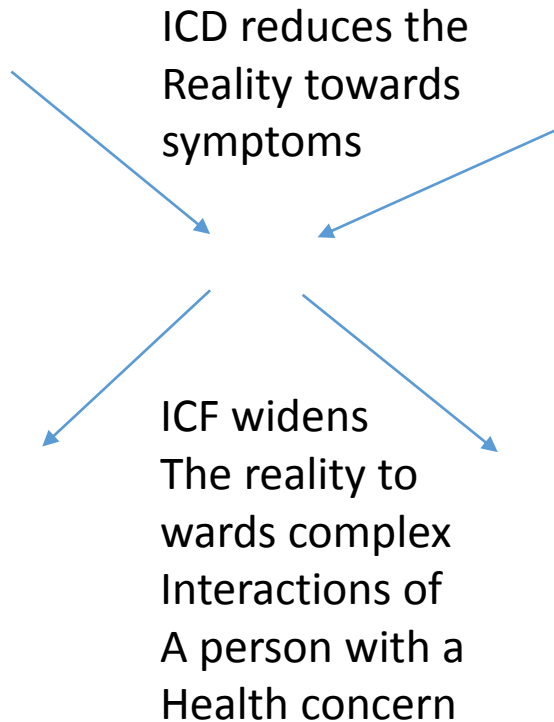
1. Complementarity towards ICD 10 (or 11) or DSM V
2. Well defined (transsectoral) categories
3. Ability focused (primarily based on OBSERVATIONS)
4. Disability as a person-environment interaction
5. Thinking and acting based on networks and interconnections

## Goal:

6. Plan, describe, evaluate interventions with a COMMON language and COMMON evaluation criteria (WHO qualifiers) focussing on
7. meaningful participation goals of persons (with a health problem)

# 3.1. Complementary approach

## Development of the WHO family of health-classifications

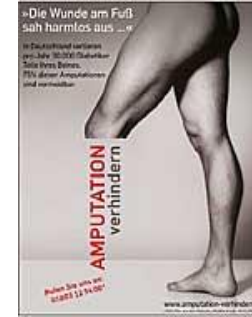




## 3.2 Defined categories: From ICD to ICF: ICIDH

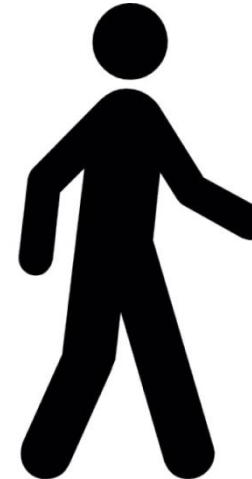
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Body structures



<http://www.diabsite.de/aktuelles/nachrichten/2012/120321c.html>

Body functions



[http://de.freepik.com/freie-ikonen/silhouette-eines-mannes-zu-fuss\\_703031.htm#term=spaziergang&page=1&position=33](http://de.freepik.com/freie-ikonen/silhouette-eines-mannes-zu-fuss_703031.htm#term=spaziergang&page=1&position=33)

