



# Implementation, Education and Use of the ICF in Germany

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Praha, 22.10.2019



# outline

- ICF
- Implementation
- Education
- Use
- Merge of ICF and ICF-CY
- Conclusion

# International Classification of functioning, disability and health ICF

# ICF

- Common language
- Focus on functioning of a person
- Person-centred approach
- Professionals as environmental factors

# Disability



# Implementation

# German Participation Law

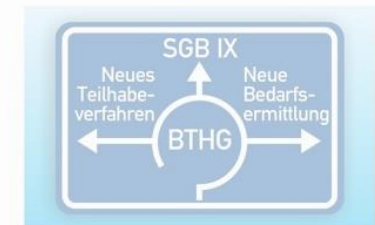
- In Germany, the **Bundesteilhabegesetz** (BTHG; “Participation Law”) was passed in 2017. The BTHG aims to:
  - implement the Convention on the Rights of Persons with Disabilities in Germany
  - strengthen the empowerment of persons with disabilities and
  - improve their participation.

## Bundesteilhabegesetz

### Reformstufe 2:

## Das neue SGB IX

Vergleichende Gegenüberstellung/Synopse  
Gesetzesmaterialien und Erläuterungen zum  
neuen Teilhabe- und Rehabilitationsrecht



# German Participation Law - BTHG

## Bundesteilhabegesetz

### Reformstufe 2:

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- mandatory implementation of an ICF-based needs assessment
- under the supervision of the ministry of work and social affairs
- federal structure
- Several and different needs assessments



16 federal states



# Needs assessment tools

	Federal states	Needs assessment	Level of specification in ICF classification
	Bremen	BedarfsErmittlung Niedersachsen (B.E.Ni.)	ICF chapters (1 <sup>st</sup> level) (rating 0-4)
	Hamburg	Hamburger Gesamtplan	2 <sup>nd</sup> level ICF categories (free text)
	Berlin	Teilhabeinstrument Berlin (TIB)	ICF chapters (1 <sup>st</sup> level) (free text)
	Saarland	<i>Not defined</i>	<i>Not yet available</i>
	Schleswig Holstein	<i>Not defined</i>	<i>Not yet available</i>
	Thuringia	Integrierter Teilhabeplan (ITP)	2 <sup>nd</sup> and 3 <sup>rd</sup> level ICF categories (rating 0-4)
	Saxony	Integrierter Teilhabeplan (ITP)	2 <sup>nd</sup> level ICF categories (rating 0-4)
	Rhineland Palatinate	Individuelle Gesamtplanung Rheinland-Pfalz	<i>Not yet available</i>
	Saxony-Anhalt	ICF Erhebung Sachsen-Anhalt	<i>Not yet available</i>
	Hesse	Integrierter Teilhabeplan (ITP)	2 <sup>nd</sup> and 3 <sup>rd</sup> level ICF categories (rating 0-4)
	Mecklenburg Western Pomerania	Integrierter Teilhabeplan Mecklenburg-Vorpommern (ITP M-V)	ICF chapters (1 <sup>st</sup> level); 2 <sup>nd</sup> level ICF categories (free text)
	Brandenburg	Integrierter Teilhabeplan (ITP) <i>(planned)</i>	<i>Not yet available</i>
	Northrhine-Westphalia	Bedarfsermittlungsinstrument NRW (BEI_NRW)	ICF chapters (1 <sup>st</sup> level) (free text)
	Baden-Württemberg	Bedarfsermittlungsinstrument Baden-Württemberg (BEI_BaWü)	ICF chapters (1 <sup>st</sup> level); 2 <sup>nd</sup> level ICF categories (rating 1-4)
	Bavaria	Bedarfsermittlungsinstrument Bayern (BEI-Bay) <i>(planned)</i>	<i>Not yet available</i>
	Lower Saxony	BedarfsErmittlung Niedersachsen (B.E.Ni.)	ICF chapters (1 <sup>st</sup> level) (rating 0-4)



