

Mentoring for Intermediate Level Wheelchair Service Providers

Mary Goldberg, PhD and Alexandria Miles, M.Ed. International Society of Wheelchair Professionals University of Pittsburgh School of Health and Rehabilitation Sciences





Ability Meets Mobility









Please raise your hand if...

- You have a primary mentor?
- You have more than one mentor?
- You have one or more mentees?
- You are completely satisfied with your mentoring relationships?









Mentors can help us realize our full potential!

• We have:

Well-developed systems for detecting deficiencies Good methods for remediating deficiencies

We need:

A complement to leverage individual capability—MENTORING!









Learning Objectives

- 1.Recognize the important role of mentoring in competency and skill development to facilitate appropriate wheelchair services
- 2.Describe different types of mentoring approaches to fit organizational and mentor/mentee needs
- 3.Evaluate the development and use of ISWP's mentoring initiative, while demonstrating how to adapt and apply it to enhanced practice in participants' own organization









Small Group Questions

- Reflecting on your career path, what is the best mentoring you have ever received? What made it so effective?
- Reflect on obstacles, difficulties and gaps you have experienced in your mentoring relationships (either as a mentor or mentee)









Mentoring is impactful

- Higher job satisfaction
- Greater self-esteem
- Greater organizational commitment
- Greater perception of promotion opportunities
- Lower work stress
- Lower work—family conflict

Underhill, 2005









Advisor

Advocate

Ally

Challenger

Cheerleader

Coach

Confidant

Consultant

Counselor

Door-opener

Exemplar

Eye-opener

Facilitator

Fan

Feedback-giver

Groom

Guide

Guru

Idea-bouncer

Information broker

Inspirer

Investor

Master

Monitor

Nurturer

Political strategist

Preceptor

Problem-solver

Reality checker

Referee

Role model

Specialist

Sponsor

Standard-prodder

Supporter

Teacher

Troubleshooter

Tutor

Wisdom keeper







What is a mentor?



A mentor is like a guide on a journey. During the trip the mentor carries out three functions: (a) pointing the way, (b) offering support, and (c) challenging.

Daloz, 1983









An effective mentor has key attributes

- Experienced
- High integrity
- Enjoys their professional role(s)
- Shares common background/goals
- Willing to invest in others
- Optimistic









A mentor is a guide

- Imparts professional skills
- Encourages strategic thinking about organizations and careers
- Helps mentee reflect on how their behaviors help or hinder success and how to learn from failures
- Asks challenging questions









A mentor is an ally

- Provides safe place
- Helps mentee see how others perceive him/her
- Offers specific feedback and impressions









A mentor is an advocate

- Champions mentee to increase his/her visibility
- Opens doors to new learning experiences
- Connects mentee to others who can be of benefit









A mentor is a coach

- Listens actively
- Understands their own strengths and weaknesses
- Helps mentees recognize their strengths and weaknesses
- Gives specific, formative feedback
- Uses a variety of methods to help individuals grow
- Identifies and use "Coachable Moments"









A few standard mentoring models

One-on-one





Peer mentoring

Team mentoring











Common expectations maximize mentorship impact

- Establish a working relationship
- Keep each other informed
- Be willing to share both accomplishments and difficulties with your mentor
- Provide feedback or advice
- Keep your word
- Set short & long-term goals









Mentoring may bridge the gap related to wheelchair service provision

- Main Themes
 - o Personal Development (e.g., Davies, Curtin, & Robson, 2017)
 - o Professional Development (e.g., Davies, Curtin, & Robson, 2017)
 - Educational Development (e.g., Amundsen & Wilson, 2012)
 - Limitations (e.g., Straus, Johnson, Marquez, & Feldman, 2013)
- Sub-Themes
 - o Program Type
 - Personal Characteristics









Mentoring may bridge the gap related to wheelchair service provision

- OT and PT programs worldwide teach varied amount of wheelchair training, as low as 2 hours in some programs
- AT providers agree there is no training/competency standard, resulting in disparity worldwide

