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# Clinical Program



# WEDNESDAY 18 MAY 2016

	ROOM 1	ROOM 2	ROOM 3	ROOM 4
9:15am – 10:00am	<b>Fitting the Wheelchair Like a Prosthetic</b> <i>Magdalena Love and Malene Ahen (Permobil USA and Australia)</i> 	<b>Addressing Sleep as an Allied Health Professional</b> <i>Bel Cobcroft (MS Society WA &amp; Cornwall House Occupational Therapy)</i>	<b>Supporting person-centred decision making in positioning and seating related technology selection</b> <i>Rachael Schmidt (Schmidt Consultancy)</i>	<b>Off the Shelf Custom Seating</b> <i>Andy O'Sullivan (Durable Medical Equipment)</i> 
10:45am – 11:15am	<b>Effective Solutions for Complex Postures</b> <i>Jacinta Maurin (Ottobock)</i>	<b>The use of and benefits of using power assist systems</b> <i>Sebastian Sitzler (Ulrich Alber GmbH)</i>  	<b>Are you NDIS ready? The challenging marriage of therapy and fee-for-service</b> <i>Janelle Johanson (Yooralla Health and Wellbeing)</i>	<b>Finding the Correct Physical Posture in Seating – Case Studies of Children with Different Diagnoses</b> <i>Andrea Espei (Schuchmann GmbH &amp; Co KG)</i> 
11:45am – 12:15pm	<b>International markets and local supply: which AT products get imported to Australia?</b> <i>Natasha Layton (ARATA)</i>	<b>Improvements in managing bladder and bowel continence</b> <i>Debbie Yates (Coloplast)</i> 	<b>Maximizing Propulsion Efficiency</b> <i>Angela Rankin (Motion Composites)</i>  	<b>Promoting neuroplasticity in rehabilitation</b> <i>Steve Woollard and Michael Nguyen (NeuroRehab Allied Health Network)</i>
1:15pm – 2:00pm	<b>The relevance and effects of shear forces on tissue integrity and the benefits of natural materials in controlling skin microclimate</b> <i>Dr Barend ter Haar (BES Rehab)</i> 	<b>Assessing for alternative drive</b> <i>Mark Scott (Stealth Products LLC)</i>	<b>I've brought up the topic, what now? Including sexual expression in healthcare practice: a simple guide.</b> <i>Narelle Higson (MS Society of WA, Outside the Square OT Solutions)</i>	<b>Manual Transfer: Protection, Dignity &amp; Natural Movement</b> <i>Annette Curry (Novis Healthcare)</i>
2:30pm – 3:00pm	<b>ReWalk Exoskeleton Demonstration</b> <i>Genny Kroll-Rosen (Making Strides)</i> 	<b>Living with Low Vision</b> <i>Stewart Andrews (Quantum RLV)</i>	<b>Patient Handling – A turn for the better</b> <i>Peter W Short (ProBed Medical Technologies Inc.)</i> 	<b>Body Support – A better way to transfer</b> <i>Frances Allen (Equip4Living)</i>
3:15pm – 4:00pm	<b>Role of OT in supporting new parents with disabilities pre and post birth</b> <i>Emelia Young (Yooralla)</i> 	<b>I've Been Everywhere Man</b> <i>Malcolm Turnbull (Permobil Australia)</i> 	<b>Unique clients, unique challenges: Successful equipment prescription for your geriatric patient</b> <i>Amy Bjornson (Sunrise Medical)</i>	<b>Postural Mat Assessment: Translating Body Dimensions into Support Surface Measures and Postural Asymmetries into Postural Support Surfaces. Clinical Application of the ISO Standardized Wheelchair Seating Measures of the Body and Seating Support Surfaces.</b> <i>Lois Brown (Invacare AUS)</i> 

# THURSDAY 19 MAY 2016

	ROOM 1	ROOM 2	ROOM 3	ROOM 4
9:15am – 10:00am	<b>Interface pressure mapping as a clinical assessment tool and patient monitoring device</b> <i>Karl Schilling (XSENSOR Technology Corporation)</i> 	<b>Effects of a short-term locomotor training program on mobility for people with spinal cord injuries</b> <i>Camila Quel de Oliveira (Spinal Cord Injuries Australia)</i>	<b>The importance of providing comprehensive quality information to consumers about assistive technology</b> <i>Susan Fleming (Yooralla - Independent Living Centre)</i> 	<b>Prescribing Sports Wheelchairs</b> <i>Jenni Dabelstein (Gizmo Rehabilitation) and Dion Reweti (Wicked Wheelchairs)</i> 
10:45am – 11:15am	<b>The Right wheelchair – choice, trade-offs and capability</b> <i>Ashley Daff (Magic Mobility)</i> 	<b>Positioning Children for Sleep</b> <i>Joelle Clamp (Ottobock)</i> 	<b>Sex Matters: a short chat about disability, health conditions and sexual challenges</b> <i>Narelle Higson (MS Society of WA, Outside the Square OT Solutions)</i> 	<b>A Review of using Restorative Bracing for Elderly Clients with Neurological Tone</b> <i>Amanda Hebben (Durable Medical Equipment) and Lyndal Millikan (Healthstrong)</i> 
11:45am – 12:30pm	<b>Clinical Application of the Dispersion Index</b> <i>Joan Padgitt (ATP Consulting)</i> 	<b>Shoulder pain is an epidemic: Let's talk about what we can do about it!</b> <i>Dr. Mark Richter (Max Mobility LLC)</i>   	<b>Design Features and Benefits from the Ground Up: Power Product Selection for Fit and Function</b> <i>Lois Brown (Invacare AUS)</i> 	<b>Go Baby Go – New Approaches to Facilitating Movement and Interaction in Young Children</b> <i>Amy Bjornson (Sunrise Medical) and Tracee-lee Maginnity (Astris Lifecare)</i> 
1:30pm – 2:15pm	<b>Power Seat Functions: Current Evidence and Innovations</b> <i>Magdalena Love (Permobil)</i> 	<b>Custom Tailored Manual Wheelchairs vs Adjustable Pro's vs Con's</b> <i>Amy Bjornson (Sunrise Medical)</i>	<b>Postural Control and Breathing</b> <i>Bente Storm (R82)</i> 	<b>Pressure Ulcer Etiology – It's Not All About Ischemia – What Is The New Evidence Telling Us?</b> <i>Darren Hammond (The ROHO Institute for Education at Permobil, Inc.)</i> 

