The Hidden Impact of the Functional Independence Measure

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The Hidden Impact of the Functional Independence Measure

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Introduction
An integral piece to Rehabilitation is the Functional Independence Measure (FIM). All staff having a love/hate relationship with FIM scores. How do you make your staff understand the importance of FIM?

Area of Concerns
• We struggled with low Case Mix Index and physicians questioning the number of days patients received
• Our admission and discharge FIM scores were higher than the region and national benchmarks
• Emphasis placed on FIM scores was implemented

Action Plan
Added focus by PPS includes
• Daily review of FIM data entered into flowsheet
• Double check accurate FIM score recorded
• Daily review of nursing and therapy documentation looking for discrepancies in prior recorded FIM scores
• Emails sent to staff if FIM error found
• Staff makes adjustments to the EMR
• Samples of FIM errors that increased patient days and projected reimbursement sent to all staff – eye opener

Analysis/Results

<table>
<thead>
<tr>
<th>Metrics</th>
<th>Previous Data</th>
<th>Current Data</th>
</tr>
</thead>
<tbody>
<tr>
<td># of patients</td>
<td>29</td>
<td>35</td>
</tr>
<tr>
<td>Admission FIM</td>
<td>69.5</td>
<td>64.9</td>
</tr>
<tr>
<td>Admit Motor FIM</td>
<td>43.6</td>
<td>40.8</td>
</tr>
<tr>
<td>Cognition Admit FIM</td>
<td>N/A</td>
<td>N/A</td>
</tr>
<tr>
<td>Motor FIM Change</td>
<td>23.9</td>
<td>22.4</td>
</tr>
<tr>
<td>FIM Change</td>
<td>27.4</td>
<td>27.6</td>
</tr>
<tr>
<td>Discharge FIM</td>
<td>96.9</td>
<td>92.5</td>
</tr>
<tr>
<td>Case Mix Index</td>
<td>1.16</td>
<td>1.28</td>
</tr>
</tbody>
</table>

Case Mix Index

<table>
<thead>
<tr>
<th></th>
<th>Facility</th>
<th>2014</th>
<th>2017</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>1.14</td>
<td>1.55</td>
<td></td>
</tr>
<tr>
<td></td>
<td>1.25</td>
<td>1.29</td>
<td></td>
</tr>
<tr>
<td></td>
<td>1.30</td>
<td>1.34</td>
<td></td>
</tr>
</tbody>
</table>

Conclusions
• We were able to reach our goal of increasing patient days through close monitoring of admission FIM scores
• Our CMI increased as a result of more accurate FIM assessments
• Admission and discharge FIM scores are now closer to our region and national benchmarks

References
Uniform Data System for Medical Rehabilitation
270 Northpointe Parkway, Suite 300
Amherst, New York 14228

Email Follow Up
Brian:
I was reviewing this patients chart, and you saw this patient for the second PT session on Day 2. My concern is that there are no FIM scores in the FIM flow sheet for walk/locomotion. In your note, you have that the patient ambulated 75.65 feet. This would be a score of 2. Earlier in the day, the pt was evaluated by Nicole J and she scored him a 4, as in her note, she has him walking 150 feet. Because her score is the only one in the flow sheet, this was placed on the IRF-PAI in UDS. Looking back and seeing your note, I changed the score to reflect a 2 for walk locomotion. This change alone, gave the pt 2 more days here and gave us about $3,000 more dollars. I know it was at the end of the day, but can I have you now, go into this flow sheet back on 1/16 and place a column with your scores of distance and assist? Please see me if you have any questions. Thanks