

ClinFIT Task Force

Members:

Gerold Stucki
Francesca Gimigliano
Jianan Li
John Melvin

Description:

The ClinFIT Task Force was established in 2018 with the goal to develop a universal ICF –based clinical tool for the documentation of functioning, namely ClinFIT. ClinFIT stands for Clinical Functioning Information Tool.

Currently, four ISPRM members are part of the Task Force: Gerold Stucki, Francesca Gimigliano, Jianan Li and John Melvin. However, the Task Force is expected to expand in the coming years.

The ClinFIT Task Force responsibilities are assigned to five working groups: Chair, Development Project Group, Implementation Project Group, Senior Advisory Group and Methods Group. Each group is responsible for specific tasks.

- The Chair and Co-chair are in charge of the overall management of the Task Force, including organizational and financial aspects, such as ClinFIT copyright and legal issues. They liaise with the Development Project and the Implementation Project groups, coordinate ClinFIT activities during ISPRM’s annual congresses as well as manage ClinFIT-related publications in the Journal of the International Society of Physical and rehabilitation Medicine (JISPRM).
- The Development Project Group conceptualizes and conducts developments projects following ClinFIT guidelines.
- The Implementation Project Group develops and conducts implementation projects following ClinFIT guidelines.
- Members of the Senior Advisory Group provides advice and input to the Development and the Implementation Project groups.
- The Methods Group provides the methodological expertise to respond to inquiries, both qualitative and quantitative in nature.

Other ISPRM members may be involved in the elaboration and execution of the ClinFIT work plan and guidelines and in the education and training of clinician scientists for new projects.

ClinFIT

ClinFIT is a non-proprietary ICF-based clinical functioning information tool. ClinFIT is being developed and managed under the auspices of the International Society of Physical and Rehabilitation Medicine (ISPRM), who also possesses the copyrighted for the label of “ClinFIT” (1).

ClinFIT can be tailored to specific settings and purposes by employing the following building blocks: 1) ICF Sets, 2) operationalizations of ICF categories, and 3) reporting and scoring systems.

ClinFIT enables the selection of specific ICF generic sets or relevant ICF Core Sets for the assessment of functioning depending on the its application in a specific setting or purpose.

It comprises of the operationalization of the chosen ICF categories, i.e. the descriptions and specifications of how categories are rated. An operationalization could include simple, intuitive descriptions for use by health professionals and questionnaire items for patient self-report of functioning. In ClinFIT the following rating options are possible:

- 0-10 (with 11 response items between two anchors “no problem” and “extreme problem”)
- 0-4 (based on the ICF Qualifier scale)
- 0-4 scale (also based on ICF Qualifier scale with some guidance for rating)

A functioning profile can be created using the ratings.

Table 1: ISPRM's ClinFIT Task Force: Organization and Responsibilities

Groups	Lead	Members	Responsibility	Comment
Co-chairs	Gerold Stucki Francesca Gimigliano	Member of the ISPRM President's Cabinet	Organizational aspects <ul style="list-style-type: none"> - Finances and human resources - Copyright and legal matters - Cooperation agreements with development and implementation project partners - Coordination of ClinFit activities during ISPRM's annual congresses - Coordination of publications with <i>JISPRM</i> 	Co-chairs are nominated by ISPRM's President and approved by the ISPRM President's Cabinet for a period of 4 years * While cooperating on all matters the co-chairs divide up the primary responsibilities. They jointly provide an annual report to the ISPRM President's Cabinet
		ISPRM member	Scientific aspects <ul style="list-style-type: none"> - Development and implementation of the ClinFIT work plan - Development of ClinFIT guidelines - Education and training of clinician scientists for new projects 	
Development Project Group		Leaders of development projects approved by the co-chairs	Conceptualization and conduct of development projects following ClinFIT guidelines	
Implementation Project Group		Leaders of implementation projects approved by the co-chairs	Conceptualization and conduct of implementation projects following ClinFIT guidelines	
Senior Advisory Group	Jianan Li John Melvin	Former leaders of successful development and implementation projects	Senior advisors can be assigned to new development or implementation projects by the co-chairs in agreement with project leaders	Upon successful completion of a development or implementation project, the co-chairs can nominate project leaders to be appointed as Senior Advisors by the ISPRM President's Cabinet

Methods Group		Methods experts with specific knowledge in relevant qualitative and quantitative methods	Methods experts can be assigned as advisors to new development or implementation projects by the co-chairs in agreement with project leaders	Methods experts are nominated for 4 years by the co-chairs and appointed by the ISPRM President's Cabinet *
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Reference

1. Frontera W, Gimigliano F, Melvin J, Li J, Li L, Lains J, et al. ClinFIT: ISPRM's universal functioning information tool based on WHO's ICF. J Int Soc Phys Rehabil Med; 2019. [Epub ahead of print]