 Consumer session     Paediatric session

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## WEDNESDAY 18 MAY 2016

### ROOM 1

 **9:15am – 10:00am**

#### **Fitting the Wheelchair Like a Prosthetic**

*Magdalena Love and Malene Ahern (Permobil)*

The Consortium of Spinal Cord Medicine published a set of clinical guidelines in 2005 entitled, "Preservation of Upper Limb Function Following Spinal Cord Injury: A Clinical Practice Guideline for Healthcare Professionals." This course will address recommendations in the guidelines that directly relate to the importance of properly fitting the wheelchair to the person – a customised fit to the unique measurements and needs of the individual. How an individual sits and fits in the wheelchair is a key predictor of safety, comfort and independence, and, over the long term, will impact the likelihood of secondary injuries. Thus, a wheelchair must be appropriately fitted to the person similar to fitting a prosthetic limb for an individual. This session will review fitting techniques across all dimensions (length, width, and height, wheelbase, functional footprint) and will include specific examples of setting front and rear seat height, frame depth, and seat width. Computer generated models will be used to provide concrete demonstrations of poor vs. proper fitting.

**10:45am – 11:15am**

#### **Effective Solutions for Complex Postures**

*Jacinta Maurin (Ottobock)*

This presentation will look at the seating challenges facing adolescents and young adults. Seating systems are aimed at providing an appropriate level of postural support for the individual user. Not only does the seating system offer comfort, but skin protection and stability as well. This session will cover the pro's and con's of moulded seating for complex postures, including innovative new methods of manufacturing moulded seating.

**11:45am – 12:15pm**

#### **International markets and local supply: which AT products get imported to Australia?**

*Natasha Layton (ARATA)*

International AT databases list many thousands of products. A subset of these are available in Australia, and a very small percentage available through State Equipment Funding Schemes. This presentation evaluates data from Rehacare 2015 one of the world's largest trade fairs for 'rehabilitation, prevention, inclusion and care. The perspectives of AT practitioners and AT consumers will be used to: Compare the range of AT solutions exhibited with AT options available in Australia; Identify AT solutions as yet under-supplied or unsupplied against ISO 9999 categories; Identify AT solutions which may address activity and participation needs of NDIS participants and other Australian consumers; Consider the barriers and facilitators involved in targeting AT products for import.

 **1:15pm – 2:00pm**

#### **The relevance and effects of shear forces on tissue integrity and the benefits of natural materials in controlling skin microclimate**

*Dr Barend ter Haar (BES Rehab)*

More damage is done as the result of shear forces acting on the cells in our skin than any other sources of attack on our skin integrity. This presentation explains the different effects created between the 'nasties' of friction, shear stress, shear strain, axial strain, and pressure.

Benefits of natural materials in controlling skin microclimate: These days it is appreciated that local conditions around the skin have more influence on skin health, than just 'pressure'. These influences include friction, shear, heat, and moisture. This short presentation looks at the benefits available from natural materials in managing skin health, as compared with man-made materials.

**C 2:30pm – 3:00pm**  
**ReWalk Exoskeleton Demonstration**

*Genny Kroll-Rosen (Making Strides)*

The ReWalk is a wearable, computer-controlled exoskeleton that enables people with lower limb paralysis to stand and walk using crutches to assist with balance. ReWalk users can autonomously determine walking initiation, speed and direction through a combination of controller commands and shifts in weight. The loss of upright mobility has a profound effect on the health and quality of life for individuals with a spinal cord injury. Paraplegia following SCI results in a variety of long-term medical complications, including lower extremity bone loss, pain, pressure ulcers, chronic sleep disturbances, urinary tract infections and difficulties with bladder and bowel evacuation. With the advent of new robotic technologies to assist motor complete paraplegics with standing and independent ambulation, walking can be more universally used to assess and maintain the health of individuals with SCI. Robotic-assisted walking can be incorporated into the rehabilitation regimen for people with a spinal cord injury, helping to maintain overall health and the specific health-related issues that result from loss of upright weight-bearing mobility.

**P 3.15pm – 4.00pm**  
**Role of OT in supporting new parents with disabilities pre and post birth**

*Emelia Young (Yooralla)*

Yooralla's community learning and living (CLL) team has in the last 3-4 years been receiving referrals for occupational therapy (OT) for new parents with disabilities. Referrals have been increasing and come from specialist outpatient midwifery clinics across Melbourne.

The new parents who have been referred have physical, intellectual and mental health type disabilities.

OTs aims to support new parents prior and after the birth of their newborn. This includes the assessment around their own disability, their functional abilities, mobility, changes to their activities of daily living, social supports, services and what newborn equipment has and needs to be purchased.

