A CLINICAL COLLABORATION OF SEATING SERVICE PROVIDERS: ON THE ROAD TO BEST PRACTICE

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Introduction
For the past several years, the Parkwood and Hamilton Health Sciences (HHS) Seating Programs in southern Ontario have held annual meetings during which our service delivery and professional practice models have been compared and contrasted. The general purpose of the meetings has been for information sharing and professional support. Over the past year, this relationship has evolved into a more focused effort to identify and confirm commonalities and to establish similar effective practices.

The reason we have established a more formal collaboration is quite simple. In this age of ever-shrinking health care dollars where funding models change with all too much frequency and the ongoing funding is never guaranteed, we wanted to find a way to standardize our methods of collecting data regarding our clinic service delivery operations, from assessment through intervention and discharge. Ultimately, developing targets for service delivery will enable clinicians in seating and mobility practice to measure outcomes against a standard to assist with justifying ongoing funding of the clinic as a model of service delivery. Additionally, the collaboration will allow this group of experienced clinicians to work together to influence the establishment of best practices for seating and mobility. The clinics have identified the following key components to collaboration.

Collaboration of Knowledge
We acknowledged the importance of identifying clinicians practicing with clients of similar complexity by:

- Providing an opportunity for shared reflection of complex case scenarios thus fostering skill development through shared clinical reasoning;
- Optimizing networking opportunities through clinical discussion at conferences about clinical cases with similar problems and scenarios;
- Fostering clinical collaboration through joint clinic days where client assessments are undertaken by clinicians from both sites as well as manufacturers and vendors representatives.

Collaboration for Development of Service Delivery Targets

More and more, the Ministry of Health directs funding based on evidence of improved patient flow. Each clinic has been using different methods to monitor key data related to patient flow, but without comparators. Sharing information and integrating into practice comparators to establish service delivery targets is essential to measure our outcomes and to be efficient and effective. Therefore our clinics have begun this process by:

- Sharing current data collection parameters such as patient information/demographics, length of timelines; service avenues.
- Identifying commonalities and missing elements in both service delivery practices. Parkwood has a more formalized tool with established targets which has been refined over the past few years. Sharing this tool with HHS has enabled both clinics to collect similar data to facilitate the development of collaborative service delivery targets.
Evolving Practice – Building Capacity

The practice of seating and mobility is more than technical skills; it is the marriage of clinical reasoning and technical creativity. As clinicians we are committed to ensuring the best possible outcomes for our clients. Exploration of current available clinical and best practice guidelines has been initiated and, we are looking at ways of adopting new approaches to continue the evolution of our practices. Contributions to this evolution includes:

- Utilizing the common language published in “A Clinical Application Guide To Standardized Wheelchair Seating Measures Of The Body And Seating Support Surfaces” to:
  - standardize assessment approaches and clinical documentation;
  - facilitate communication with clinicians/vendors/manufacturers;
  - establish common parameters for data collection
- Exploring opportunities for professional connections
  - Linkages between University and clinicians;
  - Developing clinical mentor/colleague linkages;
  - Expanding professional practice networking;
- Working towards establishment and adoption of existing best practice guidelines to shape our future standards of practice from work to regulatory environments in the area of wheelchair and seating.

Conclusion

Establishing formal collaboration between our two seating clinics has provided opportunities to advance our own knowledge, and skills in relation to clinical practice and service delivery in the field of complex wheelchair and seating. The goal of this workshop is to share these experiences to continue the conversation regarding fiscal responsibility in delivering best practice and service delivery targets with others.

References


Glossary of Wheelchair Terms and Definitions. Waugh, Kelly; Crane, Barbara; Saftler Savage, Faith; Davis, Kim; Johnson Taylor, Susan; Cwiertnia, Susan; Brown, Lois; Christie, Susan. University of Colorado/Assistive Technology Partners. December 2013


Speaker Bio

Susan Moir is an Occupational Therapist on the Adult Wheelchair and Seating Program at St. Joseph’s Health Care London, Ontario at the Parkwood Hospital site. She has been employed at Parkwood Hospital for over 25 years in various clinical positions in rehabilitation, primarily the Spinal Cord Injury Program. She joined the Wheelchair and Seating Program full-time in July 2000. Her
clinical duties specialize in the assessment and prescription of complex wheelchair and seating equipment.

Laura Titus is an Occupational Therapist with over 25 years of clinical experience in the area of wheelchair and seating for adults with complex seating needs across a wide variety of diagnoses in both hospital and community settings. She is currently working on the Adult Wheelchair and Seating Program at St. Joseph’s Health Care London, Ontario at the Parkwood Hospital site. Laura has a PhD from the Health and Rehab Sciences Program (Occupational Science) at Western University, London Ontario.

Deborah Cox is an Occupational Therapist practicing in the Hamilton Health Sciences Adult Wheelchair and Seating Clinic. Deborah has provided seating and mobility solutions for over 18 years to clients with complex needs. Additional clinical experiences include SCI rehabilitation and complex continuing care. In addition to her clinical responsibilities, Deborah also provides education to the OT students at McMaster University.

Tricia Illman is an Occupational Therapist practicing in the Hamilton Health Sciences Adult Wheelchair and Seating Clinic. Tricia has provided seating and mobility solutions for over 19 years to client with complex needs. Additional clinical experiences include SCI/ABI rehabilitation and complex continuing care. In addition to her clinical responsibilities, Tricia also provides education to the OT students at McMaster University and also to the OTA/PTA students as Mohawk College in Hamilton.

Diane Tait has worked in the field of seating and mobility for more than 30 years across the health care continuum from acute to chronic care, including inpatient, outpatient and community settings. Currently she is part of the Adult Wheelchair and Seating Clinic team at Hamilton Health Sciences with a secondment to a 210 bed LTC 2 days per week. She is also a consultant for an Occupational Therapy Private Practice, primarily addressing the seating and mobility needs of clients with ABI. Diane has been part of the CSMC planning and advisory committees since 1990, sharing her vision for best practices in seating and mobility. She is a recipient of the Mundy Award and holds a Professional Associate appointment in the School of Rehabilitation Sciences at McMaster University where she is involved in the education of future OTs.