# Needs assessment tools

Level of specification	Number of states N=16	States
1st level	6	Bremen, Berlin, Mecklenburg-Western Pomerania, Northrhine-Westphalia, Baden-Württemberg, Lower Saxony
2nd level	7	Hamburg, Thuringia, Saxony, Hessen, Mecklenburg-Western Pomerania, Baden-Württemberg
Free text	4	Hamburg, Berlin, Mecklenburg-Western Pomerania, Northrhine-Westphalia
Rating	6	Bremen, Thuringia, Saxony, Hessen, Baden-Württemberg, Lower Saxony
3rd level	2	Thuringia, Hessen





# Conceptualization and development of ICF-based needs assessments in Germany following the German "Participation Law"

5-11 October 2019

Banff, Canada

Poster Number  
WHO/CTS to insertLiane Simon<sup>1,2</sup>, Michaela Kirschnack<sup>2,3,4</sup>, Sven Kottysch<sup>1,2</sup>, Sandra Kus<sup>2,3,4</sup>,  
Michaela Coenen<sup>2,3,4</sup>

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<sup>2</sup> ICF Research Branch, a cooperation partner within the WHO Collaborating Centre for the Family of International Classifications in Germany  
<sup>3</sup> Institute for Medical Informatics, Biometry and Epidemiology – IBE, Chair of Public Health and Health Services Research, LMU Munich, Germany  
<sup>4</sup> Postgraduate School of Public Health, Munich, Germany

**Abstract** In 2017, the German Bundesteilhabegesetz ("Participation Law") was passed. The Bundesteilhabegesetz aims to strengthen and improve participation and empowerment of persons with disabilities and to implement the Convention on the Rights of Persons with Disabilities in Germany. Consequently, efforts to reorganize the system for (re)habilitation and for integration of persons with disabilities have begun. The law also requires the implementation of a standardized needs assessment based on the International Classification of Functioning, Disability and Health (ICF). Due to the federal structure of Germany, individual federal states have developed their assessment procedures. For small children there is a plan to replace the existing assessment strategies by restructuring the forms that have been used to date. We report on the conceptualization of standardized needs assessments for (small) children, adolescents and adults in Germany.

## Introduction

In Germany, the Bundesteilhabegesetz (BTHG; "Participation Law") was passed in 2017. The BTHG aims to:

- implement the Convention on the Rights of Persons with Disabilities in Germany
- strengthen the empowerment of persons with disabilities and
- improve their participation.

The BTHG prescribes the mandatory implementation of an ICF-based needs assessment for persons with disabilities. Because of Germany's federal structure, all 16 federal states are called upon to develop respective assessment tools for children, adolescents and adults.

For small children (0-6 years) there is a plan to develop a uniform instrument that could be applied in all German states.

The aim of this poster is to report on the conceptualizations of standardized needs assessments for small children, adolescents and adults in Germany.

## Results

Various instruments have been developed under the leadership of the provincial governments. Different federal states developed similar or common instruments (see Table 1 and Figure 1; federal states marked with identical colors share similar instruments). The degree in which the ICF is implemented in the instruments varies greatly.

For small children (0-6 years) there is a plan to develop a uniform instrument that could be applied in all German states.

## Results continued



Federal States	Needs assessment	Level of specification in ICF classification
Bremen	Bedarfsermittlung Niedersachsen (B.E.N.)	ICF chapters (1st level) (rating 0-4)
Hamburg	Hamburger Gesamtplan	2 <sup>nd</sup> level ICF categories (free text)
Berlin	Teilhabemanagement Berlin (TMB)	ICF chapters (1 <sup>st</sup> level) (free text)
Saarland	Not defined	Not yet available
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Thuringia	Integrierter Teilhabeplan (ITP)	2 <sup>nd</sup> and 3 <sup>rd</sup> level ICF categories (rating 0-4)
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Rhineland-Palatinate	Individuelle Gesamtplanung Rheinland-Pfalz	Not yet available
Saxony-Anhalt	ICF-Erhebung Sachsen-Anhalt	Not yet available
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Mecklenburg-Vorpommern	Integrierter Teilhabeplan Mecklenburg-Vorpommern (ITP-MV)	ICF chapters (1 <sup>st</sup> level), 2 <sup>nd</sup> level ICF categories (free text)
Brandenburg	Integrierter Teilhabeplan (ITP) (Gutachten)	Not yet available
Northrhine-Westphalia	Bedarfsermittlungsinstrument NRW (B.E.N.-NRW)	ICF chapters (1st level) (free text)
Baden-Württemberg	Bedarfsermittlungsinstrument Baden-Württemberg (B.E.I.-BW)	ICF chapters (1 <sup>st</sup> level), 2 <sup>nd</sup> level ICF categories (rating 0-4)
Bavaria	Bedarfsermittlungsinstrument Bayern (B.E.I.-B) (Gutachten)	Not yet available
Lower Saxony	Bedarfsermittlung Niedersachsen (B.E.N.)	ICF chapters (1st level) (rating 0-4)

