

with multiple sclerosis.

#### Further reading

J Obstet Gynecol Neonatal Nurs. 2004;33:729–38.

Parents plus: Guide ressource de conseils et d'aides techniques destinés aux parents ayant une incapacité physique, Canada : Bibliothèque nationale du Québec, 2009.

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CO47-004-e

### Cognitive assessment for the resumption of driving in brain-injured patients

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**Keywords:** Cognitive assessment; Driving; Brain-injured patients

We presented at the ECPRM Thessaloniki in 2012, preliminary work on the cognitive assessment for the resumption of driving. The establishment of the national network for e-enabled mobilization of four working groups: cognitive, situational assessment, communication and legislative developments. The first group reached consensus on the cognitive assessment. The second could not reach a consensus, but found a need for an evaluation in a real situation with a double evaluation by a driving instructor and an occupational therapist. The third shows the need for legislative changes. The fourth set up a website. After presentation of the results of the work of the four groups, it was decided to continue the work in collaboration with the SOFMER, the French Institute of Science and Technology of Transport, Development and Networks and the Health Authority to provide recommendations for clinical practice in the field.

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### Contribution of Ergo-Kit for evaluation of functional capacities and demands of the workplace

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**Keywords:** Ergo-kit; Staying at work; Evaluation of functional capacities; Work

**Objectives.**– Ergo-Kit (EK) is a validated tool for evaluation of functional capacities (EFC) and demands of the workplace (DWP). The aim of this study was to define the value of EK in return-to-work or staying at work.

**Material and methods.**– That is a retrospective study of EK assessments carried out in the department of Physical Medicine and Rehabilitation (PMR) in Angers from 2005 to 2012: analysis questionnaire of the biomechanical component of FCE and batteries of selected standardized tests for biomechanical FCE according to FCE data. Analysis and comparison of EFC and DWP data.

**Results.**– Among the 158 assessments, 73 included EFC and DWP (62 patients) that is to say 46% of the assessments carried out in the aim of staying at work or career advice with or without rehabilitation. Mean age was  $42.2 \pm 10.4$  years,

mean consistence of assessments was  $3.8/5 \pm 1$ .

**Conclusion.**– EK allows a global assessment and comparison of ECF and DWP data in the aim of return-to-work or staying at work. It would facilitate network between companies and PMR.

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### Standardized reporting to facilitate seamless transitions from hospital to the community: The utility of the International Classification of Functioning, Disability, and Health (ICF)

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**Keywords:** Continuity of care; Health information; Interdisciplinary treatment; Functioning

**Introduction.**– Health information that is standardized in structure and content facilitates seamless transitions from hospital to community-based settings. This paper demonstrates the utility of the ICF for standardized reporting across rehabilitation settings.

**Methods.**– ICF-based tools will be introduced and complimented with methods for establishing content and metric comparability of commonly used test and instruments, and the ICF. The utility of these tools and methods for standardized reporting will be illustrated by using rehabilitation following spinal cord injury (SCI) as a case in point.

**Results.**– ICF-based tools include ICF Core Sets and Functioning Profiles. Functioning Profiles display the levels of functioning of an individual or (sub-) population across ICF categories. Linking rules and psychometric methods facilitate the development of conversion tables from existing instruments to a standardized ICF-based reporting format. Functioning profiles have been applied for describing, measuring and reporting health and disability of individuals with SCI.

**Discussion.**– The utility of the ICF in practice is facilitated by ICF-based tools that allow integration and comparison of information collected with a variety of means. Functioning Profiles provide a standardized and comprehensive basis for the identification and evaluation of therapeutic goals, the coordination and allocation of resources in interdisciplinary rehabilitation across settings and time.

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### Factors that influence the realisation of a home visit for patient hospitalized in a rehabilitation unit with a geriatric speciality

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**Keywords:** Home visit; Occupational therapy; Geriatric

The objective is to identify factors that determine a home visit in geriatric rehabilitation units.

A retrospective analysis of hospitalized patient's files who had or had not a home visit was done. Medical history, life habits, autonomy before the entry and at the exit (Katz Scale) and information about home visits were analysed. Forty files of patients with a home visit and 40 files of patients without a home visit were compared. We did not find a profile of patients that needed a home visit. However, patients hospitalized for fall and the place of it are helping us decide to visit. Occupational therapy follow-up before home visit and social assistant presence seems to be a condition for quality home visit. Home visits are an important factor to prepare the exit of patient from the rehabilitation unit. It needs a multidisciplinary approach with the coordination of the occupational therapist. Further reading

Harris et al. "Predischarge occupational therapy home assessment visits: towards an evidence base". Aust Occup Ther J. 2008;55:85–95.

