### Bridging the Gap between Consumers and Products in Rehabilitation Medicine

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#### How is assistive technology used?

- Mental and / or Physical Activities
  - Improve functioning
  - Overcome disorder or impairment
  - Prevent worsening of a condition
  - Strengthen a weakness
- ✤ Goal: Increased Independence

### The Transdisciplinary Rehabilitation Team

MD

Computer Engineer Family / Tutor / Caregiver Rehabilitation Counselor Assistive Technology Specialist Service Coordinator Fabrication / Adaptation Tech Training Coordinator Audiologists Nurse Practitioners Psychologist Social Workers Occupational Therapist Speech-Language Pathologist Prosthetist Medical Consultants Teachers / Special Educators AT Equipment Vendors Hearing Device Specialists Physical Therapists

Patient

## What is Occupational Therapy?

Occupational therapists and occupational therapy assistants help people of all ages do the things they want and need to do through the use of everyday activities (occupations).

Occupational therapy practitioners ask: "What matters to you?" not, "What's the matter with you?"



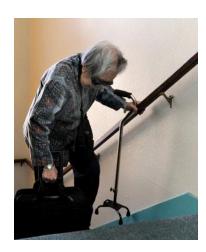




















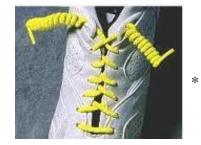








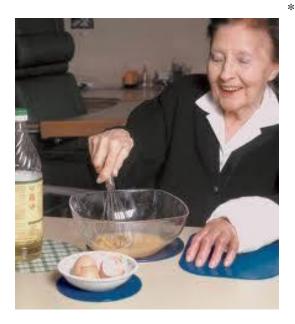








#### Eating and Meal Preparation

















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#### Communication

















- Leisure
  - > Hobbies, sports, travel, etc.

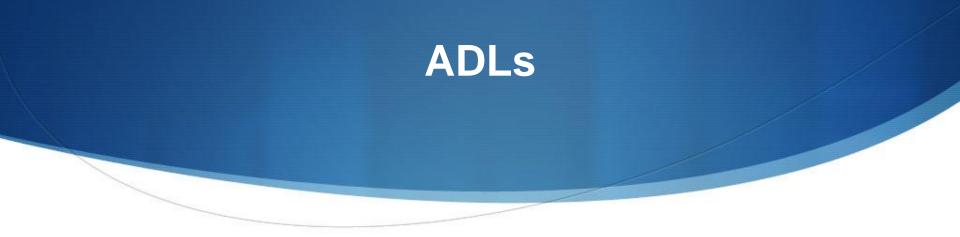












• Vocational and Educational







### Steps to Successfully Issue an Assistive Device

- Patient evaluation
  - Home Evaluation
  - Survey/Interview
  - Functional Evaluation

### Steps to Successfully Issue an Assistive Device

Framework for Patient Evaluation:

Health Status

Physical Environment

Cognitive Status

- Social Aspects
- Economic
  Personal Preferences

#### Expectations!!!!

### **Disability** ≠ Inability



### Steps to Successfully Issue an Assistive Device

- Introduction of device
  - In-Patient / Out-Patient / Home
- Site and method of instruction / training

### Different Levels of Assistive Technology Require Different Amounts of Training

#### Low Technology Adaptation

Easy to use and does not require electrical power. May require a short training period.

#### **Elementary Technology Devices**

Includes most battery-operated devices. User requires a moderate training period. Usually off-the-shelf or inexpensive.

#### **High Technology Devices**

Includes complex and programmable equipment. User requires specific training in order for the user to take full advantage of their capabilities. Expensive.

# High Versus Low Tech Quadraplegic Feeding Aids



\$149

\$6000







# Issuing Assistive Devices The final step?

Write justification to insurance company

Ordering/Buying equipment

High tech equipment (typically) – care team/insurance

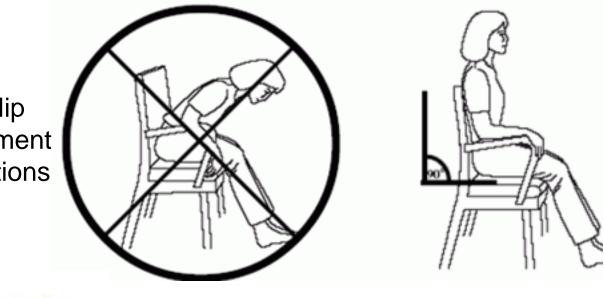
Low tech or not covered by insurance – patient/caregiver

### Steps to Successfully Issue an Assistive Device

Assessing the Outcomes:

- Effectiveness
  Psychological Functioning
- Efficiency
  Subjective Well-Being
- Device Satisfaction

### Assistive Technology: One Size Doesn't Fit All



Total Hip Replacement - precautions



Long Handled Sponge

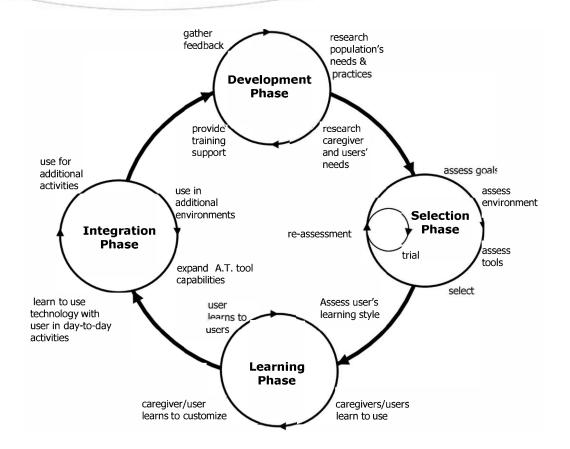
At 2 months, 30% of patients aren't using the device

