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A Survey of Assistive Technology (AT) Knowledge and Experiences of Healthcare Professionals in the UK and France: Challenges and Opportunities for Workforce Development.

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Background: Assistive Technologies (AT) in healthcare can increase independence and quality of life for users. Concurrently, new AT devices offer opportunities for individualised care solutions. Nonetheless, AT remains under-utilised and is poorly integrated in practice by healthcare professionals (HCPs). Although occupational therapists (OTs), physiotherapists and speech and language therapists (SLTs) consider that AT solutions can offer problem-solving approaches to personalised care, they have a lesser understanding of application of AT in their practice. In this paper, we report findings of a survey on AT knowledge and experiences of HCPs in UK and France. Training needs also explored in the survey are presented in a separate paper on development of online training for the ADAPT project.

Method: A survey of 37 closed/open questions was developed in English and French by a team of healthcare researchers. Content was informed by published surveys and studies. Email invitations were circulated to contacts in Health Trusts in UK and France ADAPT regions and the survey was hosted on an online platform. *Knowledge* questions addressed AT understanding and views of impact on user's lives. *Experience* questions focussed on current practices, prescription, follow-up, abandonment and practice standards. 429 HCPs completed the survey (UK=167; FR=262) between June and November 2018.

Key results: Participants were mainly female (UK 89.2%; FR 82.8%) and qualified 10+ years (UK 66.5%; FR 62.2%). A key group in both countries were OTs (UK 34.1%; FR 46.6%), with more physiotherapists and SLTs in UK (16.8%, 16.8%; Vs. FR 6.5%, 2.3%), and more nurses in France (22.1% Vs. UK 10.8%). More HCPs were qualified to degree level in France (75.2%; UK 48.5%, $p<0.001$).

In terms of knowledge, all HCPs agreed that AT helps people complete otherwise difficult or impossible tasks (UK 86.2%; FR 94.3%) and that successful AT adoption *always* depends on support from carers, family and professionals (UK 52.7%; FR 66.2%). There were some notable differences between countries that require further exploration. For example, more French HCPs thought that AT is provided by trial and error (84.7%, UK 45.5%, $p<0.001$), while more UK HCPs believed that AT promotes autonomous living (93.4%; FR 42.8%, $p<0.001$). Also, more French HCPs considered that AT refers exclusively to technologically-advanced electronic devices (71.8%, UK 28.8%, $p<0.001$).

In both countries, top AT prescribers were OTs, physiotherapists and SLTs. Respondents had little/no knowledge in comparing/choosing AT (UK 86.8%; FR 76.7%) and stated they would benefit from interdisciplinary clinical standards (UK 80.8%; FR 77.1%). A third of HCPs did not know if AT users had access to adequate resources/support (UK 34.1%; FR 27.5%) and rated themselves as capable to monitor continued effective use of AT (UK 38.9%; FR 34.8%).

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Conclusion: Knowledge and application of AT was varied between the two countries due to differences in health care provision and support mechanisms. Survey findings suggest that HCPs recognised the value of AT for users' improved care, but had low confidence in their ability to choose appropriate AT solutions and monitor continued use, and would welcome AT interdisciplinary clinical standards.

Keywords: survey of AT knowledge and practice experiences, healthcare professionals, UK, France

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Tweetable abstract: HCPs survey of AT knowledge and experiences suggests low confidence in ability to choose appropriate AT solutions and monitor continued AT use; HCPs would welcome AT interdisciplinary clinical standards
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