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Training Needs and Development of Online AT Training for Healthcare Professionals in UK and France

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Background: Assistive Technology (AT) solutions for people with disabilities has become part of mainstream care provision. Despite advantages of AT on offer, abandonment and non-compliance are challenges for healthcare professionals (HCPs), introducing this technology to clients. Studies of abandonment reveal that 1/3 of all devices provided to service users end up stored unused. Key need is training to make informed decisions about AT tailored to individual needs and circumstances. In an online survey undertaken by the ADAPT project, HCPs identified AT training needs and barriers. Currently, a programme is being developed aimed at introducing AT concepts and enhancing practices to a wide range of HCPs.

Method: Survey questions explored gaps, availability, qualifications and barriers to AT training in England and France. A series of consultation meetings with ADAPT partners took place. An advisory group consisting of longstanding AT users and their formal/informal carers and HCPs (occupational therapist, speech and language therapist, psychologist and biomedical engineer) contributed to the discussions on survey findings, development and evaluation of AT training for HCPs, key content areas and means of delivery.

Key results: HCPs had no AT specific qualifications (UK 94.6%; FR 81.3%) nor in-service AT training (UK 65.1%; FR 66.4%). They either did not know of AT courses (UK 63.3%) or knew that none existed (FR 72.5%). Barriers to AT training were mainly local training (UK 62.7%, FR 50%) and funding (UK 62.7%, FR 55.7%). Some training priorities were clearer for French HCPs – overall knowledge of AT devices (82.1%, UK 45.8%), customization of AT (65.3%, UK 30.1%), assessing patient holistically (53.4%, UK 25.3%), educating patient/carers (56.5%, UK 28.3%) ($p < .001$). Variances may be due to differing country-specific HCP education approach. A third of both groups highlighted also abandonment, client follow-up, powered wheelchair training and prescribing AT.

To bridge gaps in knowledge and identified training needs of HCPs, the online interactive training programme starts by introducing foundations of AT, including definitions, types/uses of AT, legislation/policies and AT in practice. More specialist units build and expand on specific areas, e.g. AT for mobility, communication, assessment and evidence-based practice. The biopsychosocial model of Health and World Health Organisation's (WHO) International Classification of Functioning, Disability and Health (ICF) framework underpin development of content. ICF shifts focus from disability to health and functioning, in line with a social model of rehabilitation.

E-learning comprises existing videos, AT textbook material and bespoke animated presentations. Self-assessment and evaluation of training are embedded and learners receive certificate of completion. Training was piloted to a group of HCPs trainees and post-registration HCPs who commented on relevance of AT content, clarity, accessibility of presentation, and usefulness. Users found training very useful, especially legislation/policies and AT literature.

Conclusion: Overall, survey results suggest that both UK and French HCPs' training on AT solutions is limited and highly variable. There is need for cross-channel AT professional competencies, availability of work-based training and

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funding support. Development of online, interactive training aims to increase professional confidence and competence in this area as well as the evidence base for AT.

Keywords: AT training needs; healthcare professionals; barriers to training; training priorities; development of online AT training

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Tweetable abstract: HCPs' training on AT limited and highly variable; barriers are local training and funding; priorities include preventing abandonment, patient follow-up, prescribing AT; new online, interactive training for all HCPs to increase professional confidence/competence and AT evidence base introduced by #ADAPT_Project