#### Why might this AT end up in the closet?



\$599

# Successful Design and Implementation of Assistive Technology



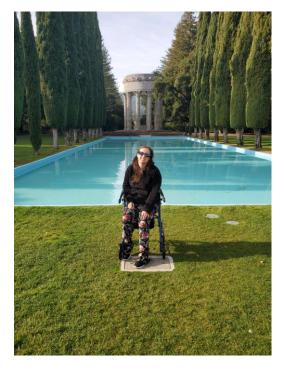
### How this all Relates to Product Development

Involve all stakeholders early on and throughout the design process:

End users

- Rehab team / therapist
- Family members

## Case Study



Emma

30 y.o.

Reading Cooking Animals / Pets Watching TV Hiking / Backpacking / Traveling

## Case Study

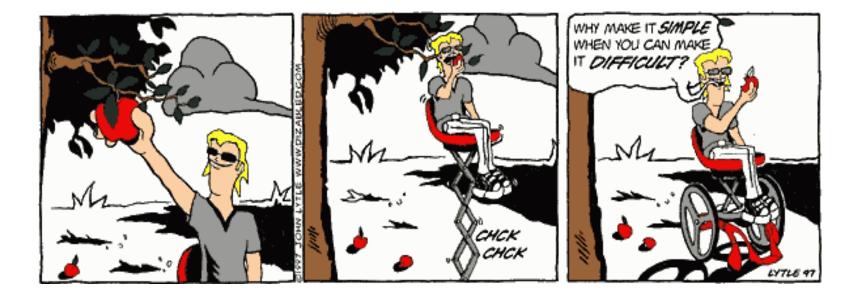


Acquired Brain Injury: Cortical Blindness Sensory and Motor deficits Memory deficits Executive Functioning deficits

## Aids for Reading



#### Whenever possible, keep it simple



### Practicing Subject and Caregiver Interviews

Which of the following assistive technologies do these people use?

- Do they use it
- Did they own it but no longer use it: Why?

#### Prompts:

- Explore social aspects, personal factors, economic and physical environments of the subject
- Find out what motivates them

## Stroke (aka CVA)

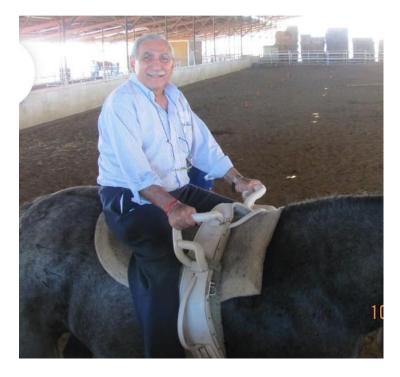


Michael

#### **Rt Hand Dominant**

Lt CVA with limited ability to use Rt hand

# Stroke (aka CVA)



Albert

**Rt Hand Dominant** 

Lt CVA with limited ability to use Rt hand

#### Example of a Low Tech Device: Rocker Knife



\$8.95

\$26.50

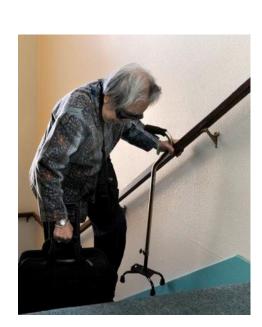




Self Care
 Mobility











### Mobility











# Example of Medium Tech Saebo Stretch



#### \$200

# Example of High Tech Device Rewalk Exoskeleton



## Example of High Tech Device Rewalk Exoskeleton



\$71,600 +























- Allegro Medical
- North Coast Medical
- Sunrise Medical
- <u>Rehab Mart</u>
- <u>Move United</u>

# Where to donate used medical equipment

#### • <u>ReCARES</u>

- Lions Club <u>Hearing Aid and Eyeglass Recycling</u> <u>Program</u>
- <u>Silicon Valley Independent Living Center</u> (wheelchairs <5 years old)</li>
- ♦ Ability Tools <u>Reuse Programs</u>

#### **Other Resources**

- The Design and Evaluation of Assistive Technology Products and Devices Part 1: Design. Marion A. Hersh. International Encyclopedia of Rehabilitation.
- https://www.resna.org/
- <u>https://tecnoaccesible.net/en/content/accessible-technology-coalition</u>

#### **Other Resources**

- Gillham, M., Pepper, M., Kelly, S., & Howells, G. (2019). Stakeholder views addressing the development and uptake of powered wheelchair assistive technology. Disability and Rehabilitation: Assistive Technology, 14(2), 146–160. https://doi.org/10.1080/17483107.2017.1416186
- Shah et al (2009) Developing medical device technologies from users' perspectives. Int J Technol Assess Health Care. 25(4):514-521. link
- Trish Wielandt et al., Factors that predict the post-discharge use of recommended assistive technology. Disability and Rehabilitation: Assistive Technology, January-June 2006; 1(1-2)ß: 29-40. link
- Ripat, J., & Booth, A. (2005). Characteristics of assistive technology service delivery models: Stakeholder perspectives and preferences. *Disability and Rehabilitation*, 27(24), 1461–1470. <u>https://doi.org/10.1080/09638280500264535</u>