

# California Functional Capacity Evaluation Guidelines for Physical Therapists

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## **1.0 PURPOSE OF DOCUMENT**

The purpose of this document is to establish guidelines for the delivery of Functional Capacity Evaluations (FCE's), and to set the standards of training and capabilities of the physical therapists who perform these services within the State of California.

## **2.0 DEFINITIONS**

### **2.1 Physical Therapists as FCE Providers**

Functional Capacity Evaluations (FCE's) are within the scope of the practice of physical therapy (Business & Professions Code, Chapter 5.7. Physical Therapy). The physical therapists providing these services must have the appropriate license from the state of California and must be able to show evidence of post-licensure training in the delivery of FCE's.

### **2.2 Functional Capacity Evaluation**

An FCE is a detailed test that objectively measures the client's current level of function. An FCE includes appropriate components of a neuromusculoskeletal examination, measurements of physical impairment, client behavior and the functional abilities of the client. The measurements of function from the FCE are compared to the physical demands of the job or other activities of daily living, and are used to make proper return to work/activity decisions or to generate a rehabilitation plan. A variety of other tests and evaluations (such as a physical therapy discharge summary or ADL evaluation) are done in the course of physical therapy treatment. These evaluations are primarily done to determine the need for continuing treatment or care. Only the FCE is designed to evaluate the individual patient's ability to perform specific, work related functional activities.

An FCE requires up to 4 to 6 hours of client testing over one or more days and should take place within the context of the demands of competitive employment. The length of the FCE will depend on the following conditions:

1. The complexity of the illness or injury and the residual impairments,
2. The availability of clearly defined, work related physical demands.

The word capacity implies potential, which by definition cannot be measured. The FCE measures the ability of the individual to perform functional or work related tasks and implies or predicts the potential to sustain these work related tasks over a period of time (ie. a standard work shift). In some cases, the FCE may be extended beyond 6 hours or two days to further quantify the ability of the client to sustain the work tasks over a regular work schedule.

### **2.3 Physical Demands of the Workplace**

Those physical skills required to successfully perform work tasks. The demands as used in this document include: work postures (positions), body movements, forces applied to the worker (worker movement of objects), repetition of the work tasks, and other ergonomic stressors and hazards.

## 2.4 Physical Demand Characteristic Levels

The categories of work demands into which clients can be safely placed. "The physical demands strength rating reflects the estimated overall strength requirement of the job . . . It represents the strength requirements which are considered to be important for average, successful work performance." (Dictionary of Occupational Titles, 1991).

## 3.0 KNOWLEDGE BASE

- 3.1 For safe FCE administration and useful interpretation, the physical therapist must have adequate knowledge in the following areas:
  - 3.1.1 Evaluation and analysis of pertinent neuromusculoskeletal anatomy, physiology and biomechanics.
  - 3.1.2 Evaluation and analysis of common clinical pathology.
  - 3.1.3 Evaluation and analysis of client behaviors and symptom exaggeration.
  - 3.1.4 The biomechanics of worker safety.
  - 3.1.5 California laws and regulations pertaining to the workers' compensation system and worker safety.
  - 3.1.6 Administration of FCE's and interpretation of test results.
  - 3.1.7 Analysis and interpretation of the physical demands of the workplace.

## 4.0 GUIDELINES FOR FUNCTIONAL CAPACITY EVALUATIONS

- 4.1 Each physical therapist performing FCE's must:
  - 4.1.1 Use appropriate evaluations to identify clients likely to benefit from the FCE by:
    - 4.1.1.1 Performing and/or analyzing the results of structured client interviews.
    - 4.1.1.2 Identifying clients with medical conditions that prohibit or limit participation in the evaluation.
    - 4.1.1.3 Identifying pertinent neuromusculoskeletal limitations that prohibit or limit participation in the evaluation.
  - 4.1.2 Review medical records and other supplementary information when made available.
  - 4.1.3 Evaluate the functional abilities of the client as they relate to their ability to accomplish activities of daily living and/or tasks in the workplace. Identifying, quantifying and analyzing the functional abilities/limitations of the client includes:
    - 4.1.3.1 Designing and implementing tests of basic functional abilities and/or
    - 4.1.3.2 Designing and implementing tests to simulate specific job tasks.
  - 4.1.4 Evaluate and analyze client behaviors and symptom exaggeration during the FCE.
  - 4.1.5 Compare the physical demands of the workplace with the results of the FCE.
  - 4.1.6 Document results of the complete evaluation process.
  - 4.1.7 Identify reasonable accommodations and work modifications that would make a job compatible with the physical abilities of the client, when appropriate.
- 4.2 Goals of the FCE:
  - 4.2.1 Quantify the safe functional abilities of the client.
  - 4.2.2 Compare the physical abilities of the client to the physical demands of the job/activity, and identify any discrepancies.