Fung, 2017 Arthanat, 2017









Mentoring may be especially impactful for less-resourced settings

- OT and PT not established professions in some countries
- No existing credential
- Despite UNCRPD and policy change, inadequate provision is still practiced and sometimes celebrated, even by some advocacy & NGOs









UN Convention on Rights PWD

Article 20 - Personal mobility

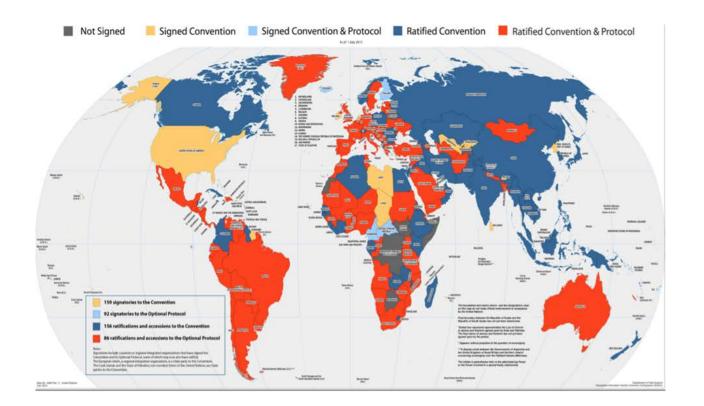
- Facilitate personal mobility at the <u>time of their choice</u>
- Facilitate access to quality mobility aids, devices, assistive technologies.
- Provide training in mobility skills to specialist staff working with persons with disabilities;
- Encourage entities that produce mobility aids, devices and assistive technologies to take into account all aspects of mobility for persons with disabilities.





















Accessible India @MSJE_AIC · Sep 17

A logo 'HAPPY BIRTHDAY PM' made history as it makes a new Guinness World Record #WorldRecords

#DivyangMegaCamp





















ISWP Overview & Objectives

Improve quality of life of wheelchair users globally by:

- Increasing awareness & advocating for policy
- Coordinating the global wheelchair sector
- Setting better product & service standards
- Building capacity for high-quality wheelchair service provision
- Collect and share wheelchair service provision data





Started in February 2015 with 2.5 year USAID

Grant









ISWP Wheelchair Service Provision Basic and Intermediate Tests mirror service delivery steps

Assessment an assessment of the wheelchair user's needs

Prescription wheelchair specification, features, and modifications

Fitting wheelchair adjustments

Production wheelchair assembly and safety

User training best method for transfers, mobility, etc.

Process steps from referral and assessment to funding and ordering

Maintenance and Repair follow up procedures









Intermediate seating: Significant need worldwide

From Wheelchair Experts and Stakeholders...

Anecdotally, the greatest percentage of wheelchair users require intermediate level services.

A very high number of children with CP and other conditions often require additional postural support.

A high number of people who may have been considered basic level users did not have access to wheelchairs with good support and, therefore, have developed deformities.









ISWP Wheelchair Service Provision Intermediate Test



- Launched in 2016 for more advanced clinicians
 - WHO training packages, guidelines, and global resources
- Part 1: Knowledge test
 - o PSDs
 - Pediatric Seating
- Part 2: Skills Test
 - Test takers submit 2 case studies based on own intermediate level client
 - Scored using rubric developed by wheelchair experts and stakeholders









Intermediate Test Today

323 knowledge test takers, 60% pass rate

English, Spanish

14 completed the entire process submitting 2 case studies









Potential for Mentoring to Improve Intermediate Level Service Providers' Competency