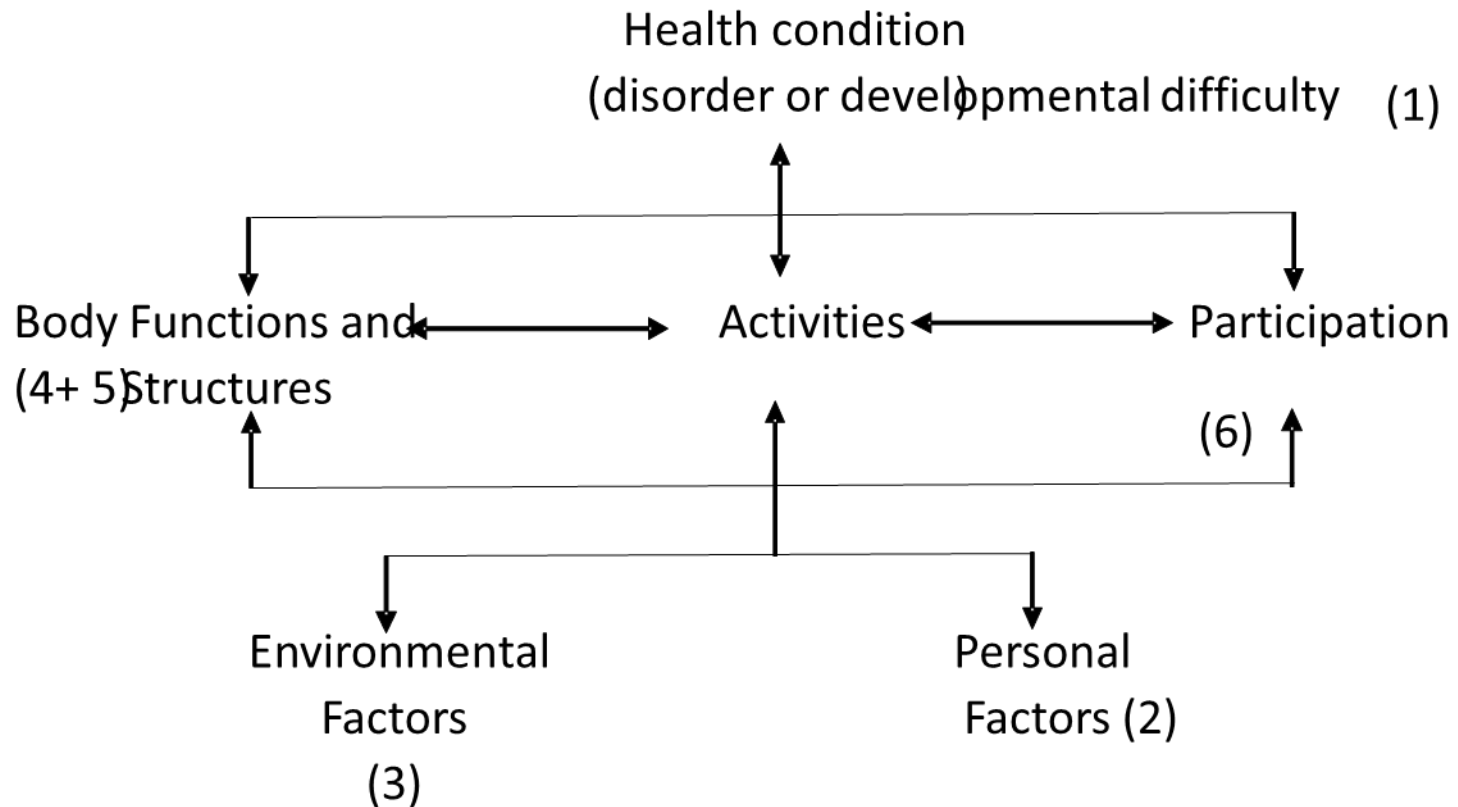
Participation



<http://www.schule-und-familie.de/ausmalbild-drucken/malvorlage-fussballspiel.html>



# Description system by means of health components and well defined common categories



# Thinking and acting based on „health components“

= Functional assessments as a description what children (persons) with health concerns can do in relevant contexts compared to what typically developed children (persons) can do or wish to do.

1. Health concern/health problem/diagnosis
2. Personal aspects (no acronym)
3. (e) = environment
4. (s) = Body structures
5. (b) = Body functions
6. (d) = activities/participation

