Integrated access

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Summary
Case study examples outlining the technical and clinical challenges of successfully integrating powered wheelchair and communication controls. Session aims to share and improve practice.

Aims & Objectives
We aim to share our knowledge and experience of integrating controls for those with complex needs, where standard off the shelf equipment and configurations have sometimes not been appropriate.

We would then like to open for discussion with the audience, for others to share their practice and collectively review how integrated control provision could be improved.

Background
We have seen a number of complex clients requiring integrated controls, including those who use a single switch to both drive and communicate, a client who's control method is to sip only, and clients using a number of switches for driving and accessing communication.

Such integrated control configurations can be complex, requiring a high level of cognition for the user to operate them. Furthermore, the motor skills required to operate wheelchair controls can be significantly different from those needed to access a communication aid, therefore optimising the setup for each of these functions can be difficult.

The provision of integrated controls also often involves more than one service, commonly: wheelchair services, specialist communication aid services and environmental control services, which can create a blurry line for responsibility to maintain and repair equipment.

In addition to this we have found technical difficulties regarding hardware availability and compatibility to achieve the setup required to match clients' needs.

From problem solving through individual cases we have identified some solutions to enhance the integrated control setup, for differing wheelchair control systems. However, sometimes we have not been able to meet client needs.

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