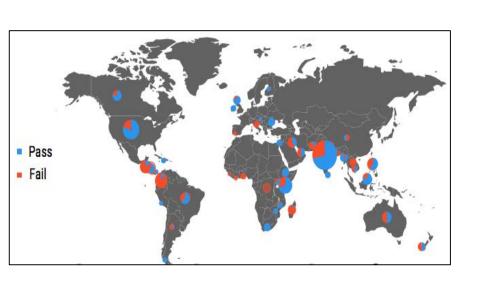


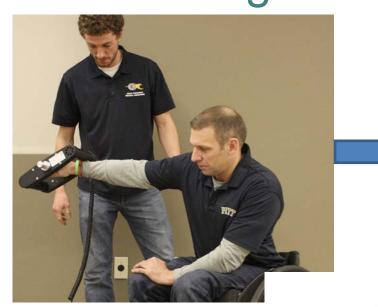






Barriers to wheelchair service provision mentoring







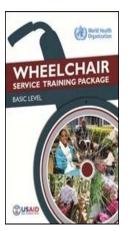


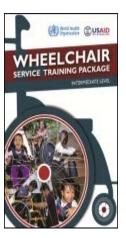




Facilitators to wheelchair service provision mentoring

















Basic

Intermediate

Managers

Stakeholders

Manual Wheelchair Maintenance Training



Version 2015/18, 14

Interpretated Linguist Pelastification Resistant (ELEVALIDORY). The numerics of the pressure are partly if an impossibility of the substitute and on the control of the financial control of the substitute and on the control of the substitute and the control of the substitute and the control of the control

WHO Wheelchair Service Training Packages

http://www.who.int/disabilities/technology/wheelchairpackage/en/

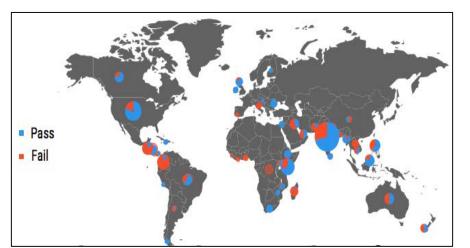








Facilitators to wheelchair service provision mentoring













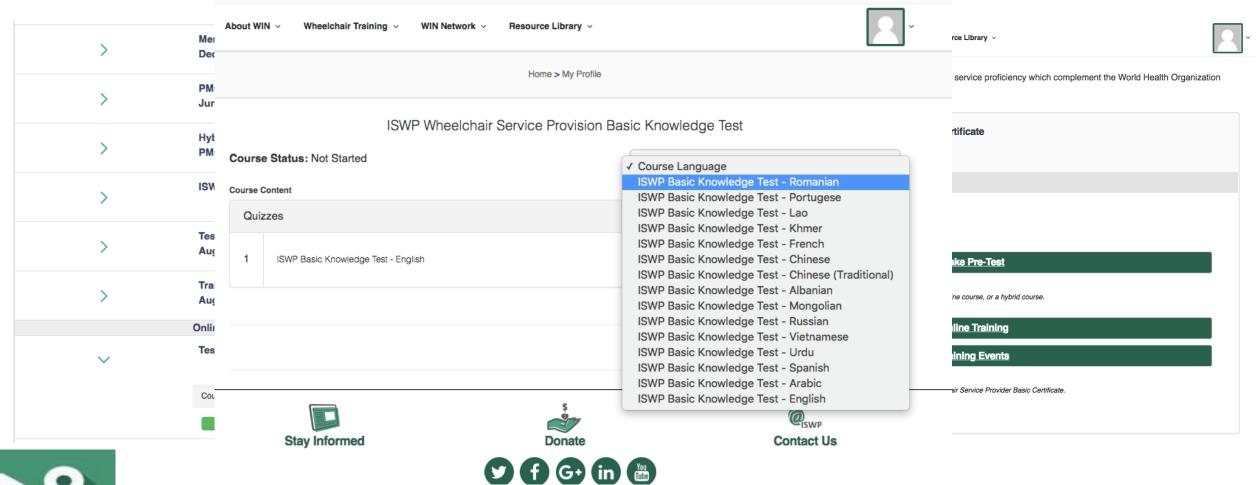




















Goal: Develop and pilot a 'team' e-mentoring program for intermediate level service providers

















E-Mentoring for Intermediate Level Wheelchair Service Providers (Pilot Phase 1)

- 3 mentors from South Africa with 8 to 20+ years of experience in intermediate seating
- 12 service providers representing 5 LMICs including Mexico, Tanzania, Kenya, Pakistan, and India
- Mentors developed relevant resources, a curriculum, and were matched with 4 mentees (grouped by time zone)
- 16 sessions (~2hrs) were held online using Adobe Connect
 - o 6 Case study sessions based on ISWP intermediate skills test
 - o 10 Tutor sessions emphasizing WHO WSTP-I









