

A Brief Introduction to the Functional Outcome Profile

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Ronald Skelton & Michael Joschko
University of Victoria

Summary of the Functional Outcome Profile (FOP)

The FOP is a combination of a structured interview and an analysis spreadsheet which together serve to provide a rehabilitation clinician with a systematic, comprehensive, quantitative picture of the client's own view of their functional status. It is designed primarily for use with community-living survivors of acquired brain injury. There is a "significant other" version designed to provide both corroborative information and a measure of care-giver burden. It is not a test, but an interview attending to the client's or their significant others concerns. Because of this, it can be given multiple times to track progress and the results are not affected by practice and clients do not find it tiring (because they are talking about themselves).

Given at intake, the FOP provides the therapist with information about where the client and their significant other feel the greatest effort should be focussed during rehabilitation. It should help the therapist and the clients to identify the most important outcome goals. Given at the conclusion of rehabilitation therapy and/or 3-6 month follow-up, the FOP should provide the therapist with an estimate of where the client feels their functional abilities have been improved, and by how much. Outcome data provided by the FOP can also be used to assess or to demonstrate the effectiveness of a particular rehabilitative program.

The FOP takes about 60 minutes. It can be faster or slower depending on the balance desired between clinical service delivery (e.g., establishing therapeutic rapport) versus simply collecting information. The FOP asks questions in approximately 60 areas of every day life in 8 major areas of their life, including Physical abilities and ADL, Health, Cognition, Executive Function, Emotional/Behavioural Status, Social, Activities, Overall Quality of Life (see the next page for details). In areas where clients or significant others identify a problem, they are asked to rate the frequency and impact of the problem (e.g., with memory). Other questions ask them to rate their level of satisfaction in a particular area (e.g., their social life). Only 4 simple scales used. These have been optimized graphically to provide clear direction as to directionality and magnitude.

One of the ways in which the FOP is different from other instruments is the emphasis on everyday functioning. This is reflected in the questions which ask not just about the frequency of particular problems resulting from the injury but also about the impact that these problems have on everyday functioning. Thus if a client has already found a way to recover from or compensate for a deficit caused by their brain injury, this recovery is reflect as a "good outcome".

Several sample questions are provided below to illustrate the nature, form, variety and breadth of the questions asked and to illustrate the flow of the interview. Accompanying the FOP itself is a brief user manual that explains how to deliver the questions as well as supplementary information that describes the constructs being asked about and the evidence that this area is problematic for people with brain injury. There is also a spreadsheet provided to record the answers of clients and provide graphical output of the profile.

FUNCTIONAL OUTCOME PROFILE – LIST OF CONSTRUCTS

Physical, ADL

1. Senses
2. Gross Motor
3. Fine Motor
4. Self-Care
5. Eating & Meal Preparation
6. Domestic Skills
7. Fatigue
8. Sleeping

Health

9. Medical Conditions
10. Pain
11. Health Satisfaction
12. Pain Medications
13. Psychotropic Meds
14. Med Side Effects
15. Problems from Meds/Drugs

Cognitive

16. Attention, Sustained
17. Attention, Divided
18. Language Expression
19. Language Comprehension
20. Information Processing Speed
21. Memory, Anterograde
22. Memory, Retrograde
23. Procedural Learning
24. Disorientation, Time
25. Way finding

Executive

26. Judgement
27. Organization, Cognitive
28. Confusability
29. Impulsivity
30. Organization, Behavioural
31. Initiation
32. Time and Punctuality
33. Money Management
34. Self-Insight
35. Coping

Emotional, Behavioural

36. Emotional Reactivity
37. Problem Behaviour
38. Intrusions: Emotional and Cognitive
39. Mood (Satisfaction)
40. Self-Esteem
41. Spirituality

Social

42. Relationships, Family
43. Relationships, Satisfaction
44. Physical Intimacy Problems
45. Physical Intimacy Satisfaction
46. Social Life
47. Social Relationships
48. Community/Social Interactions
49. Community Barriers
50. Community Involvement