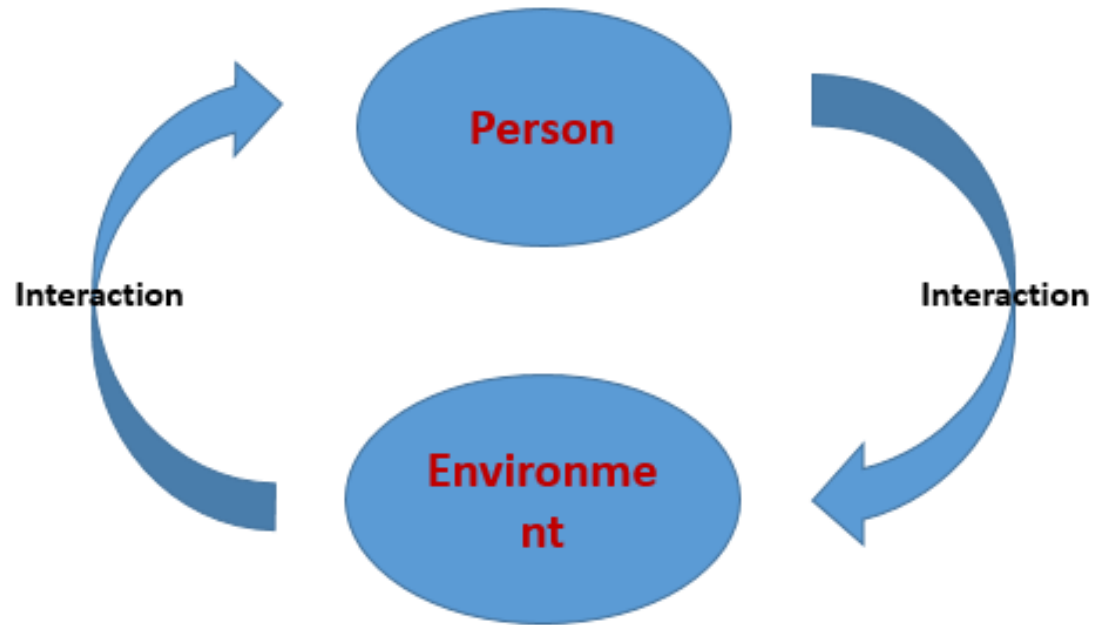


### 3.3 Paradigm shifts towards ability focus

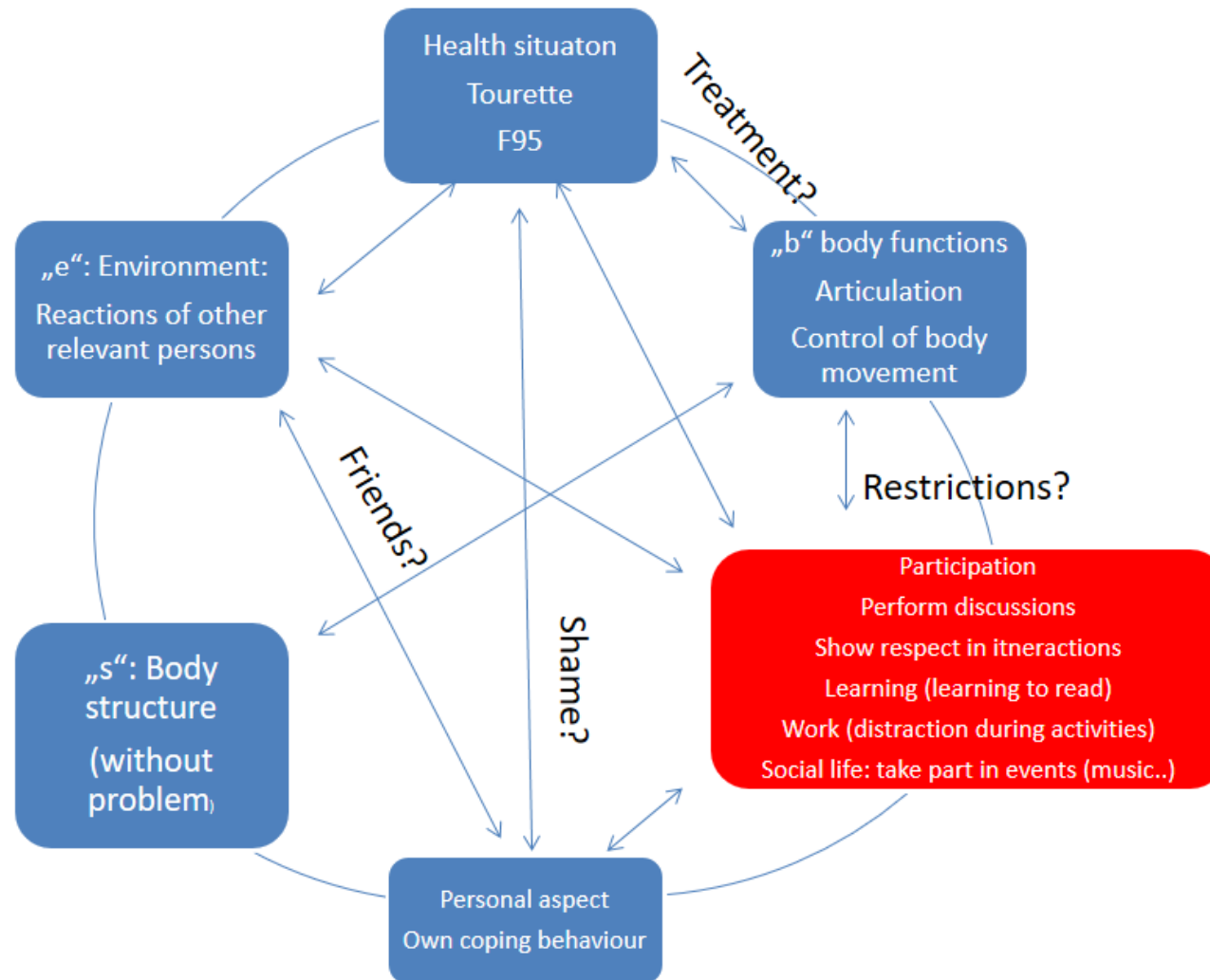


## 3.4 Environment interacting

The new understanding of Disability within ICF



# 3.5 Thinking and acting in a holistic interconnected way



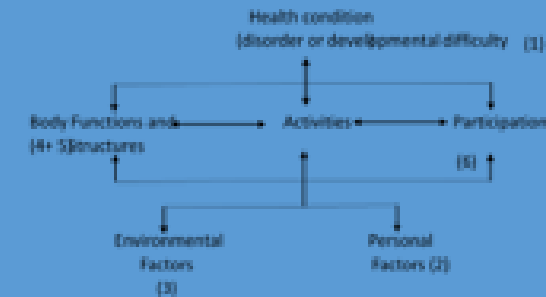
### 3.6 Planning, documenting and evaluated interventions using a common „meta“ language

ICF transferred in daily practice

([www.icf-plan.eu](http://www.icf-plan.eu))

1) Parental concern and/or Diagnosis

2) Status-quo (ability based narrative/data of the child following the 5 health components)



3) Assessment/qualifying  
in relation to environmental barrieres/facilitators

4) Needs definition towards highest possible participation

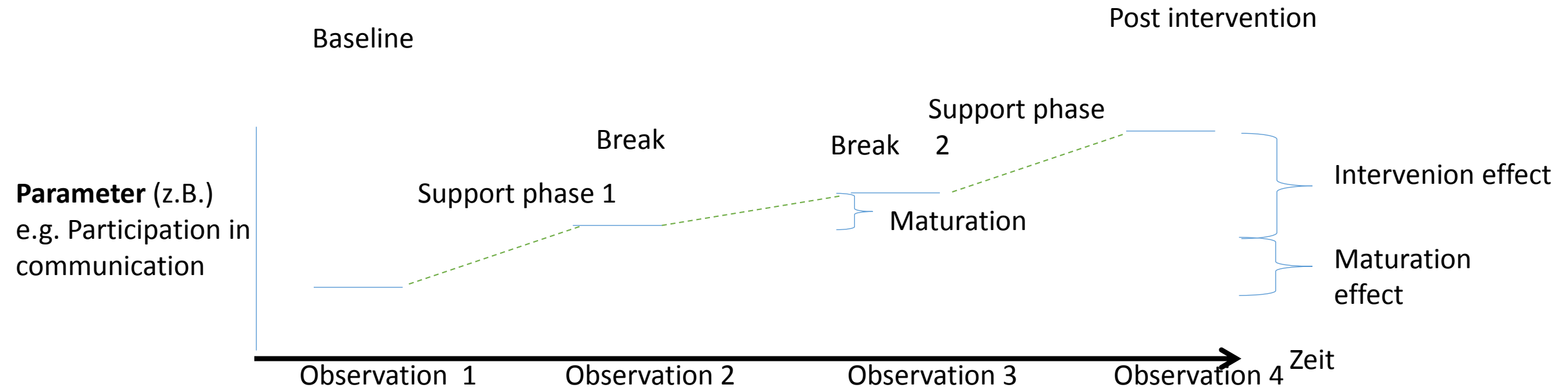
5) Participation goals

6) Services needs

7) ICF based documentation and evaluation

Pre-requisites: (Olga, Q90, 3a)

- Description of the situation using observation data
- Considering environmental facilitators and barriers (Parents empower Olga to say words)
- Olga points at objects (d3350)
- Comparable assessment criteria d335.3 (=severe participation restriction)
- Consensus about participation goals
- „Olga supports her pointing at objects at home by means of single utterances“





### 3.7. non stigmatizing way, focusing on PARTICIPATION

Person is not reduced a diagnosis (Down-Child, autistic...)

<http://www.thefirst1000days.net/video2.html>

PARTICIPATION refers what a person with a health problem can do in a meaningful way in a specific context.