Typical interventions have involved modification to baby equipment with the assistance of SOLVE, home modifications, task modification and advocacy for ongoing supports.

This talk will explore the processes undertaken by our therapists in working with new parents with disabilities and their newborns. Case studies presented will demonstrate the variety of therapy interventions in addressing the unique needs of our clients.

## ROOM 2

**9:15am – 10:00am**  
**Addressing Sleep as an Allied Health Professional**

*Bel Cobcroft (MS Society WA & Cornwall House Occupational Therapy)*

Sleep in itself is an occupation essential to well-being and function. Poor sleep is a clinical feature of nearly all psychiatric conditions and many physical and neurological conditions; therefore many clients seen by Allied Health Professionals (AHP's) are potentially having sleep difficulties.


The session is focussed on recognising the impact of poor sleep for a population of people with MS, the need for assessment and intervention embedded in the foundations of occupational therapy.

In the past sleep quality has not been considered when looking at MS symptom management. However, sleep deprivation leads to a wide range of poorer physical and psychological outcomes in any population group.

Data collection demonstrated a significant relationship between MS, poor sleep, sleep disorders and symptoms such as fatigue, pain, cognition and the prevalence of anxiety and depression. MS Members also expressed the need for further assessment and intervention.

The MSWA Sleep Service was developed by an Occupational Therapist to address these needs.

The MSWA Sleep Advisory Service is part of a holistic approach in symptom management and lifestyle choices to assist MS Members in optimising their function and life participation. Data continues to be collected for future research and longitudinal studies. This services provides an example of clinical framework for AHP's to address sleep issues with their client groups.

 **10:45am – 11:15am**  
**The use of and benefits of using power assist systems**

**C**  
*Sebastian Sitzler (Ulrich Alber GmbH)*

Propelling a manual wheelchair presents risks and challenges that can accelerate deterioration of certain disabling conditions and exacerbate others, yet many users still prefer a manual wheelchair to powered mobility. This presentation will examine the results of a German survey into the user outcomes and benefits achieved by utilising power assist and power add on products to aid propulsion.

**C 11:45am – 12:15pm**  
**Improvements in managing bladder and bowel continence**

*Debbie Yates (Coloplast)*

Bowel and bladder function can be one of the biggest issues that affect people with disability, but also one of the least spoken about problems. When you cannot control your continence, it can be difficult to focus on anything else.

Technology and improvements in clinical practice over the last 20 years have opened up a new world of products which can help people with very intimate healthcare needs.

This presentation is aimed at showing consumers/carers how products for bladder and bowel continence have progressed.

Embracing consumer input, to produce better products for everyone. New technology can help increase discretion, improve your quality of life, reduce complications such as urinary tract infections, and help avoid embarrassing accidents.

**1.15pm – 2.00pm**  
**Assessing for Alternative Drive**  
*Mark Scott (Stealth Products LLC)*

In this session we will be going over possible solutions to consider when assessing a client for alternative driver controls. We will discuss key components of the client/caregiver interview when considering power and mobility. We will discuss sensory considerations when assessing for drive controls.

We will be identifying a variety of devices which can be used in conjunction with the in user's identified function.

We will then identify three proportional drive control systems as well as three non-proportional drive control systems.

Lastly we will identify and list different access sights of alternative drive controls for the in user.

**2:30pm – 3:00pm**

## **Living with Low Vision**

*Stewart Andrews (Quantum RLV)*

Low Vision is a term used to describe loss of vision beyond the point where glasses can no longer help. In Australia today there are an estimated 380,000 people with Low Vision. This number is expected to double by the year 2020 due to the general ageing of the population.

The largest single cause of Vision Loss is Age-Related Macular Degeneration (AMD). AMD involves the progressive loss of central vision, and approximately 75% of people are legally blind within 5 years of diagnosis. For some, loss of vision can occur over days or weeks. AMD does not result in total or 'black' blindness.

Research has shown us that Low Vision prevents healthy and independent ageing. A person with Low Vision is likely to have: Twice the risk of a fall; Three times the risk of depression; Four to eight times the risk of hip fractures; Admission to nursing homes three years early; Increased social dependence. Other eye conditions leading to Low Vision and legal blindness are; Cataract; Glaucoma; Diabetic Retinopathy

This presentation looks at the different types of technologies that assist people with Low Vision to continue to live independently. There are many 'low-tech' and inexpensive options as well as more sophisticated electronic options. While the different categories of assistive technology products will be discussed this is not a product presentation and is aimed at assisting people working in the field to better understand the ramifications of Low Vision.

**C 3:15pm - 4:00pm**

## **I've Been Everywhere Man**

*Malcolm Turnbull (Permobil Australia)*

For 35 years Malcolm has been a wheelchair user with a burning desire to see different cultures, see how far he could get and challenge his and others perception of wheelchair user limitations. This presentation will discuss the challenges of travel, the equipment that has helped Malcolm go places he didn't think he could, practical tips and a few of the funny and not funny things that have happened along the way.

## **ROOM 3**

**9:15AM – 10:00am**

## **Supporting person-centred decision making in positioning and seating related technology selection**

*Rachael Schmidt (Schmidt Consultancy)*

The clinical decision making process of providing appropriate 24 hour positioning management systems for complex mobility and postural needs is an acknowledged complex, multi-variant process. This presentation exposes the decision making processes involved in selecting assistive technology for holistic positioning and seated postural function (static and dynamic). Informed by findings of a qualitative study exploring Australian wheelchair seating service experiences (2010-2015) and recently augmented with a critical literature review, this presentation presents a critique of the available evidence regarding the effectiveness of 24 hour positioning and seating management, programming and intervention.