Activities

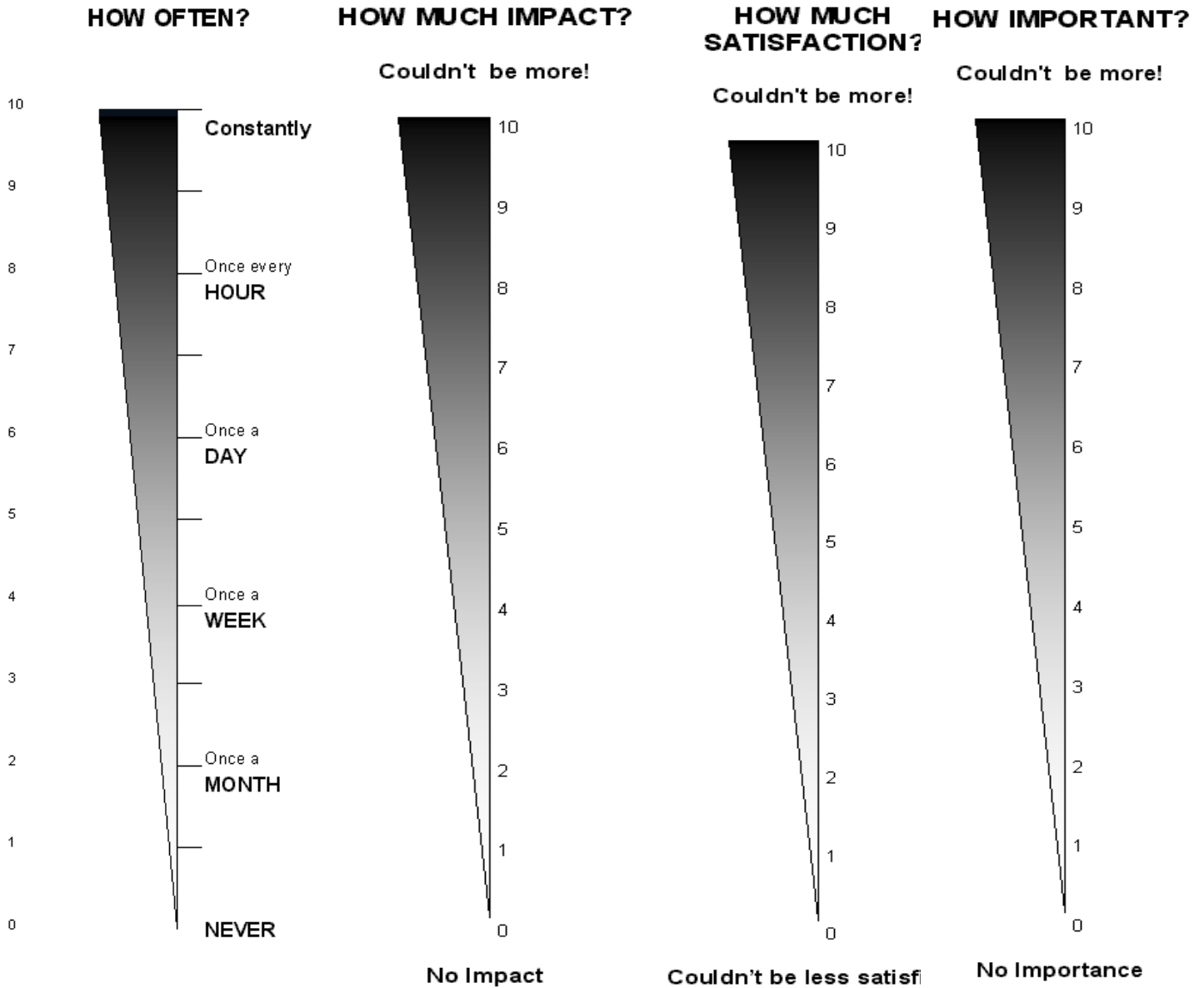
51. Self-Care Activities
52. Leisure: Solitary
53. Leisure: Active/Social
54. Leisure Satisfaction
55. Work, Quantity
56. Work Satisfaction
57. Work Demands
58. Safety concerns, by Others
59. Safety Concerns, by Self

Overall

60. Economic Security
61. Other Problems
62. Life Satisfaction
63. Good Things

Response Scales

Nearly all questions on the FOP solicit ratings, and all these ask clients to provide ratings using these 4 response scales. Most questions ask for ratings of Frequency plus Impact. Some questions ask for ratings of Satisfaction and Importance. A few questions ask for ratings of Satisfaction or Frequency alone, or Frequency & Satisfaction. The next section provides some questions which show how responses on these scales are solicited.



