

Global assessment of function

IMM 5727

Subject

Instructions for completing the Global Assessment of Function (GAF) form in the context of the Canadian immigration medical examination (IME).

Goal/Objective

These instructions are provided to ensure that panel physicians (PPs) follow a consistent and appropriate process for the following:

- identification of clients with possible diminished capacity on the GAF;
- completion of the GAF form; and
- completion and grading of an IME for a client with diminished function.

Instructions

The GAF is a numeric scale (0 through 100) used by mental health clinicians and physicians to subjectively rate the social, occupational, and psychological functioning of adults, e.g., how well or adaptively clients are meeting various problems-in-living. The GAF is not used to assess impairment in functioning due to physical (or environmental) limitations. If an interpreter is used, PP must select and ensure that the interpreter is unbiased and has no connection to the client. Family members or friends cannot act as interpreters for clients. The use of a professional interpreter is at the client's expense.

It is recommended that PPs complete the GAF form (in Annex 1) for adult clients who:

- have abnormal findings on intellectual ability; or
- have a positive screening for conditions such as antisocial disorders, dementia/Alzheimer's disease, psychosis, alcohol/drug dependence, autism or mental retardation.

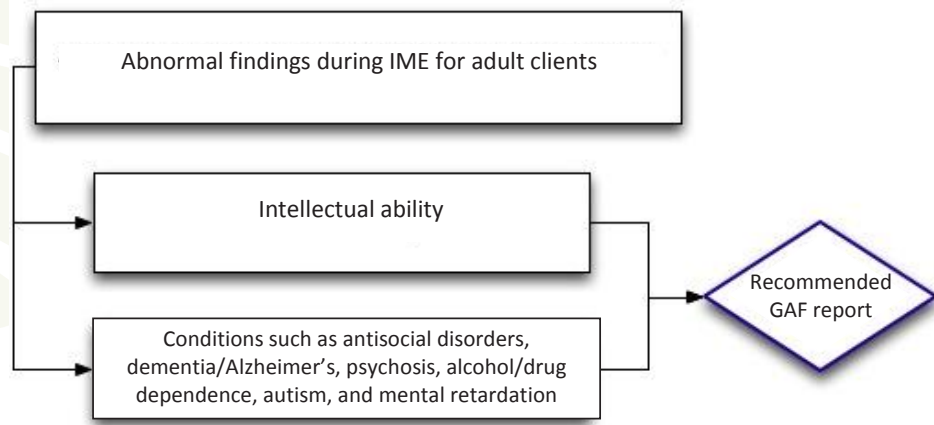
Grading

IMEs for clients with abnormal GAF must be graded B.

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Algorithm



References

Best Practices - Concurrent Mental Health and Substance Use Disorders:
http://www.hc-sc.gc.ca/hc-ps/pubs/adp-apd/bp_disorder-mp_concomitants/eval-eng.php

HB Approval and Authority

Director General, NHQ, Health Branch, CIC

Implementation Date

2012/11/01

Revision Date(s)

2013/11/01



Citizenship and
Immigration Canada

Citoyenneté et
Immigration Canada

PROTECTED WHEN COMPLETED - B

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GLOBAL ASSESSMENT OF FUNCTIONING SCALE

Consider psychological, social and occupational functioning on a hypothetical continuum of mental health or illness. Do not include impairment in functioning due to physical (or environmental) limitations. Use intermediate codes when appropriate, such as 45, 68, 72. Rating on the Global Assessment of Functioning (GAF) Scale should be made for two time periods:

- Current - the level of functioning at the time of the evaluation
- Past year - the highest level of functioning for at least a few months during the past year

90: Absent or minimal symptoms (e.g., mild anxiety before an exam), good functioning in all areas, interested and involved in a wide range of activities, socially effective, generally satisfied with life, no more than everyday problems or concerns (e.g., an occasional argument with family members).

80: If symptoms are present, they are transient and expectable reactions to psychosocial stressors (e.g., difficulty concentrating after family argument); no more than slight impairment in social, occupational, or school functioning (e.g., temporarily falling behind in school work).

70: Some mild symptoms (e.g., depressed mood and mild insomnia) OR some difficulty in social, occupational, or school functioning (e.g., occasional truancy, or theft within the household), but generally functioning pretty well, has some meaningful interpersonal relationships.

60: Moderate symptoms (e.g., flat affect and circumstantial speech, occasional panic attacks) OR moderate difficulty in social, occupational, or school functioning (e.g., few friends, conflicts with co-workers).

50: Serious symptoms (e.g., suicidal ideation, severe obsessional rituals, frequent shoplifting) OR any serious impairment in social, occupational, or school functioning (no friends, unable to keep a job).

40: Some impairment in reality testing or communication (e.g., speech is at times illogical, obscure, or irrelevant) OR major impairment in several areas, such as work or school, family relations, judgment, thinking, or mood (e.g., depressed individual avoids friends, neglects family, and is unable to work; child frequently beats up younger children, is defiant at home, and is failing at school).

30: Behaviour is considerably influenced by delusions or hallucinations OR serious impairment in communication or judgment (sometimes incoherent, acts grossly inappropriately, suicidal preoccupation) OR inability to function in almost all areas (stays in bed all day; no job, no friends).

20: Some danger of hurting self or others (e.g., suicide attempts without clear expectation of death, frequently violent, manic excitement) OR occasionally fails to maintain personal hygiene (e.g., smears feces) OR gross impairment in communication (e.g., largely incoherent or mute).

10: Persistent danger of severely hurting self or others (e.g., recurrent violence) OR persistent inability to maintain personal hygiene OR serious suicidal act with clear expectation of death.

0: Inadequate information.

Client's name:	UCI number:	UMI number:	IME number:
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Examining Physician Declaration:

I have adequate information to make a global assessment of the functioning of this client.

I have assessed the client's functional status as: _____

Do you have any additional comments you wish to make on this client's functional assessment?

Examining physician name: _____

Signature: _____

Date (YYYY-MM-DD): _____