Phase 1 Curriculum

Session	Туре	Content	Time (hr)	Facilitator
1-6	Mentor	Failed case study feedback	1-2	Mentor A, B, and C
7	Tutor	Assessment: Sitting posture	2	Mentor A, B, or C
8	Tutor	Assessment: Pelvis and hip posture screen	2	Mentor A, B, or C
9	Tutor	Temporary supports	2	Mentor A, B, or C
10	Tutor	Temporary supports	2	Mentor A, B, or C
11	Tutor	Hand simulations	2	Mentor A, B, or C
12	Tutor	Hand Simulations	2	Mentor A, B, or C
13	Tutor	Prescription of postural supports	2	Mentor A, B, or C
14	Tutor	Prescription of postural supports	2	Mentor A, B, or C
15	Tutor	Prescription of postural supports	2	Mentor A, B, or C
16	Tutor	Fitting	2	Mentor A, B, or C









E-Mentoring for Intermediate Level Wheelchair Service Providers (Pilot Phase 2)

- 1 new mentor from South Africa with 5 years of experience in intermediate seating
 - `Guided/Mentored by phase 1 mentor
- 7 service providers continuing from phase 1
- 6 sessions (~2hrs) were held online using Adobe-Connect emphasizing phase 1 curriculum
 - 3 case study sessions (2 presentations each)
 - o 3 tutoring sessions based on mentee needs









E-Mentoring for Intermediate Level Wheelchair Service Providers (Pilot Phase 3)

- 1 mentor from phase 2
- 5 service providers
 - o 3 continuing from phase 2
 - o 2 new mentees
- 7 sessions (~1 2hrs) were held online using Adobe Connect reemphasizing phase 1 curriculum
 - 3 case study sessions (1-2 presentations each)
 - o 4 tutoring sessions based on mentee preference