Sample Questions from the Client Version

34. <small>(Self-Insight)</small> Do you think you ever <u>over- or under-estimate your abilities?</u>	Y N N/R under / over
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Note: Indicate response by circling appropriate descriptor (under / over).

Over the past month how often has this over/under estimation caused problems for you?

Frequency
Impact

How much impact has this had on your everyday life?

Now, I'd like to ask you about your emotional reactions and your ability to cope with stresses. Everybody has stress in their life. Stresses people experience usually change from day to day or from week to week.

35. <small>(Coping)</small> Do you sometimes find that it is <u>hard to cope</u> with the things that are happening in your life?	Y N N/R
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Over the past month, how often has this difficulty coping caused you problems (in your everyday life)?

Frequency
Impact

Over the past month, how much did this affect your everyday life?

36. <small>(Emotional Reactivity)</small> Do you sometimes have <u>strong emotional reactions or difficulty controlling your emotions?</u> For example, do you have difficulty with irritability, depression, intense anger, bad temper, or tearfulness?	Y N N/R
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Could you give me some examples? _____

(Anything else?) _____

Taking all of these things together how often have your emotional reactions caused you problems (in your everyday life)?

Frequency

(Or if only one emotion cited) How often has this caused you problems in your everyday life?

Over the past month, how much have these reactions affected your everyday life?

Impact

Now I want to ask about some behaviours that might cause problems in getting along with others, perhaps because they are odd or annoying. These behaviours can be done out of anger, impulsively, on purpose, or just because you can't help yourself.

37. <small>(Problem Behaviour)</small> Do you ever <u>behave</u> in ways that cause you <u>problems</u> getting along with others? This includes things like belching, swearing, not cleaning up after yourself, physically hurting yourself or other people or doing things over and over again because you just can't help yourself.	
So, have you done anything like this over the past month?	Y N N/R

Like what? _____

Accept any behaviour that would interfere with getting along with people, including unusual or repetitive habits

Over the past month, how often has this (have these) behaviour(s) caused you problems getting along with others? *Rate taking all behaviours into account*

Frequency
Impact

Over the past month, how much have these problems affected your everyday life?

Now, I'd like to ask you about your emotional experiences, mood, and how you feel about yourself.

38. <small>(Intrusions: Emotional and Cognitive)</small> Do you sometimes have <u>emotional experiences or thoughts that are troubling to you?</u> For example, periods of anxiety, bad dreams, flashbacks, thoughts of suicide, unusual thoughts or fears, or thoughts that won't go away?	Y N N/R
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Could you give me some examples? _____

(Anything else?) _____

Over the past month, how often have you had these kinds of experiences?
Rate taking all experiences into account

Frequency
Impact

Over the past month, how much has this affected your everyday life?

{Mood} Overall, how would you describe your mood?

Data entry instruction: enter description with Q. 39

If the client does not understand the term "Mood," read the following description: "Mood is a way of describing the general state of your feelings over time. Some examples of moods are: happy, sad, satisfied, irritable, relaxed, and anxious."

39. <small>{Mood}</small> Over the past month, has your <u>mood</u> caused problems for you?	Y	N	N/R
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How often (has your mood caused you problems in your everyday life)?

Frequency

So, how much your mood affected your everyday life?

Impact

Over the past month, how happy or satisfied have you been with your mood?

Satisfaction

40. <small>{Self-Esteem}</small> Now I'd like to ask you about your <u>self-esteem</u>. This would include your confidence in doing things, your feelings of self-worth, whether you accept yourself for who you are, and how satisfied you are with the amount of control you have over your own life.

So, over the past month, how satisfied have you been with who you are?