Within a National Disability Insurance Scheme environment, clinical reasoning informed by evidence-based data is promoted. The evidence supports a person-centred approach to the selection of appropriate services and assistive technology and

effectiveness is measured by enhanced personal participation. This presentation provides current evidence to assist designing of a clear clinical pathway that assists service providers and consumers effectively select appropriate positioning, postural and seating systems and related technologies, based on personal goals.

**10:45am – 11:15am**

## **Are you NDIS ready? The challenging marriage of therapy and fee-for-service**

*Janelle Johanson (Yooralla Health and Wellbeing)*

In Victoria, therapy services for people with complex disability were often block funded and provided in group settings. However as the National Disability Insurance Scheme (NDIS) commences its roll out, it is clear that a fee-for-service funding model will be used. In readiness for the NDIS, Yooralla developed a trial model of individual quoting and charging for therapy service. The type of therapy requests received were analysed, and factors impacting scope, extent of therapy input and time frames for service delivery were explored.

Therapists and customers face many challenges within the fee-for-service environment. A customer's physical, cognitive, social and environmental factors impact heavily on predicting therapy costs and outcomes. Prioritisation and clear articulation of goals is crucial to the costing process, but can be complicated by unidentified need due to therapy requests being driven by customers and planners. Technology and administrative support required to manage and track individual costing also influences the success of fee-for-service models.

Conceptualising therapy as an off-the-shelf product for purchase, while simple in theory, was not successful in the trial. Accurate needs analysis and quoting is multi-factorial, but attainable if systems are sensitive to the person's unique situation and preferences. Incorrect prediction of these factors will negatively impact the customer's engagement, success of therapy intervention and viability of the therapy service. Ongoing experience of working under the NDIS framework in addition to key learning and challenges identified in Yooralla's journey to a fee-for-service therapy model will be shared.

**C P 11:45am – 12:15pm**

## **Maximizing Propulsion Efficiency**

*Angela Rankin (Motion Composites)*

When you consider the energy required to propel every day in a manual wheelchair, and the forces that impact the upper extremity, it is necessary to consider the importance of propulsion efficiency. A wheelchair user who can propel efficiently will be able to push farther, have more energy, and function throughout the day. But, how can clinicians help improve efficiency?

There are a variety of factors that clinicians can impact to assist the user. It starts with wheelchair frame selection and wheelchair configuration. But, it doesn't stop there. The clinician should also be prepared to assess propulsion technique and provide instruction on the method that is most likely to protect the upper extremities and allow the user to easily traverse his/her environment. A comprehensive plan should be made to assess efficiency when a manual wheelchair is delivered.

This presentation will review important upper extremity research, discuss the importance of propulsion technique and wheelchair configuration, and discuss how the construction and design of the wheelchair frame can contribute to better efficiency. The goal is to maximise function and help clients maintain quality of life.

**1:15pm – 2:00pm**

**I've brought up the topic, what now? Including sexual expression in healthcare practice: a simple guide.**

*Narelle Higson (MS Society of WA, Outside the Square OT Solutions)*

Many people experience challenges related to sexual expression as a result of living with disability/health conditions. Although many health professionals consider sexuality to be an integral part of being human and therefore an important part of holistic health care, there are many reasons why this area is often left out of routine daily practice. This presentation will outline some simple steps and strategies that can be taken to increase the confidence and competence of all healthcare team members when supporting the area of sexual health and expression. Common barriers to participation will be identified, together with useful strategies to assist in problem solving solutions.

 **2:30pm – 3:00pm**

**Patient Handling – A turn for the better**

*Peter W Short (ProBed Medical Technologies Inc.)*

Immobility poses many problems for medical professionals and caregivers. Immobile patients require frequent repositioning to avoid the incidence of pressure sores and to reduce the risk of pulmonary problems and pneumonia.

The “norm” for repositioning has long been accepted as a minimum of once every two hours but this schedule does not properly address the previously mentioned issues. Additionally, the manual repositioning of patients is a leading cause of back injuries to nurses and caregivers. In our home province of British Columbia the Workers' Compensation Board cites manual turning as being responsible for approximately 60% of caregiver back injuries.

More frequent manual repositioning requires additional staff or adding to the workload of existing staff members, potentially limiting their ability to carry out other functions.

The use of various types of alternative mattresses, such as low air-loss or alternating air pressure mattresses partially address this issue. However, significantly increasing the frequency of turning in a safe, accurate and comfortable way, while enabling patients to sleep through the rotations, results in better overall health. This presentation will look at means to eliminate manual turning in home care to allow family members to get a full night's sleep, thus ensuring better health for all.

**3:15pm – 4:00pm**

**Unique clients, unique challenges: Successful equipment prescription for your geriatric patient**

*Amy Bjornson (Sunrise Medical)*

Geriatrics is a growing segment within the disability community and presents unique challenges which must be considered when prescribing equipment for this population.

This presentation will address strategies to provide useful, functional and cost effective seating and wheelchair mobility devices within the elderly population. Strategies for performing postural evaluations in the home will be discussed. The session will also translate assessment information into workable equipment solutions that meet both functional needs and funding criteria.

## ROOM 4



**9:15am – 10:00am**

**Off the Shelf Custom Seating**

*Andy O'Sullivan (Durable Medical Equipment Ltd. Pty)*

Producing solutions at the front end that may also be adapted to clients changing needs in a cost effective manner is becoming critical under new funding models.