OBSERVATIONS

Down Syndrome (Q90)	Connecting with diagnosis	HEALTH SITU- ATON
Mehmet 3a old Living in a Turkish speaking context		PERSONAL ASPECTS
In a context with toys In the presence of 2 attachment persons Guided by his mother by verbal and hands on prompts	The environ-ment as facili-tator or barrier	ENVIRONMENT
With facial signs and (supposingly 3 chromosomes 21)	Aknowledging that a person has a BODY	BODY STRUCT- URES
Hearing, seeing Coordinated eye-hand-coordination With joint mobility Trunc controll	That this body performs FUNCTIONS	BODY FUNC- TIONS
imitating ist mother (clapping hands) (d1: learning) Watching his mother (d1 learning) Reacting on prompts during activities (d2 performing tasks) Handling cubes for 12 seconds (d4 Mobility) Sitting autonomously (d4 Mobility) Keeping eye contact... (d7 interactions)	Ability focused  What the child can do (in a concrete context)	PARTICIPATION

ASSESSMENTS

Observations might indicate **moderate to significant restricions** in **participation** concerning age typical **tasks (d2)** as we could expect higher self-guided activities as more intensive goal oriented handling. „Learning“ (d1) might also be restricted as age typical participation (colours etc...) might be missing. The **environment** is seen as a **facilitator** (in terms of material tools) with possible slight **barriers** of attitudes of the mother towards the Importance of self guided activities. Issues of communication (d3) and mobility have to be observed (d4).

Mehmet (his mother) might need	Reference to (age) typical participation	Participation goal
Support towards self-guided activities	as typical participation of 3 year old children show a higher amount of self guided activities (able to construct a tower of cubes with 5 briggs).	d210: Within self guided games at home Mehmet starts and finishes single tasks.
Support towards age adequat learning	As typical participation of 3 year old children show interest in colours, construction etc.	d137: Mehmet knows names basic colours of objects when asked by his parents at home.
The mother of Mehmet might need support towards self guided activities of Mehmet	As it is well known that children with Down Syndrome might show difficulties in motivation and hardiness.	e4104: When playing with her son, the mother (internally) counts till 10 before giving her son a prompt.

Issues of participation in **verbal communication (d3)** and **mobility (d4)** should be observed as no valid assessment can be performed within the present assessment process.

Which services the family might need taking into account the material facilitators at home?

- a) **Early Childhood Intervention (in a Center or at home) 1/x week** to initiate self guided learning activities
- b) **Psychological counseling** (1/month for the mother/father) concerning prompting and self-efficiency in child development

# 4) What is this good for?

Increasing **common understanding** between diverse involved sectors within the „team around the family“ by using comparable (description) categories

Increasing common understanding and higher involvement of parents as a member of the team around the family (Pretis/Brandt 2017?): Parents feel respected as they can use a comparable language as professionals (see parent-friendly ICF ([www.icf-school.eu](http://www.icf-school.eu)) in TR, MK, AL, DE and EN.

Focus on **meaningful participation** (and its evaluation) represented by observable **PARTICIPATION GOALS**.

Approx. 40% **time saving** due to avoidance of double assessments (parents report less „intrusion“)

Higher coordination of services by means of common participation goals

Logic algorithm towards services and acknowledgement of environmental facilitators

Focus on **INCLUSION** as the use of ICF highlights the importance of the environment (Inclusion understood as a systems quality to provide learning opportunities FOR ALL CHILDREN). ICF thinking and acting primarily means to think in categories of **NURTURING ENVIRONMENTS** (How can I increase environmental facilitators)