- 4.2.3 Assess the client's effort and identify any problems with consistency of effort, client behaviors or symptom exaggeration, if present.
- 4.2.4 Depending on the case, goals of the FCE may also include:
  - 4.2.4.1 Identifying the need for reasonable accommodations and job modifications for a specific job or occupational title.
  - 4.2.4.2 Identifying needs for further treatment.
  - 4.2.4.3 Identifying potential needs for referral to other professionals.
- 4.3 Admission Criteria:
  - 4.3.1 The client must be medically stable.
  - 4.3.2 The client must consent to participate.
- 4.4 Indications for an FCE may include, but are not limited to, any one or more of the following:
  - 4.4.1 The client may have reached a point where he/she is not making functional gains in treatment.
  - 4.4.2 The client displays difficulty returning to full duty employment.
  - 4.4.3 Objective functional information may be needed upon which to base future rehabilitation or vocational plans.
  - 4.4.4 The client may be physically deconditioned with a resulting decrease in job-related functional abilities.
  - 4.4.5 The client may display a discrepancy between subjective complaints and objective findings.
  - 4.4.6 Objective functional information may be needed prior to the determination of loss of earning capacity or litigation resolution.
- 4.5 Contraindications For Referral:
  - 4.5.1 The client is not medically stable.
  - 4.5.2 Other medical problems would be adversely affected by the testing.
  - 4.5.3 The client is unable to communicate with the evaluator, understand instructions or communicate concerns and reactions during the FCE.
- 4.6 Guidelines For Test Administration:
  - 4.6.1 To meet the goals of the testing, there should be specifically trained personnel, appropriate space and equipment for functional testing.
  - 4.6.2 The testing should be conducted in the context of the demands of competitive employment which implies as much job simulation as possible.
  - 4.6.3 The quality of movement during the testing needs to be described and quantified as well as possible. Items to be considered include body mechanics, functional range of motion and strength, endurance, pace, coordination, balance, and safety of movement during each of the test items.
  - 4.6.4 Standardized methods are used to conduct each test.
  - 4.6.5 Each test item should be related to the goal of the testing, i.e. what can the person do safely at work.

- 4.7 Components of an FCE:
  - 4.7.1 Evidence of an informed consent to include purposes, risks and components of the FCE.
  - 4.7.2 History including medical diagnosis and work/activity history.
  - 4.7.3 Client's report of current physical tolerances.
  - 4.7.4 Methods to identify pertinent neuromusculoskeletal and cardiovascular limitations.
  - 4.7.5 Assessment of client behavior, consistency of effort, symptom exaggeration, pain, body mechanics and safety.
  - 4.7.6 Client's perception of his/her own disability or other pertinent behavioral tests.
  - 4.7.7 Functional testing and work simulation.
  - 4.7.8 Physical abilities compared to the physical demands of the job when identified.
  - 4.7.9 Documentation of results, findings, conclusions and recommendations of the FCE.

**5.0 PROFESSIONAL TIME REQUIRED FOR THE PERFORMANCE OF FUNCTIONAL CAPACITY EVALUATIONS:**

- 5.1 Up to 4 - 6 hours of individualized time with the Physical Therapist over 1 - 2 days.
- 5.2 Up to 2 hours of professional time for collating and synthesizing data, dictating, and final editing of the report.
- 5.3 Printing, copying multiple reports and mailing costs.
- 5.4 Multiple telephone calls for clarification, communicating results and follow-up.

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**References:**

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