This presentation will centre on meeting the ever changing needs of clients in a short time frame and allows for the customisation of seating products over time to minimise rebuilds and the damage done whilst waiting for seating system review.

Setting accurate goals for what the seating needs to deliver is paramount to successful outcomes – and is the basis of deciding on the blank canvas you need to start building the seating to meet those goals.

Whilst most seating is a snapshot of the current condition the ability to customise products over time reduce dramatically the costs in time, money and more importantly the risk to the client.

This methodology increases the ability of Therapists to solve more complex seating problems without referral and delays in sending clients to clinics [there will always be clients who need this form of extreme seating though] – or allow clinics to spend less time per client in delivering quality seating outcomes.

Andy will use a range of solutions to show how this can be done in situ economically in terms of time and costs – and deliver long term seating solutions.



**10:45am – 11:15am**

**Finding the Correct Physical Posture in Seating – Case Studies of Children with Different Diagnoses**

*Andrea Espei (Schuchmann GmbH & Co KG)*

For most children with a disability, sitting is an activity than changes throughout the day. But as we all know, sitting is a posture which is not profitable for the human body. Comparing the benefits of sitting and the disadvantageous consequences, we have to find individual solutions for every child. Important aspects have to be compared:

- The physical correct posture
- The variability during the day for different tasks
- The possibility to play with peers
- To choose the right therapy chair

This session is case studies of several children with different diagnosis (Cerebral Palsy, Down Syndrome, Development Disorder, etc).

Starting with finding out what the child wants to do or has to do while seating, Andrea follows a structured process to find the best seating posture possible. The ICF (International Classification of Functioning disability and health) is used as a framework to put all the aspects concerning the therapy chair, and to hear what all people (child, family, care givers, therapist, teachers and doctors) who are concerned, have a say.

**11:45am – 12:15pm**

**Promoting Neuroplasticity in Rehabilitation**

*Steve Woollard & Michael Nguyen (NeuroRehab Allied Health Network)*

Neuroplasticity is the ability of neurons to make or break connections with each other in response to changes in behaviour or function. In rehabilitation following neurological injury it is a crucial process to enable recovery of motor control and function.

In this session, senior clinician neurological Physiotherapists,

Steve Woollard and Michael Nguyen from NeuroRehab Allied Health Network will provide an introduction to and demonstration of some of the latest adjuncts to promote neuroplasticity they use along side their physical rehabilitation programs. These adjuncts include: Transcranial Direct Current Stimulation, Photobiomodulation (low level light therapy), the role of cardiovascular exercise in neuroplasticity, and laterality training.

**1:15pm – 2:00pm**

**Manual Transfer: Protection, Dignity & Natural Movement**  
*Annette Curry (Novis Healthcare)*

The aging population of Australia will place ever increasing pressures on our healthcare system over the next few decades. It is therefore important that we actively prevent unnecessary injury to care staff and patients.

In situations where the patient has limited ability to move, assisted transfers will be required, but should always be conducted in such a way as to reduce shear and preserve functionality whilst maintaining the dignity, independence and safety of the assisted person.

The goal of this session is to demonstrate how to utilise various transfer systems and techniques to facilitate movement, without risk of injury to the carer or assisted person. The training will include normal body movement, ergonomics and physiology, with a combination of working positions, environmental factors and equipment, whilst paying special attention to the prevention of pressure injuries and the safety of the carer.

**2:30pm – 3:00pm**

**Body Support – A better way to transfer**  
*Frances Allen (Equip4Living)*

The aim of this presentation is to review evidence based literature focused on pressure care and patient injuries impacted from transfer. Individual case studies will be presented on how patients and carers address these issues by altering their transfer techniques to achieve independence and autonomy in their manual handling and more importantly their life. Discussion will also consider the risk assessment protocol, 'Hazardous manual tasks code of practice 2011' to compare different transfer techniques in regards to risk of injury to patients and carers through the use of a body support system.

 **3:15pm - 4:00pm**

**Postural Mat Assessment: Translating Body Dimensions into Support Surface Measures and Postural Asymmetries into Postural Support Surfaces. Clinical Application of the ISO Standardised Wheelchair Seating Measures of the Body and Seating Support Surfaces.**

*Lois Brown (Invacare AUS)*

Accurate measurement and description of body dimensions and postural asymmetries are paramount to matching the individual to the mobility device, the angles and shape of frame/base and support surfaces. This can only be accurately accomplished with the individual on a solid support surface, thus a Mat Assessment. Angular and linear measures of the body are taken and compared to measures of the base and support surfaces. Postural assessment on a level support surface (Mat table) is necessary to determine the features of the wheelchair seated posture and potential body support surfaces for the individual. Tools for measurement will be discussed. The attendee should leave the session with a clear understanding of the differences in body dimensions and support surface dimensions.





THURSDAY 14 MAY 2015

## ROOM 1



9:15am – 10:00am

### Interface pressure mapping as a clinical assessment tool and patient monitoring device

Karl Schilling (XSENSOR Technology Corporation)

This interactive session will discuss the clinical applications of interface pressure mapping and explore latest developments in the world of pressure imaging from clinical assessment tools in a rehabilitation setting to the monitoring of immobile patients on turning regimes. XSENSOR Technology has been working with clinicians and researchers in healthcare to provide pressure imaging tools to assist in effective pressure ulcer prevention and management. Karl will be providing practical tips for using interface pressure mapping and a live demonstration on how new advances help clinicians with seating assessments and patient/caregiver education. Karl will also demonstrate how to implement pressure monitoring into the care of immobile patients which requires turning regimes.