Satisfaction

Note: Try to keep person focussed on their inner being, not their physical form

I'd like to ask you about your spiritual well-being. For some people this relates to their religion and values, their belief in God, or their relationship to a god. For others, it relates to their sense of who they are, their acceptance of themselves, an inner peace, or their sense of the meaning and value of their life.

41. <small>{Spirituality}</small> Would you say that your spiritual life or <u>spiritual well-being</u> is important to you? <i>(is a concern of yours?)</i>	Y	N	N/R
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How important is your spiritual well-being to you?

Importance

Over the past month, how satisfied have you been with your spiritual life or spiritual well-being?

Satisfaction



Samples of Questions from the Significant Other (SO) version.

(Note: The same questions as those asked of the client are asked of the significant other, with a slight shift in perspective. The Significant other is asked for corroborative information about problem frequency, but is asked about impact on themselves, not client. This assesses caregiver burden.)

34. <small>(Self-Insight)</small> Do you think X ever <u>over-or under-estimates his/her abilities?</u>	Y N N/R under / over
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Note: Indicate response by circling appropriate descriptor (under / over).

Data entry instruction: enter under / over in Y/N box

Over the past month, how often has this over/under estimation caused problems for X?
How much impact has this had on your everyday life?

Frequency
Impact

Now, I'd like to ask you about X's emotional reactions and his/her ability to cope with stresses. Everybody has stress in their life. Stresses people experience usually change from day to day or from week to week.

35. <small>(Coping)</small> Does X sometimes find that it is <u>hard to cope</u> with the things that are happening in his/her life?	Y N N/R
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Over the past month, how often has this difficulty caused X problems (in his/her everyday life)?

Over the past month, how much did this affect your everyday life?

Frequency
Impact

36. <small>(Emotional Reactivity)</small> Does X sometimes have <u>strong emotional reactions or difficulty controlling his/her emotions?</u> For example, does he/she have difficulty with irritability, depression, intense anger, bad temper, or tearfulness?	Y N N/R
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Could you give me some examples? _____

(Anything else?) _____

Taking all of these things together how often has X's emotional reactions caused him/her problems (in his/her everyday life)?

(Or if only one emotion cited)

How often has this caused X problems in his/her everyday life?

Frequency
Impact

Over the past month, how much have X's reactions affected your everyday life?

Now I want to ask about some behaviours that might cause X problems in getting along with others. These behaviours can be done out of anger, impulsivity, on purpose, or just because he/she can't help himself/herself.

<p>37. <small>(Problem Behaviour)</small> Does X ever <u>behave</u> in ways that cause him/her <u>problems</u> getting along with others? This includes things like belching, swearing, not cleaning up after himself/herself, physically hurting himself/herself or other people, or doing things over and over again because he/she just can't help himself/herself.</p> <p>So, has X done anything like that in the past month?</p>	<p>Y N N/R</p>
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Like what? _____

Accept any behaviour that would interfere with getting along with people, including unusual or repetitive habits.

Over the past month, how often has this (have these) behaviour(s) caused X problems getting along with others? *Rate taking all behaviours into account*

Frequency
Impact

Over the past month, how much have these problems affected your everyday life?

<p>38. <small>(Intrusions: Emotional and Cognitive)</small> Does X talk about or express that he/she is having <u>emotional experiences or thoughts that are troubling</u> to him/her? For example, periods of anxiety, bad dreams, flashbacks, thoughts of suicide, unusual thoughts or fears, or thoughts that won't go away?</p>	<p>Y N N/R</p>
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Could you give me some examples? _____

(Any thing else?) _____

Over the past month, how often has X had these kinds of experiences?
Rate taking all experiences into account

Frequency
Impact

Over the past month, how much has this affected your everyday life?

<p><small>(Mood)</small> Overall, how would you describe X's <u>mood</u>?</p>

<p><i>Data entry instruction: enter description with Q. 39</i></p>

If the interviewee does not understand the term "Mood", read the following description: "Mood is a way of describing the general state of X's feelings over time. Some examples of moods are: happy, sad, satisfied, irritable, relaxed, and anxious."