

CIF et Ergothérapie ICF and Occupational therapy



BIBLIOGRAPHIE THEMATIQUE

Octobre 2014

2012

BEN MORTENSON, (W), AUGER (Claudine), MILLER (William C.)

Commentary on "ICF from an occupational therapy perspective in adult care: An integrative literature review"

Scandinavian journal of occupational therapy, 2012, 19, 5, 464-465

This letter to the editor is in response to the article by Pettersson, Pettersson and Frisk entitled, "ICF from an occupational therapy perspective in adult care: an integrative literature review". Given the breadth of this topic, the authors have done an admirable job in their survey of the topic. One area we felt deserved additional attention was the inadequate way the ICF classification system codes mobility assistive technology use. We also offer a point of clarification about the Wheelchair Outcome Measure, which was identified incorrectly as the only wheelchair specific measure that could measure activity and participation

2012

PETTERSSON (Ingvor), PETTERSSON (Viktor), FRISK (Margot)

ICF from an occupational therapy perspective in adult care: an integrative literature review

Scandinavian journal of occupational therapy, 2012, 19, 3, 260-273

Since its launch there has been increasing interest in the International Classification of Functioning, Disability and Health (ICF) within occupational therapy (OT). The aim of this study was to perform an integrative literature review, in order to present an overview of knowledge, where the ICF constitutes a

significant part in relation to OT. A systematic literature search, covering the period 2001-2008, was performed in the databases MEDLINE, AMED, and CINAHL. A total of 112 articles were included and the majority had exploratory and descriptive designs. The results showed that ICF was valuable for research, clinical practice, and education. ICF was used to link existing instruments and to construct new outcome measures. Occupational therapists have been members of expert groups involved in the development of Core Sets for certain health conditions. Several positive aspects were described, e. g. an effective medium for communication at different levels. Many limitations were mentioned, such as unclear concepts and lack of subjective experiences. Suggestions for improvements were described. The conclusion was that the ICF has been used for a broad spectrum of purposes. The results indicated that further research is needed concerning application of the ICF in clinical practice and education.

2012

KJELLBERG (Anette), BOLIC (Vedrana), HAGLUND, (Lena)

Utilization of an ICF-based assessment from occupational therapists' perspectives
Scandinavian journal of occupational therapy, 2012, 19, 3, 274-281

The International Classification of Functioning, Disability and Health (ICF) is intended to provide a framework for practitioners. A client-centred ICF-based assessment (ICF-A) was developed to be used by occupational therapists in problem identification. The aim was to evaluate the ICF-based assessment (ICF-A) focusing on the examination of its utility on the basis of occupational therapists' perspectives regarding clinical relevance and potential for implementation. Eleven occupational therapists, most of whom worked in hospitals, performed in total 99 ICF-A based assessments and completed three self-reported questionnaires related to the utility of the ICF-A, resulting in a total of 121 questionnaires. Data were analysed using descriptive statistics and directed content analysis. The results from this initial testing of ICF-A showed that its clinical relevance was considered low since ICF-A included too many categories. In addition, the time needed to perform the assessments decreased during the 10 assessment occasions. Furthermore, concerning its implementation potential, the client-centred approach in the ICF-A was rated as weak. The target group did not benefit from using ICF-A in a hospital context. Hence, an investigation of its utility among occupational therapists in community and primary care will be the next step in the development of the ICF-A.

2012

CRAMM (Heidi), AIKEN (Alice B.), STEWART (Debra)

Perspectives on the International Classification of Functioning, Disability, and Health: Child and Youth Version (ICF-CY) and Occupational Therapy Practice
Physical & occupational therapy in pediatrics, 2012, 32, 4, 388-403

Classifying disability for children and youth has typically meant describing a diagnosis or developmental lag. The publication of the International Classification of Functioning, Disability and Health: Child & Youth version (ICF-CY) marks a global paradigm shift in the conceptualization and classification of childhood disability. Knowledge and awareness of the ICF-CY has been slow to diffuse within occupational therapy. Purpose. The purpose of this paper is to foster the integration of the ICF-CY into occupational therapy practice with children and youth. Key issues. Research describes positive trends in using the ICF-CY for cross-disciplinary communication; further clarity and development is warranted around activity and participation categories and functional profiles. Implications. Occupational therapy can contribute to the evolution of the ICF-CY, but must clarify its complementary perspective and knowledge base. If the ICF-CY can be further integrated into occupational therapy systems, it holds promise for shifting practice patterns and creating professional opportunities.