10:45am – 11:15am

### The Right wheelchair – choice, trade-offs and capability

Ashley Daff (Magic Mobility)

The NDIS is opening up choice and so clinicians and wheelchair users need to adopt a new approach to choosing the right powered wheelchair. This paper proposes a set of principles that will help them collaborate effectively to define the right wheelchair, and outlines a simple decision making approach based on assessing the opportunity costs of capability enabling features.

The presentation will explain why this sort of approach is key to enabling wheelchair users and their families to understand the trade-offs between spending on capability enabling equipment, versus other forms of support available under an NDIS funding package. It will also highlight the vital role of wheelchair design experts in helping users to understand the capability enabling potential of the right wheelchair, to complement a therapists' role in assessing their bio-physical and physiological requirements.



11:45am – 12:30pm

### Clinical Application of the Dispersion Index

Joan Padgitt (ATP Consulting)

Interface pressure mapping (IPM) has long been utilised in wheelchair clinics during wheelchair seating assessments to determine where the bias of pressures are exerted by the wheelchair user at the seat cushion interface. These singular peak pressure readings, although useful for patient education, cannot be utilized to determine if the wheelchair cushion will safely protect skin integrity of the sitter.

Sprigle, et al studied reliable, repeatable metrics for IPM including peak pressure index (PPI), symmetry and contact area. The dispersion index (DI) is another metric reported by Sprigle to have good reliability. The dispersion index is defined as the sum of pressure distributed over the IT and sacral regions (pelvic box) divided by the sum of the pressure readings over the entire mat, expressed as a percentage. The lower the DI the higher the skin protection of the at-risk bony prominences in the pelvic box. Drummond et al found that "unacceptable" interface pressures occurred when greater than 55% of the sitter's pressure was through the IT and sacral regions.

The dispersion index is currently being utilised in wheelchair clinics for funding justification, wheelchair user education and in medical record documentation. It can be easily calculated using

"regional distributions" found on both the Force Sensor Array (FSA) and XSensor IPM software.

The dispersion index is a validated, reliable formula/method that can be easily utilised in wheelchair clinic interface pressure mapping assessments to help forecast if a wheelchair cushion will safely protect the skin integrity of the user.



1:30pm – 2:15pm

### Power Seat Functions: Current Evidence and Innovations

Magdalena Love (Permobil)

Power seating is often prescribed to manage the risk of pressure ulcers, a potentially serious complication for individuals who use wheelchairs. There is much evidence suggesting the use of power seat functions will reduce the risk of pressure ulcers; however, clinicians sometimes have negative perceptions about the use of certain seat functions or are unaware of the functional outcomes that powered seating can provide. The purpose of this course is to examine the current power seat functions available and discuss their functional impact on an individual's health, independence, and quality of life. Special emphasis will be placed on current research in power seat function usage and efficacy. Through evidence-based holistic assessment, attendees will better understand the medical and functional implications of each seat function. Additionally, information on justifying these features to common funding sources will be discussed. Time will also be allotted for audience participation, discussion, and equipment demonstration.

## ROOM 2

9:15am – 10:00am

### Effects of a short-term locomotor training program on mobility for people with spinal cord injuries

Camila Quel de Oliveira (Spinal Cord Injuries Australia)

Locomotor Training is an activity-based intervention that aims to activate the neuromuscular system below the site of a spinal cord injury. There is mounting evidence from studies conducted in the United States about the benefits of locomotor training in postural control, mobility, standing and walk, especially for people with incomplete injuries. Most of studies suggest that in order to achieve mobility and recovery outcomes, locomotor training should be delivered in a frequency of 4-5 times per week with duration of 60 to 100 sessions.

Based on that, the aim of the present study was to investigate the effects of a short-term locomotor training program, containing 16 sessions over a month, on general mobility, independence and quality of life.

At the present moment, one subject has completed the research protocol and presented improvements in the ability to stand and balance. Two more subjects have already enrolled the program and will finish data collection by January 2016.

The objective of this presentation is to discuss the principles of locomotor training as an intervention to promote recovery after a spinal cord injury, review the current evidence and present the data from the short-term pilot trial mentioned above.



10:45am – 11:15am

### Positioning Children for Sleep

Joelle Clamp (Ottobock)

Sleep allows your mind and body to recover, and prepare for the next day.

Unfortunately, children with disabilities often have disrupted sleep, which results in difficulty learning, playing and participating in daily routines. It is often night time discomfort and postural problems, which can prevent or disrupt sleep. Sleep positioning devices aim to assist in controlling posture, enabling children and their families to get a good night's sleep. By the end of the session participants will:

- Understand the importance of 24 hour positioning and postural care.
- Be provided with general guidelines in assessing for sleep positioning systems.
- Identify factors to be considered when selecting a sleep positioning system.

A practical session on setting up a sleep system, will conclude the session.



**11:45am – 12:30pm**

**Shoulder pain is an epidemic: Let's talk about what we can do about it!**

*Dr. Mark Richter (Max Mobility LLC)*



Pushing a wheelchair is hazardous to your health. Nearly 3 out of every 4 wheelchair users have shoulder pain. That is a staggering percentage. The old saying "Use it or lose it" does not apply any longer. Now we must be careful and take steps to reduce stress on the shoulder if we want to keep it healthy. Dr Richter like to use a new saying "Use it, but don't abuse it". He will review the things you should know to help prevent shoulder problems, including wheelchair setup, propulsion technique, and ergonomic technology.