Table 1: Needs assessments tools in the 16 federal states and their levels of specifications regarding the ICF.  
Federal states marked in identical colours share similar tools (see also Figure 1).

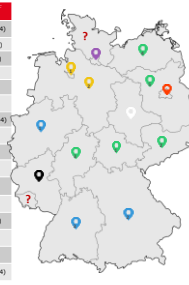


Figure 1: Federal states in Germany and needs assessments tools.

## Conclusions

The existing needs assessments tools were mainly developed along the conceptualization of the ICF. There are different tools that have been implemented in the 16 German federal states. Needs assessments tools differ regarding their level of specification. In early childhood it is noticeable that the special features that led to an independent ICF-CY version do not yet fit together easily.

# Education of the ICF

## ICF workshops

- 4 annual workshops at LMU Munich ICF
- 4 annual workshops at MSH Hamburg ICF-CY
- Several local workshops
- 2 annual train the trainer workshops ICF
- 2 annual train the trainer workshops ICF-CY

# ICF workshops

- ICF: Curriculum ICF research branch:  
<https://www.icf-research-branch.org>
- ICF-CY: Curriculum VIFF:  
<https://www.viff-fruehfoerderung.de/assets/Aktuelle-Meldungen/VIFF-Zertifizierung-von-Fortbildungen-zur-ICF-Nutzung-in-der-Fruehfoerderung.pdf>

# Annual National ICF User Conferences

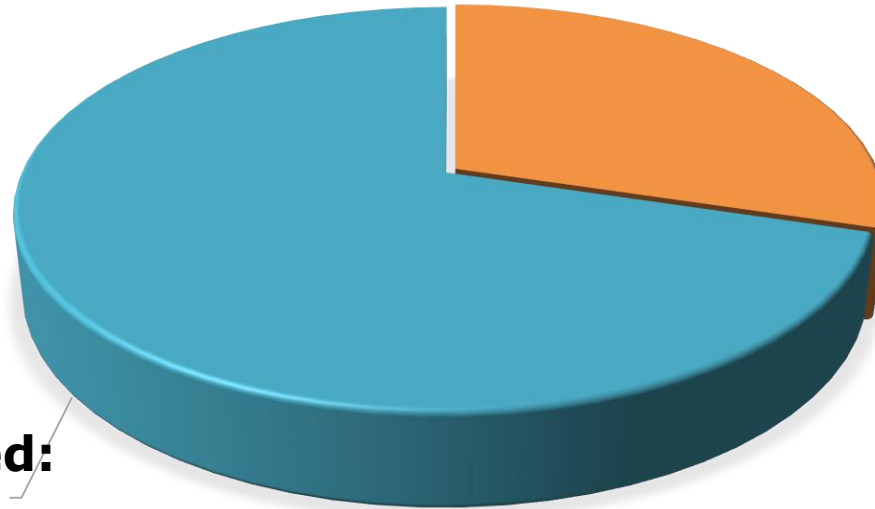


# ICF in Academic Degree Courses in Germany 2018

**n=430**

**mentioned 29,7%**

**not mentioned:  
70,3%**







ICF in academic degree programs in Germany –  
To what extent is the ICF being taught to future  
social and healthcare professionals?

