Bridging the Gap Between Consumer and Products in Rehabilitation Medicine

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Occupational Therapist

Assisting people people who are unable to function independently or are not functioning as independently as possible in the areas of daily living, work, play and leisure.

- > Independence is increased through functional activities that are meaningful to the individual.
- Occupational Therapists treat the whole person!

The Transdisciplinary Team

Computer Engineer Social Workers

Family/Tutor/Caregiver Occupational Therapist

Rehabilitation Counselor Speech-Language Pathologist

Assistive Technology Specialist Prosthetists

Service Coordinator Medical Consultants

Fabrication/Adaptation Tech Teachers/Special Educators

Training Coordinator AT Equipment Vendors

Audiologists Hearing Device Specialist

Nurse Practitioners Physical Therapists

• Will allow the individual to:

- > Discharge to home
- > Return to independent activities of daily living

- Will allow the individual to:
 - > Discharge to home
 - > Return to independent activities of daily living Mobility

- Will allow the individual to:
 - **➤** Discharge to home
 - >Return to independent activities of daily living
 Mobility
 Self Care

- Will allow the individual to:
 - > Discharge to home
 - >Return to independent activities of daily living Mobility

Self Care

Communication

- Will allow the individual to:
 - > Discharge to home
 - > Return to independent activities of daily living

Mobility

Self Care

Communication

Leisure

- Will allow the individual to:
 - > Discharge to home
 - > Return to independent activities of daily living

Mobility

Self Care

Communication

Leisure

Vocation

Levels of Assistive Technology: Some Practical, Working Definitions

- > Assistive technology devices can be classified by levels of technology and life skill areas.
- > Devices can also be classified by the level of technical training that the user requires to implement the equipment.

Levels of Assistive Technology: Some Practical, Working Concepts

Low Technology Devices

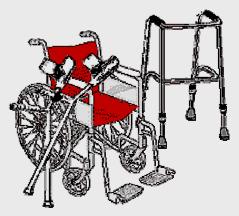
- > Equipment that is easy to use and do not require electrical power. May require a short training period.
- > Strategies, methods and/or techniques that rely primarily on user's ability to move or utilize various body parts in modified way
 - **❖**Finger spelling
 - **❖Knocking on a door**
 - **❖**Scooting up/down steps



Levels of Assistive Technology: Some Practical, Working Concepts

Elementary Technology Devices

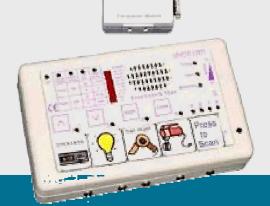
- > Include most battery-operated devices. User requires a moderate training period.
- ➤ Relatively simple materials and equipment commonly found in living and work space. Off-the-shelf or inexpensive.
 - **❖**Basic wheelchair/walker
 - **❖**Built-up pen
 - **❖** Modified faucet handle
 - **❖** Modified eating utensils



Levels of Assistive Technology: Some Practical, Working Concepts

High Technology Devices

- Include complex and programmable equipment. User requires specific training in order for the user to take full advantage of their capabilities.
- > User integrated with complex electronic, mechanical or hydraulic technologies to accomplish user's purpose. Typically expensive.
 - **❖Voice operated ECU**
 - **Electric lifts**
 - **❖** Modified car/van controls
 - **❖**Motorized wheelchair



A Continuum of Considerations for Assistive Technology for the Mechanics of Writing



Regular pen or pencil

Pencil or pen with adapted grip

Adapted paper (e.g. raised line, highlighted lines)
Slant board to create slanted writing surface





Typewriter

Portable note taker that interfaces with computer

Computer with word processing software

Word prediction/abbreviation expansion software for efficiency

Voice Recognition software

(Adapted by ATTO from WATI, 1998)

Equipment Suitability

- > Age
- > Gender
- > Perception of self
- > Culture
- > Support
- > Pre prescription home visit

Steps Needed to Issue an Assistive Device

- > Selection of a device for an activity
- Site and method of instruction
- > Time to introduce device during hospitalization
- > Reinforcement of its use
- > Written justification to insurance company

Instruction in the Use of the Assistive Device

- > Repetition is key
- > Types of instruction:
 - ***** demonstration
 - *practicing actual skills in hospital environment
 - * written
 - *video

Reinforcement

Transition of skills to community/home environment

Follow-up

Support groups

Refresher training may be necessary

Who pays?

- User
- Insurance

Private

managed care

fee-for-services

Medicare

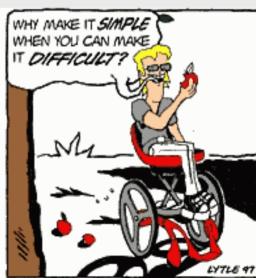
• VA

Other Factors Associated with Non-use of Assistive Devices

- Too many devices!
- Change in habits to make ADLs easier







Access to Equipment and Rehabilitation Services

(Bingham and Beatty, 2003)

>50% needed assistive equipment in last 12 months 30% were unable to get needed equipment

40% needed rehabilitation services in last 3 months >50% did not receive those services