**1:30pm – 2:15pm**

**Custom Tailored Manual Wheelchairs vs Adjustable; Pro's vs Con's**

*Amy Bjornson (Sunrise Medical)*

Most daily use manual wheelchairs have a fair level of adjustability built in. After manufacture, angles and heights of the wheelchair and its parts can be adjusted. However, more active clients are increasingly requesting a more custom tailored wheelchair to increase efficiency and reduce weight. Successful prescription of these custom chairs requires a detailed evaluation and thorough discussion with the client about their individual needs. This session will look at the difference between adjustable manual wheelchairs and bespoke wheelchairs: the impact on function and performance. We'll also detail the key measurements and selection of crucial components to create a successful custom product.

comprehensive accessible, accurate and impartial information about AT to consumers, their families, carers, support workers and allied health professionals to help navigate the choices available. The selection of the most functionally suitable AT not only is more likely to help a person achieve their goals; research indicates it will also reduce the likelihood of AT abandonment and contribute significantly to delivering sustainable and cost-effective AT solutions. Well-informed allied health professionals are also more able to provide professional and ethical service to their clients.



**10:45am – 11:15am**

**Sex Matters: a short chat about disability, health conditions and sexual challenges**

*Narelle Higson (MS Society of WA, Outside the Square OT Solutions)*

Although not often openly discussed, many people experience challenges with sexual function and participating as they would like in sexual or intimate activities, alone or with others. Disability, health conditions or the treatment for these conditions can sometimes introduce new challenges. This light-hearted yet informative presentation will be given by an occupational therapist that has spent the last few years working in the area of sexuality with people living with neurological conditions and physical disability. It will outline some common concerns, barriers and challenges related to sexual expression and provide a starting point for addressing these with ideas, resources and strategies to seek assistance from your friendly health professional.



**11:45am – 12:30pm**

**Design Features and Benefits from the Ground Up: Power Product Selection for Fit and Function**

*Lois Brown (Invacare AUS)*

One size, one shape does not fit all! If one considers the power mobility base, seat system and support surfaces to be in essence a prosthesis, or sport specific shoe then the individuals postural needs, body dimensions, and functional mobility needs determine what product design, features and benefits will best meet their needs. Power base configuration, seat module and the support surfaces all have unique design features and when selected and configured provide performance, fit and function for each unique individual. The differentiating features of each of the components and the affect on physical symptoms such as tone/spasticity and postural stability will be discussed in order to create a final prescription for the mobility user.



**1:30pm – 2:15pm**

**Postural control and breathing**

*Bente Storm (R82)*

What is postural Control and how can we test it? How can breathing influence postural control and how can postural control influence breathing? This presentation focusses on the SATCo test and theories from Mary Massery.

## ROOM 3

**9:15am – 10:00am**

**The importance of providing comprehensive quality information to consumers about assistive technology**

*Susan Fleming (Yooralla - Independent Living Centre)*

The progressive introduction of the NDIS for people with a disability and the move toward a consumer-directed care model for aged care services means that end-users will increasingly be more directly involved in making choices about the assistive technology (AT) that they will be using.

In the global market there are many sources of sometimes conflicting information about AT, including suppliers/manufacturers/sales people, online forums and allied health providers, some of whom may have a vested interest in influencing a consumer's choice/s.

This presentation will outline the importance of providing

## ROOM 4

**9:15am – 10:00am**

**Prescribing Sports Wheelchairs**

*Jenni Dabelstein (Gizmo Rehabilitation) and Dion Reweti (Wicked Wheelchairs)*

In contrast to day use chairs, which are typically designed to

meet a wide range of functional, mobility and environmental requirements, sports wheelchairs are designed to closely match a narrowly defined range of functions within a sporting context. Successful prescription of sports wheelchairs requires a strong partnership between the athlete, who knows their game, the prescriber, who must analyse how to tailor the wheelchair to best meet the athlete's physical and activity requirements, and the wheelchair vendor, who must assist both to translate the relevant information into a final wheelchair prescription, an end product that will usually be both highly individual and minimally adjustable.

This session will explore how to successfully leverage the experience and knowledge of all three parties to prescribe and deliver successful sporting products.

 **10:45am – 11:15am**

### **A Review of using Restorative Bracing for Elderly Clients with Neurological Tone**

*Amanda Hebben (Durable Medical Equipment) and Lyndal Millikan (Healthstrong)*

Restorative Medical products work with a client's neurological tone allowing muscles to work through tonal episodes and come to a relaxation point. Muscle fibres can then be lengthened over time, reversing and stopping shortened tissue damage and increasing ROM, comfort and reducing pain. Managing neurological tone that has developed over years, or been neglected for years, is a challenging task. Elderly clients with neurological conditions such as CVA, MND, Dementia and many more are reaping the benefits of Restorative Splinting with the Healthstrong Therapy Team. This presentation will review the mechanics of why "flex" technology relaxes tone. Amanda and Lyndal will also look at some case studies where the flex system has been implemented in an aged care setting and the impacts this has on the residents and their quality of life.

**P 11:45am – 12:30pm**

### **Go Baby Go – New Approaches to Facilitating Movement and Interaction in Young Children**

*Amy Bjornson (Sunrise Medical) and Tracee-lee Maginnity (Astris Lifecare)*

GoBabyGo Australia is adapting ride-in toy cars so kids can have a little fun. We all know kids learn by DOING and EXPLORING so this program aims to encourage self initiated movement and choice, developing spatial awareness and other movement related skills. This workshop will discuss the GoBabyGo program in Australia – how toy cars are adapted to provide postural support, modified for activation and how your clients can get involved in the program.