2007

BELFY (J.)/JACQUIN (O.)/GOLDET (R.)/BODIN (Jean-François)/NEGRE (Elisabeth)/DANIGO (Thierry)/ARNOUX (Hervé)/MONNIER (Sidonie)

Regards sur les aides techniques

Ergothérapies, 2007, 25, 5-36, tabl., ill., biblio.

Le premier article de ce dossier permet de découvrir la démarche d'évaluation suivie par un service de médecine physique et de réadaptation lors des essais de fauteuils roulants électriques en vue de l'acquisition et de la prise en charge de ce matériel par la sécurité sociale. L'article suivant propose un parallèle entre les aides techniques et leur définition et l'évolution de la profession de l'ergothérapeute. Il fait le point sur la place des aides techniques dans les modèles du handicap (CIH, CIF et PPH). La fiche technique présente l'exemple de réalisation d'aides techniques n'existant pas sur le marché. Les deux derniers articles présentent le rôle de l'ergothérapeute au sein d'un CICAT situé dans une MDPH, ainsi qu'au sein de ESCAVIE.

2006

BOTOKRO (Rozenn)

C.I.F

Ergothérapies, 2006, 22, 33 (1 p.)

Dans cet article, l'auteur poursuit et termine la présentation des synthèses d'interventions qui ont eu lieu lors du congrès européen organisé en septembre 2004 par le COTEC (Council of occupational therapists for the European countries). Il s'agit ici de la session 77, intitulé "des outils pour le développement de la profession : la classification ICF de l'OMS". Dans cette synthèse, l'auteur rend compte des études suédoises et anglaises d'ergothérapeutes dans lesquelles la CIF est utilisée. Suédois et Anglais sont d'accord pour dire que la CIF est un support de communication entre professionnels. Elle est aussi utilisée pour les études de cas et apparaît comme un outil de travail complémentaire aux outils spécifiques utilisés en ergothérapie. Elle s'inscrit pleinement dans les préoccupations des ergothérapeutes.

2003

BODIN (Jean-François)

La main dans le chapeau

Ergothérapies, 2003, 11, 5-10

La révision de la C.I.H. (Classification Internationale du Handicap) amène de nouvelles réflexions pour évoquer « l'ergothérapie de la main ». Les chercheurs de l'O.M.S. (Organisation Mondiale de la Santé) discutent de la situation de handicap en dehors d'un découpage anatomique du corps. Ils décrivent deux approches (biomédicale et sociale) qui collaborent. L'activité placée au centre du schéma de la CIF (Classification Internationale du Fonctionnement) permet d'évoquer l'ergothérapie en terme de lien médico-social. L'approche épistémologique d'une science fondatrice de la pratique des ergothérapeutes apporte des arguments pour mieux définir notre agir professionnel, à la charnière du sanitaire et du social. Des perspectives pratiques en découlent, entre autre pour aborder les aides techniques.

1996

HEERKENS (Y.F.), CONSEIL DE L'EUROPE

Utilisation et utilité de la CIH dans les professions paramédicales (soins infirmiers, physiothérapie, orthophonie, ergothérapie, podologie et orthoptie). Strasbourg : Conseil de l'Europe, 1996, 98 p., tabl., annexes, biblio. (7 p.)

Le rapport contient une brève présentation de la CIH, une analyse de la documentation écrite concernant l'utilisation de la CIH dans les professions paramédicales, et une synthèse préliminaire des réponses au questionnaire élaboré à ce sujet. D'après les réponses au questionnaire, la CIH est, dans la majorité des pays interrogés, relativement peu connue des professions paramédicales concernées. Toutefois, l'analyse de la documentation écrite disponible montre que ce système de classification gagne progressivement du terrain au sein de ces professions.

1996

GAUTHIER (J)

Complémentarité du modèle de rendement occupationnel en ergothérapie et de la proposition québécoise de la CIDIH
Revue québécoise d'ergothérapie, 1996, 5, 2, 70-74

1995

MARTINI (R), POLATAJKO (H.J), WILCOX (A)

ICIDH-PR: a potential model for occupational therapy

Occupational Therapy International, 1995, 2, 1-21