## 5) What does it cost?

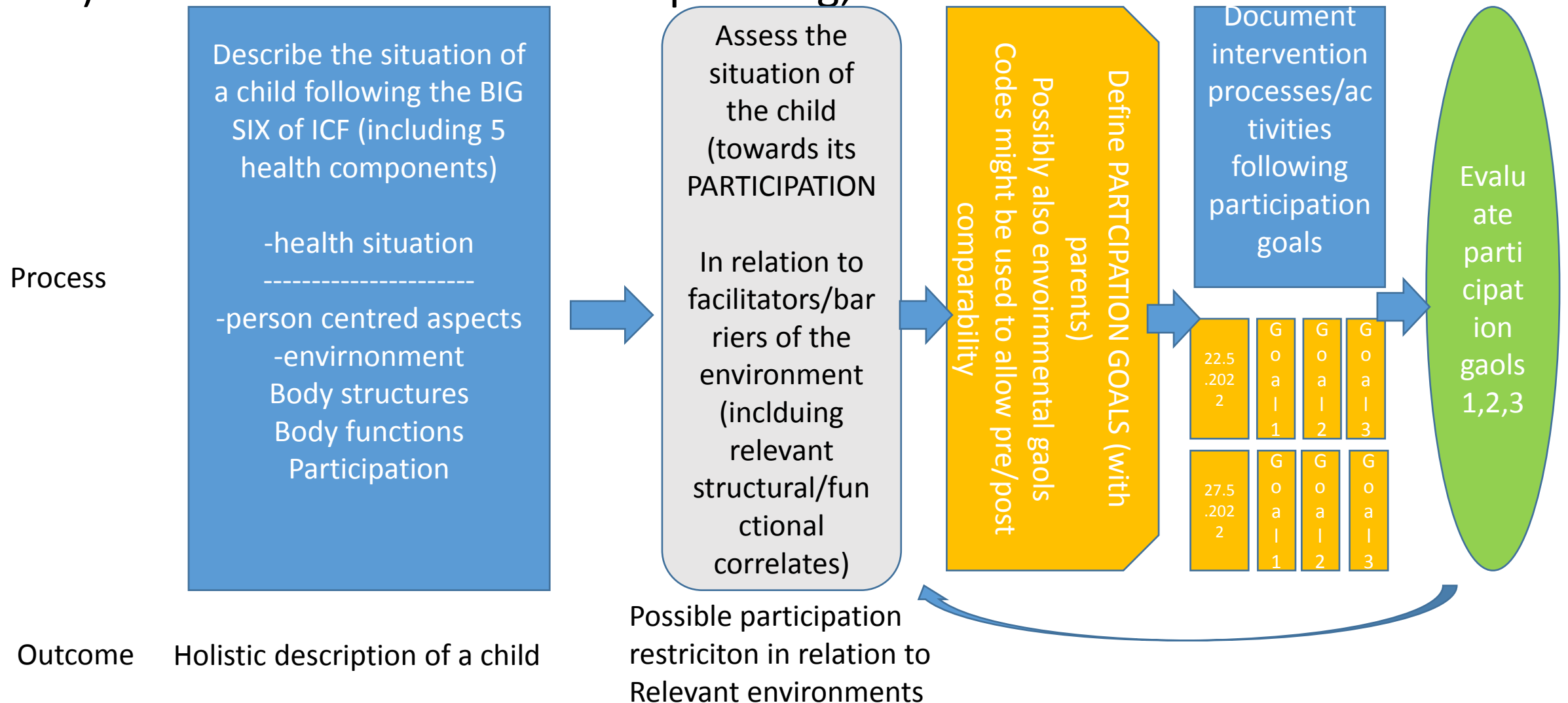
- Top down strategy and willingness of the management or stakeholders to implement ICF in an institution (in line with UN Convention)
- Inclusion of relevant beneficiaries (e.g parents representatives,) administrative bodies and/or referring professionals (MDs...)
- Approx. 3 years project implementation process (including training processes of the team and necessary financial resources)
- Analysis of existing documents (planning, documentation and evaluation tools) and their transferability towards ICF.
- Training of staff towards a general understanding of the philosophy and use of ICF
- Support during the concrete implementation (e.g. concerning participation goals) in terms of supervision or accompanying support)
- Openness, motivation and trust between team members.

## 6) Where ICF is used in EU27 (selected examples)

	Base	
Austria	Diverse (provincial) Laws on Disability	All assessments concerning the needs of adult Persons with Disability have to be ICF-oriented (Steiermark) Assessment of additional educational support (Vorarlberg), in progress in other provinces
Bulgaria	Law on School Education	Assessment of possible restrictions in participation and need for services have to be ICF-based. WHO DAS 2.0 pilot runs.
Croatia	Legally foreseen	Assessment of disability
Cyprus	Legally foreseen	Assessment of disability
Germany	Law on Participation (2016)	All assessments of support needs for persons with Disability have to be ICF-oriented.
Italy	Law on School Education	ICF based description of additional educational support
North Macedonia	Law on School Education and on Disability Assessment	Assessment of possible restrictions in participation and need for services have to be ICF-based
Serbia	UNICEF cooperation	Testing of prevalence of disability based on functional assessment questionnaire 2016
Portugal	Law on (Pre)school Education	Describing the situation and support needs of a child has to be ICF based.
Switzerland	Consensus of Educational Directorates	Assessment of additional educational support in School has to be ICF-based