5-11 October 2019

Banff, Canada

Poster Number  
WHO/CTS to insertAndreas Seidel<sup>1</sup>, Thorsten Schaumborg<sup>1</sup>, Sven Kottysch<sup>2</sup>, Liane Simon<sup>2,3</sup>

<sup>1</sup> University of Applied Sciences Nordhausen  
<sup>2</sup> Medical School Hamburg, Hamburg, Germany  
<sup>3</sup> ICF Research Branch, a cooperation partner within the WHO Collaborating Centre for the Family of International Classifications in Germany

### Abstract

In Germany, the Bundesteilhabegesetz (BTHG; "Participation Law") passed in 2017. Thus the use of the ICF is strongly increasing in rehabilitation and has become a major subject in the training and academic education of social and health care professionals. ICF Mapping is a project to systematically review it's usage since 2016. A study has been initiated to identify whether and how the ICF and its terminology is mentioned in documents provided to students in the module manuals of German academic degree programs for social and healthcare professions. This poster will introduce the concept and methods of this study.

### Introduction

The overall aim of the ICF (International Classification of Functioning, Disability and Health) is to provide a unified and standard language and framework for the description of health and health-related states. In Germany the Federal Ministry of Labour and Social Affairs passed a law (German Participation Law) in 2016 that gives people with disabilities equal rights. Therefore, the use of the ICF is strongly growing and a major subject in several trainings and academic education of social and healthcare professions. The aim of this study is to identify whether and how the ICF and its special terminology are mentioned in the module manuals of German academic degree programs in social and healthcare sciences.

### Methods

Collection of 430 available module manuals of the following courses (bachelor and master): Social Work, Social Pedagogy, Therapeutic Pedagogy, Social Management, Early Intervention, Therapeutic Education, Psychology, Occupational Therapy, Speech Therapy, Physiotherapy. For Medicine, module manuals do not exist, there is an object-catalog given by the state to all universities.

The data analysis (document analysis) towards "ICF", "bio-psycho-social-model" and "participation" took place in 2018.

### Results

430 of 549 national module manuals in winter term 2017/2018 were available (78,3%). The oldest manual was written in 2010. Chart 2 shows a heterogeneous distribution of results. "ICF" was mentioned in 19,7% of the module manuals, the term "biopsychosocial model" was found in 23% of the documents. "ICF" or "biopsychosocial model" was mentioned in 34,1%, participation in 47,9% of all reviewed module manuals.

### Results continued

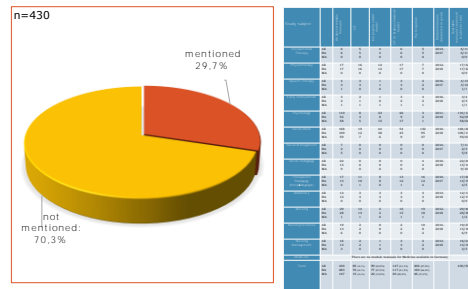


Chart 1: ICF or Bio-Psycho-Social Model mentioned in module books of Social and Health Care Sciences academic degree programs in Germany - Winter Term 2017/2018

BA Bachelor, MA Master

Chart 2: descriptive statistic allocated to Social and Health Care academic degree programs

### Conclusions

The ICF was translated into German in 2005, the UN convention on the rights of people with disabilities was signed in 2009 and the Bundesteilhabegesetz passed in 2017, most of the module manuals of German study courses in health and social sciences do not mention the ICF / the biopsychosocial model yet.

As ICF Mapping found barriers concerning the attitude of employees towards the Implementation of the ICF (Simon et al. 2017), there is a strong need to implement the philosophy of the ICF as standard in relevant academic degree courses to let students become agents of change. But there seem to exist similar barriers concerning the people responsible for module manuals.

The primary objective of further research is to explore possible reasons and attitudinal barriers that lead to the given results.