 **1:30pm – 2:15pm**

### **Pressure Ulcer Etiology – It's Not All About Ischemia – What Is The New Evidence Telling Us?**

*Darren Hammond (The ROHO Institute for Education Permobil)*

Historically, pressure ulcer etiology has revolved around ischemic changes in the skin, and soft tissue. However, recent evidence has been introduced where tissue deformation of the skin and soft tissue has earlier implications in pressure ulcer development versus just ischemia alone.

Currently there are various levels of clinical knowledge and experience in the allied healthcare community when it comes to understanding pressure ulcer etiology and appropriate management strategies. Unfortunately, most clinicians who are actively participating in wound management, do not

have the skill set in understanding the pathophysiology of pressure ulcers. There is also a lack of clear understanding of the extrinsic and intrinsic risks which need to be correctly managed for successful outcomes.

This interactive session will review the current best evidence of pressure ulcer pathophysiology including ischemia, reperfusion tissue injury and tissue deformation. Discussions will revolve around the differences in the development of a superficial pressure ulcer versus a suspected deep tissue injury. In addition, the intrinsic and extrinsic risk factors commonly associated with pressure ulcers will also be discussed along with strategies to minimize the risks.

## ACCOMMODATION

If you're travelling from interstate there are a number of accommodation options nearby for the ATSA Independent Living Expo. Visit our website to view a list of hotels, and to book online. [www.atsaindependentlivingexpo.com.au/accommodation](http://www.atsaindependentlivingexpo.com.au/accommodation).



## GETTING THERE

Located just 7km from Melbourne CBD and 15 minutes from Melbourne Airport, Melbourne Showgrounds is easily accessible by public transport or car. Pre-register now for the ATSA Independent Living Expo for free parking on the day.



**Bus** - Bus No. 472 (Williamstown to Moonee Ponds) stops along Langs Road. Bus No. 404 (Footscray to Moonee Ponds) stops on the corner of Epsom and Ascot Vale Roads.



**Tram** - Route 57 tram (West Maribyrnong to Elizabeth Street, City), stops at stop 32 (Showgrounds Village Shopping Centre on Epsom Road).

**Free shuttle:** a free shuttle will be available on both event days. Check the website closer to the date for timings and pick up location.



## MORE THAN 100 EXHIBITORS ALREADY CONFIRMED

For complete exhibitor visit [www.atsaindependentlivingexpo.com.au](http://www.atsaindependentlivingexpo.com.au)

- Able Life
- AC Mobility
- Access Health Pty Ltd
- Acorn Stairlifts
- Active Mobility
- Advance Mobility
- Aidacare
- Aikidos Scooter & Electric Wheelchair Carrier
- Allegro Concepts P/L
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- Astec Equipment Services
- Automobility
- Awsum Assistive Technology Group
- Blue Badge Insurance
- BrightSky Australia
- Canterbury Concepts
- Capital Special Vehicles
- Clubmates Travel
- Country Care Group
- Dejay Medical
- Deutscher Healthcare
- DoAbility
- Dreamline Wheelchair Seating
- Drive Medical Limited
- DRP International Healthcare
- Durable Medical Equipment
- Eden Healthcare Solutions
- Everyday Independence & Australian RehabWorks
- Feel Good Massage Chairs
- Fondlight
- Freedom Healthcare
- Freedom Motors
- Geelong Wheelchair Service
- GSM Rehabilitation
- Handi-Rehab
- Healthcare Innovations Australia
- HMR Healthcare Pty Ltd
- Import Auto Centre
- Independent Living Centre
- Independent Living Specialists
- Inimove
- Innovation Square
- INNOVO Healthcare
- Invacare Australia Pty Ltd
- Jadco Time
- JD Healthcare
- K Care Healthcare Equipment
- Karma Wheelchairs Australia
- Life Mobility
- Linak Australia
- Linds Rehabilitation Equipment
- Littlem
- Lodgesons Ltd
- Mac Med Healthcare
- Magic Mobility
- Making Strides
- Max Mobility
- Medifab Ltd
- Medix 21 Australia
- Melrose Wheelchairs
- Middy's Smart Centre
- Mobility Access Modification
- Mobility Aids Australia Pty Ltd
- Mobility Engineering
- Mobility Plus Wheelchairs Pty Ltd
- MobilityCare
- Motion Wheelchairs
- MPS (Megalong Positioning Service)
- NeuroRehab Allied Health Network
- Novis Healthcare
- Ortho-Tex Pty Ltd
- Otto Bock Australia Pty Ltd
- Para Mobility
- Paragon Mobility
- Patient Handling Australia
- Permobil Australia Pty Ltd
- Personal Independence Providers
- PME Group
- Postural Innovations
- Prammar Pty Ltd
- Pride Mobility Products Australia Pty Ltd
- Push Mobility
- Quantum Reading, Learning, Vision
- Quantum Rehab
- R82 Australia
- Regal Electro
- Revitalife
- SafeSip
- Scooters & Mobility
- Scooter World
- Sensory Calm
- Shiny Health Import & Export Co Pty Ltd
- Sleep Doctor
- Solve Disability Solutions Inc
- Spinal Cord Injuries Australia
- Splittbacks and Adaptive Kidz
- Sunrise Medical Pty Ltd
- Tab Timer
- The Rehabilitation Centre
- Total Ability
- Tyrex Solution Pty Ltd
- Walk on Wheels Australia Pty Ltd
- Wheelies Van Rentals
- YMCA Victoria

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