# 7) Helpful tools

## a) Basic structure of ICF-based planning, documentation and evaluation





## WHO based assessment

Část 1: Funkční schopnost a disabilita			Část 2: Spolupůsobící faktory	
Komponenty	Tělesné funkce (b) Tělesné struktury (s)	Aktivity a participace (d)	Faktory prostředí (e)	Osobní faktory
Domény	Tělesné funkce Tělesné struktury	Oblasti života (úkoly, úkony)	Vnější vlivy na funkční schopnost a disabilitu	Vnitřní vlivy na funkční schopnost a disabilitu
Konstrukt	Změny v tělesných funkcích (fyziologické) Změny v tělesných strukturách (anatomické)	Kapacita (provedení činnosti ve standardním prostředí) Výkon (provedení činnosti v obvyklém prostředí)	Facilitující nebo omezující vliv fyzických, sociálních a postojových faktorů v daném prostředí	Vliv osobnostních vlastností
Pozitivní hledisko	Funkční a strukturální integrita	Aktivity a participace	Facilitátory	Nelze aplikovat
Negativní hledisko	Porucha Disabilita	Snížení aktivity Omezení participace	Bariéry/překážky	Nelze aplikovat

# Helpful tools

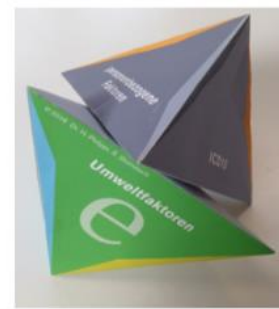
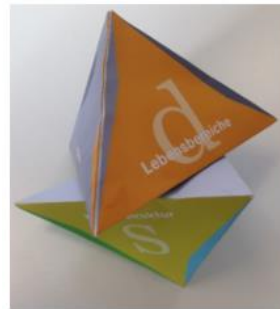
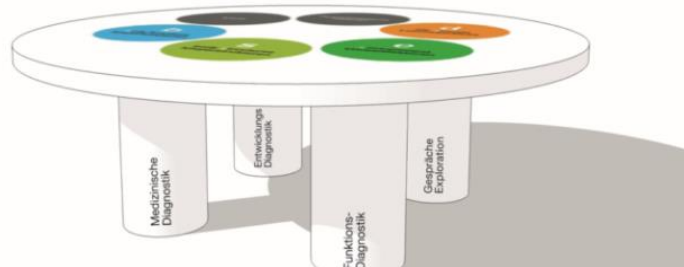
b) Use existing EU training and implementation resources

- [www.icf-school.eu](http://www.icf-school.eu) (family friendly ICF-CY version in TR and electronic tool to create support plans towards additional educational support in school)
- [www.icf-inclusion.net](http://www.icf-inclusion.net) („Participation Goal Incubator: electronic tool to learn about best practice participation goals for diverse diagnosis and settings: available from 10/2022).

# Helpful tools

c) Practical tools to enable exchange with parents on eye level.

ICF als integratives Werkzeug



[qualitaetssicherung-icf-cy-kommunikationsdoppelpyramide.png \(1280×720\) \(dgspj.de\)](https://www.dgspj.de/qualitaetssicherung-icf-cy-kommunikationsdoppelpyramide.png)

## 8)TAKE Home message(s)

In line with the CRPD ICF creates a paradigm shift from a medical (person centered view) of (social) developmental difficulties towards an interactive environmental perspective (disability as an interaction between an environment and the functioning of a person)

ICF provides a common and metalanguage for intersectoral cooperation, including the parents as team-partner. ICF enables parents to communicate on a par with professional (as the same terminology is used)

ICF contributes (by means of its focus on participation) to meaningful goals (from the perspective of the beneficiary and facilitates transparency and evaluation of goals.

# 9) References

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WHO (2005). Die Internationale Klassifikation der Funktionsfähigkeit, Behinderung und Gesundheit. Abrufbar unter [www.dimdi.de](http://www.dimdi.de)

## Websites

[www.icf-inclusion.net](http://www.icf-inclusion.net)

[www.icf-plan.eu](http://www.icf-plan.eu)

[www.icf-implement.net](http://www.icf-implement.net)

[www.naturalisticteaching.com](http://www.naturalisticteaching.com)

