

Differences in Functional Scoring in Section GG Versus Traditional FIM Scoring in Inpatient Rehabilitation



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Introduction & Objectives

Post-acute care is made up of a variety of health care entities. These entities routinely cooperate with each other for the purposes of coordinating care as a patient transitions from one to another. Functional evaluation is utilized to gauge a patient and help determine where these patients should be sent to receive care in the post-acute care setting. Previously, there was no standard of functional evaluation across the broader post-acute care settings. Within Inpatient Rehabilitation Facilities, the Functional Independence Measure (FIM) was utilized while the other entities used different functional measures. The passage of the Improving Post-Acute Care Transformation Act mandated a switch to one function assessment measure across all post-acute care entities, Section GG (GG).

This study addresses this switch in functional scoring by analyzing the transition a 30-bed inpatient rehabilitation facility has made from FIM to GG scoring. This study is one of the first attempts to analyze this transition and to compare the facility's averaged performance from one functional scoring measure to another.

Design

- FIM was compared to GG in terms of scoring items.
- This is a retrospective comparison of 2017 FIM against 2018-2019 GG admission scores and percentages of maximal function.
- The rehabilitation facility was further compared to national average discharge GG scoring.

Score	Admission FIM	Admission GG
0	Activity Does Not Occur	X
1	X	Not Assessed
1	X	Patient Refused
1	X	Not Applicable
1	X	Not Attempted-Environmental Limitations
1	X	Not Attempted-Medical/Safety
1	Total Assistance (<25%)	Dependent (0%)
2	Max Assistance (25-49%)	Substantial/Max Assistance (1-49%)
3	Mod Assistance (50-74%)	Partial/Mod Assistance (50-99%)
4	Min Assistance (75-99%)	Supervision or Touching Assistance
5	Supervision	Setup or Clean-up Assistance
6	Mod Independence	Independent
7	Complete Independence	X

Fig. 1. Compares the scoring system of FIM versus GG. X designates: Absence of equivalent scoring item.

Results

- GG expands upon several of the broad self-care and mobility items present in the FIM and provides greater delineation when functional measures cannot be assessed.
- GG does not factor in usage of an assistive device in its scoring unlike FIM.
- Scoring is broken down into quartile of percentages for FIM versus GG that utilizes 50th percentiles.
- Comparing 2017 FIM against 2018-2019 GG admission scores and percentages of maximal function showed a general trend of GG maximal function being elevated. The exception to this was found with higher distance, wheeling, and stair climbing.
- When comparing discharge scoring from facility to national averages, the two items that differed extensively were the higher distance wheeling and stair climbing.