### Acknowledgements

In kind support of Hochschule Nordhausen, University of Applied Sciences ICF Research Institute at MSH Medical School Hamburg, University of Applied Science and Medical University

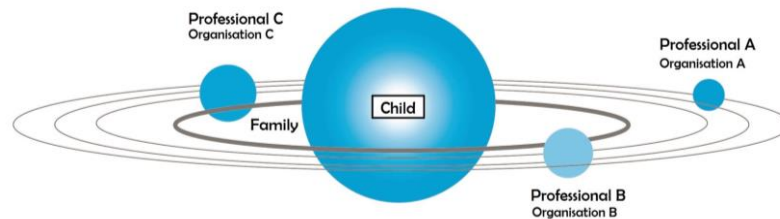
# Interprofessional Collaboration



# Use of the ICF

# ICF in Institutions - Challenges to deal with

1. Participation
2. Person-centered approach .
3. Professionals as environmental factors.
4. Interprofessional collaboration



# ICF in Institutions - Challenges to deal with

## 1. Participation

# Ethical guideline

*the person “...whose level of functioning is being classified (or the person’s advocate) should have the opportunity to participate, and in particular to challenge or affirm the appropriateness of the category being used and the assessment assigned”*

(<http://www.who.int/classifications/drafticfpracticalmanual.pdf>, p. 10).

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# ICF in Institutions - Challenges to deal with

1. Participation

**2. Person-centered approach**



# Ethical guideline

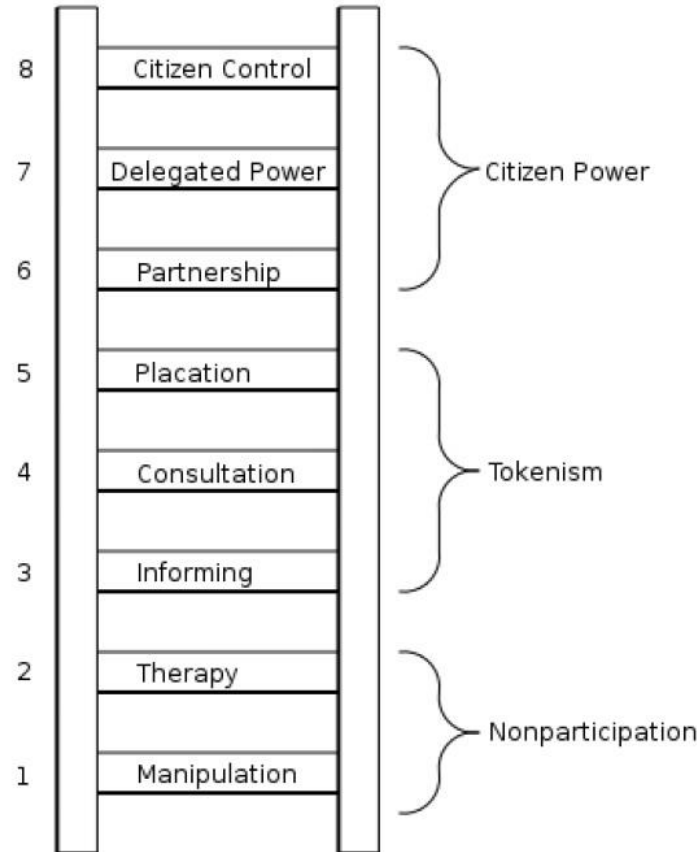
the person “...whose level of functioning is being classified (or the person’s advocate) should have the **opportunity to participate, and in particular to challenge or affirm** the appropriateness of the category being used and the assessment assigned”

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**Participation -  
opportunity to challenge or affirm  
leads to questions**

**A person centered approach**

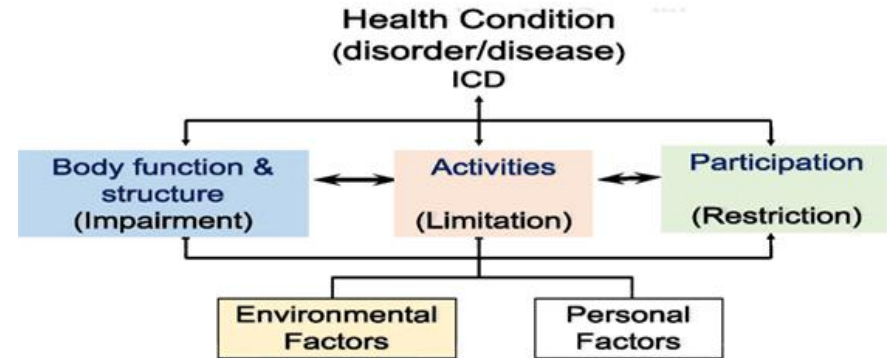
# Participation (Arnstein 1969)



# Questions about perspective

- Whose goals?
- Whose priorities?
- Whose perspective?