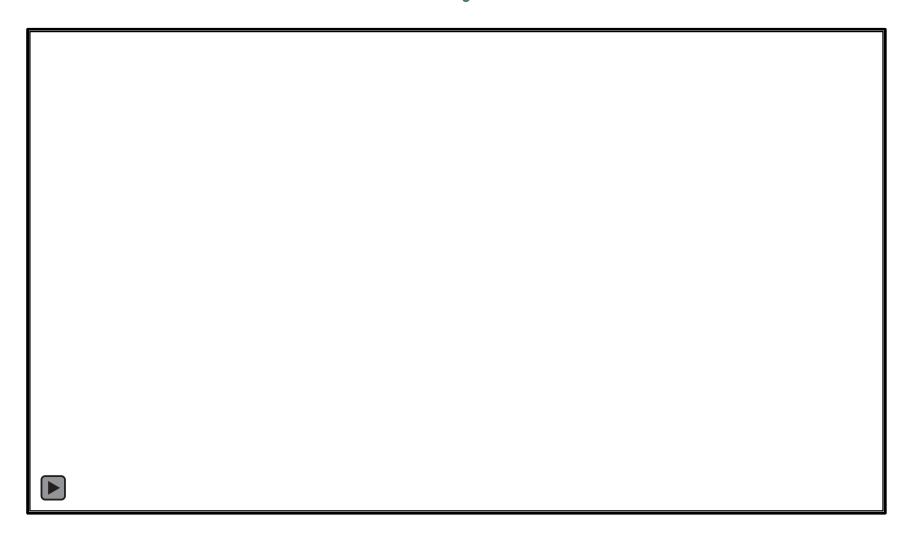








Case Study Session











Tutoring Session



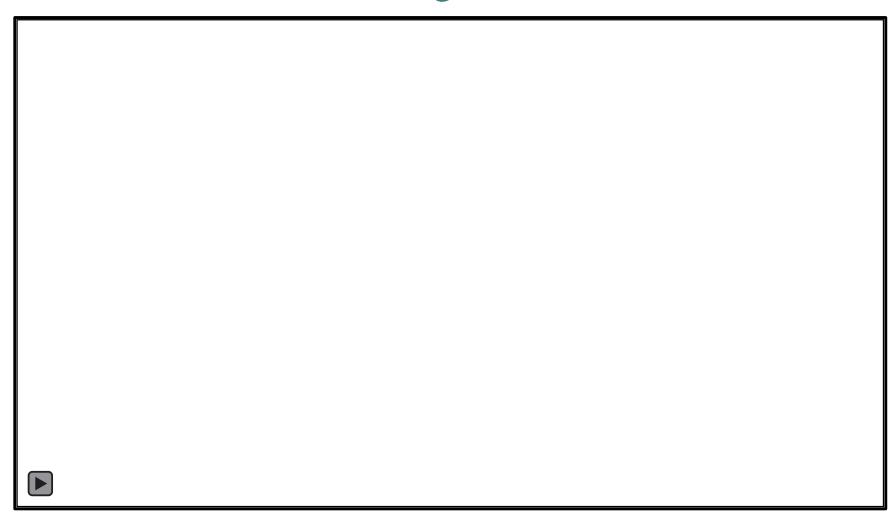








Tutoring Session











Key Findings for Mentees

- Online logistics and communication were not a barrier to participation
- Time and duration of sessions were appropriate
- Internet connectivity was unreliable for some participants
- Mentees suggest more sessions that focus on client case study presentations
- Mentees developed meaningful rapport with mentors and peers despite online format
- Mentees seemed more confident in their practice and in identifying clinical errors









Key Findings for Mentors

- Inadequate time for case study review and planning
- Inadequate time for mentees to implement what they learned in to their practice
- Inadequate time for one-on-one instruction
- Some mentees had technological difficulties
- Mentees were better able to identify clinical errors, especially those participating in subsequent program phases











Consolata Mwabu, mentoring program participant (phase 1 and 2), received award for Best Technical Staff in Appropriate Wheelchair Services at the Association for the Physically Disabled of Kenya (APDK)









"....attending your mentoring pilot program enables me not only to serve our wheelchair users...but also now enables me to train wheel chair services provider in Pakistan. Your mentoring pilot program was really a beneficial course and wheel chair service providers like us in developing countries really benefit from it."











Program Development Recommendations

- 1. Use a formal, semi-structured protocol that includes a) defined goals b) open communication c) a sufficient number of prearranged meetings and d) the time commitment required.
- 2. Involve mentees in the mentor selection process.
- 3. Assure mentors possess a high level of knowledge on the subject matter, benevolent characteristics, and a passion to facilitate learning.









Program Development Recommendations

- 4. Ensure several practice sessions occur in the area where the mentee plans to participate.
- 5. Ensure sufficient time is allocated to session activities and there is flexibility in scheduling and planning.
- 6. Choose mentors who are knowledgeable about the mentees' context allowing mentees to apply mentors' experiences to their own practice.









Program Development Recommendations

- 7. Test for appropriate internet bandwidth
- 8. Offer one-on-one mentoring sessions
- 9. Choose mentors who are knowledgeable about the mentees' context allowing mentees to apply mentors' experiences to their own practice.







Future Work

- Mentees will submit new client case studies with a goal of passing the ISWP Wheelchair Service Provision Intermediate Test
- Research study to determine the feasibility of a sustainable intervention
- Research study to validate outcome measures to determine the impact of mentoring on service providers' self-efficacy and clinical skills



Translation of tests and intervention in to other languages

















Takeaways

- Comment on ideas to improve your existing mentorships
- 2. Comment on any new ideas you would like to implement







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Recruiting mentors

- 1. Must have successfully completed a WHO WSTP-b and WSTP-i or comparable training.
- 2. Must have previous experience training at the intermediate level.
- 3. Must have 3 years of experience working at the intermediate level.
- 4. Must have passed the ISWP Basic and Intermediate Knowledge and Skills **Test by March 31, 2018.**
- 5. Must have access to reliable internet connection.
- 6. Must be available at least 10 hours per week for 8-10 weeks to prepare for and participate in intervention activities.
- 7. Must be fluent in English.











Please connect with us!

- Membership
 - http://wheelchairnet.org/
- Social Media
 - @ISWPorg