Facility Admission FIM vs GG

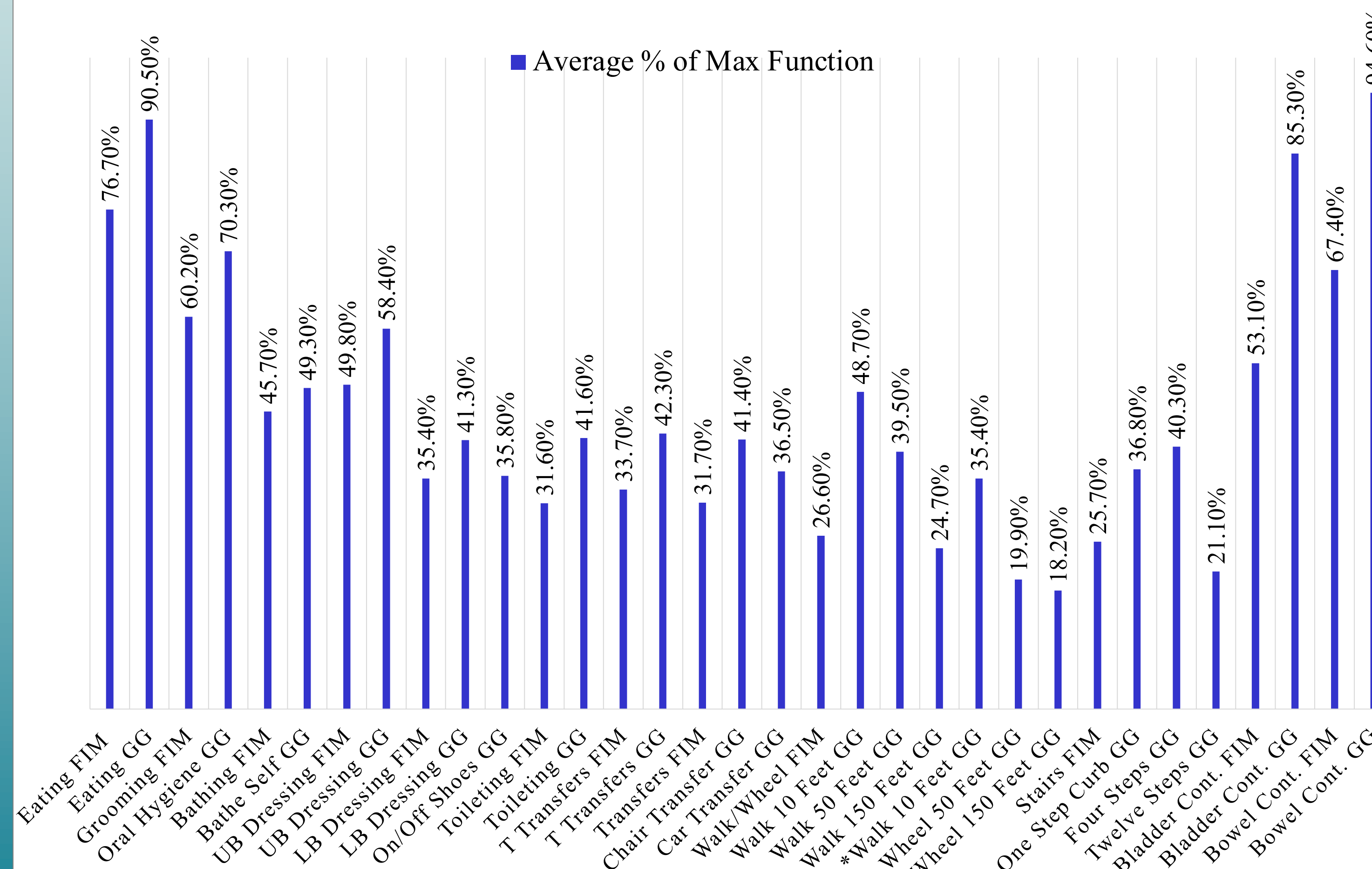


Fig. 2. Compares admission FIM versus GG average % of maximum function for most related items. * designates: On Uneven Surfaces, UB = Upper Body, LB = Lower Body, T = Toilet, Cont. = Continence

Section GG Discharge Scoring Reports With Item Level Averages

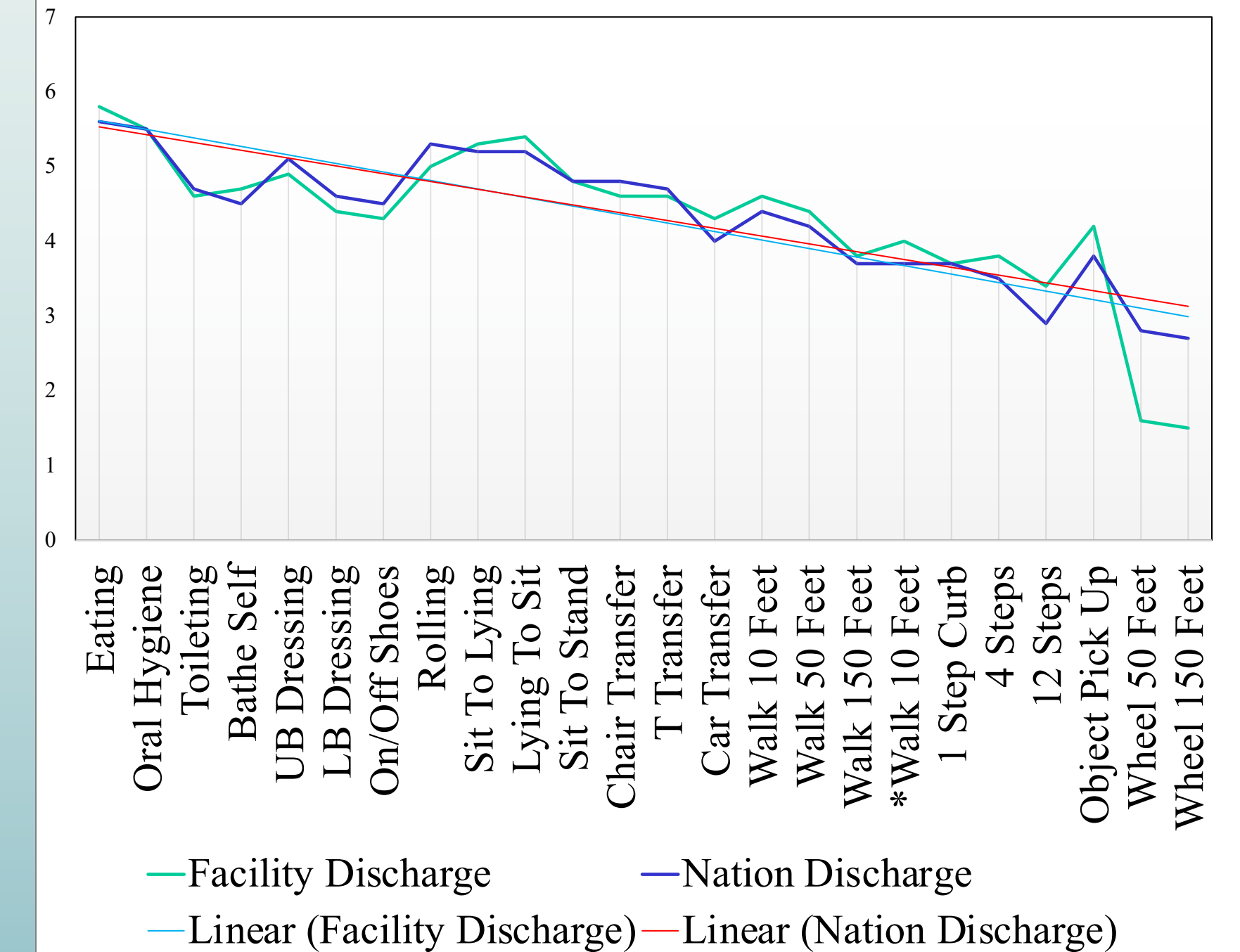


Fig. 3. Compares facility versus national average GG scores in functional items and additional trendline of scoring. * designates: On Uneven Surfaces, UB = Upper Body, LB = Lower Body, T = Toilet

Conclusion

- GG's expanded self-care and mobility functional items served to better characterize the functional status of a patient across the post-acute care settings.
- GG's expansion upon when functional assessment cannot occur may help to eventually understand the limitations in obtaining these functional assessments and how this may differ from various post-acute care settings.
- FIM and GG admission were compared, and it demonstrates that GG overestimates patient functional status with some exceptions.
- From our comparison of facility versus national discharge, it appears the facility was able to transition to GG scoring without an extensive disparity between national averages.
- More studies are needed to analyze these trends for significance, and to investigate other entities in the post acute care setting.