## ICF Conceptual Framework



# Challenges

1. Talking about participation and not just bodyfunctions and structures of a person means: **Talking about functioning**
  - ICF : umbrella term encompassing body function, body structure, activities and participation
  - Functioning: dynamic interaction between health condition and contextual factors (environmental and personal factors)

# Questions about how to ensure participation in goal setting

- What would you describe as your main problem?
- How does this issue become noticeable in, and affect, your daily life?
- What do you expect from my profession and from me as a professional?
- How will your life be different if we resolve the problem, or at least address it effectively?
- What in your life should remain as it is now?

How can we deal with the answers?

# Questions about how to deal with the answers

- If we have a different opinion?
- If we can not or do not want to do, what they expect us to do?

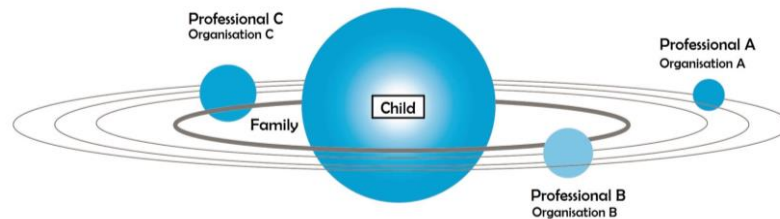
## hidden goals

1. Might appear because we support patients during their coping process.
  - “This person needs to learn that this won’t be possible”.
2. We may be thinking of possible changes concerning the lifestyle or the environment of a person
  - “It would be better for XX to have more assistance by their father”, or “It is too untidy at X’s home or they watch too much TV.”



# ICF in Institutions - Challenges to deal with

1. Participation
2. Person-centered approach .
3. Professionals as environmental factors.
4. Interprofessional collaboration



# Ethical guideline

the person “...whose level of functioning is being classified (or the person’s advocate) should have the **opportunity to participate, and in particular to challenge or affirm** the appropriateness of the category being used and the assessment assigned”

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## Questions about how to deal with hidden goals

- is an open issue
- is a question of attitude of health professionals
- Who knows „better“?
- What happens, if a person challenges the appropriateness of our approach?
- When do we need to consider to be part of the environment of patients and could be experienced as a barrier ?

# Merge of ICF and ICF-CY

# German Participation Law- ICF-CY

1. Difficulties in **describing participation especially in early infancy.**
  - We receive notifications of rejection of treatment because of the “fact that children of this age do not participate”.
2. The **identification** of the environmental factors, influencing the child’s functioning has to be **made by parents and health professionals though they are environmental factors themselves.** This requires a high degree of reflection and communication skills.

# German Participation Law- ICF-CY

1. The merge of the ICF-CY codes into ICF is a very difficult and slow process.
2. Nearly every assessment tool is based on the ICF-CY, that is no more updated since 2011.

# German Participation Law- ICF-CY

1. Early childhood intervention in Germany is organized in interdisciplinary organizations. The Ministry of Labour and Social Affairs advises that the **usual drawing up of an "interdisciplinary intervention and treatment plan"** should be maintained instead of implementing one of the mentioned assessment tools. Therefore, there are several drafts, including the ICF-CY into these plans. The German Association of Interdisciplinary Early Childhood Intervention (VIEFF e.V.) is developing a draft, that could be applied nationwide.

# Conclusion



# Conclusion

- The existing needs assessment tools were mainly developed along the conceptualization of the ICF.
- There are different tools that have been implemented in the 16 German federal states.
- Needs assessment tools differ regarding their level of specification.
- There are no specific criteria for the selection of the codes
- Field testing is planned but without a common strategy or scientific background so far.
- In early childhood it is noticeable that the special features that led to an independent ICF-CY version do not yet fit together easily.

## ICF in Germany

- Has some childhood diseases
- Tries to strenghten the empowerment of people with disabilities
- Is a start
- Needs further consideration



## Thank you

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