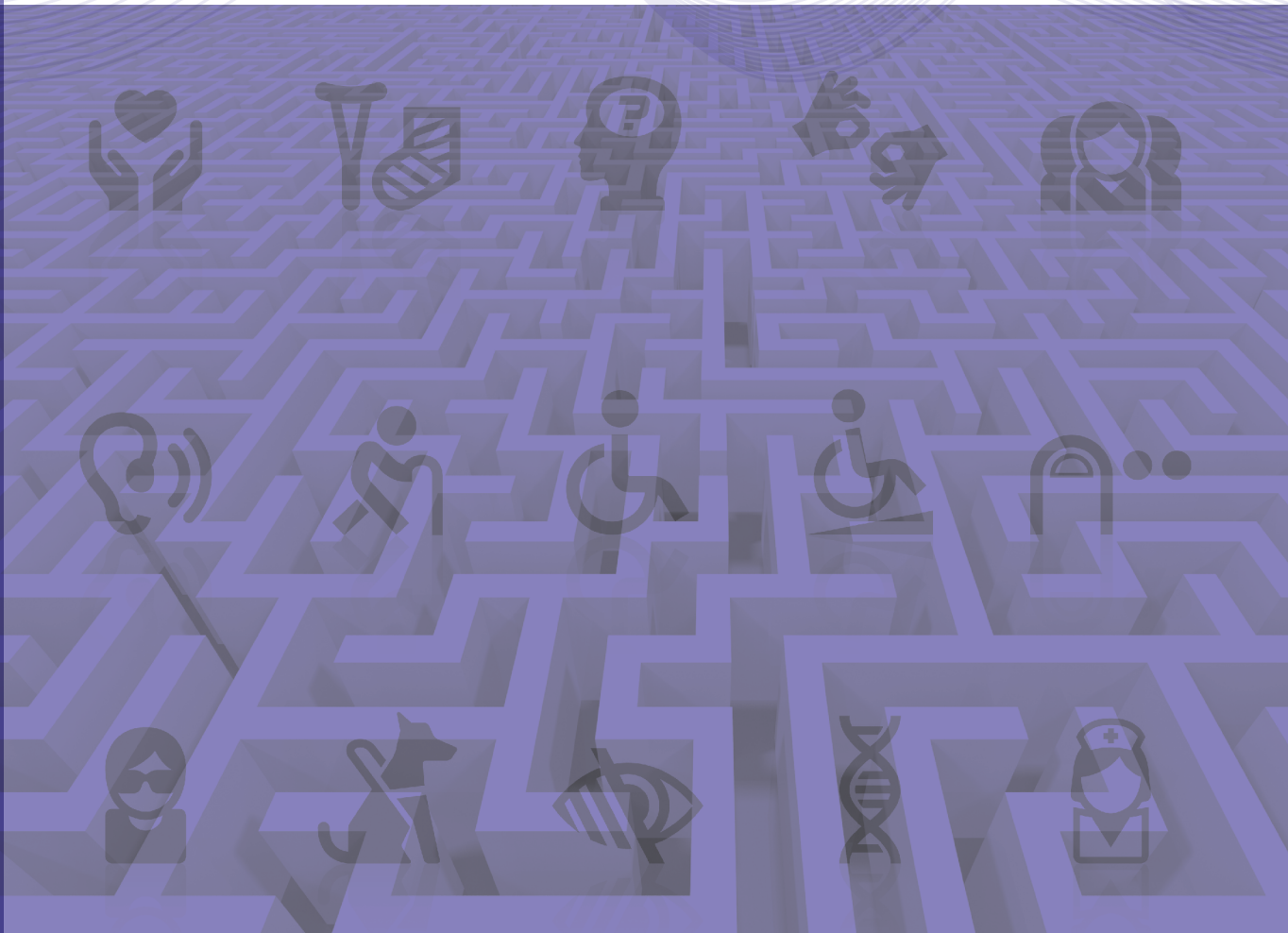




Assistive Devices Program: The Client Journey and Experience

OpenLab, University Health Network



About this Report

Converge3 commissioned OpenLab, a design and innovation lab based at the University Health Network, to conduct an analysis of the client journey and experiences related to Ontario's assistive device program. Converge3 receives funding from the Province of Ontario. The views expressed in this report are those of the authors and do not necessarily reflect those of Converge3 or the Province of Ontario.

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About Converge3

Converge3 is a policy research centre based in the Institute of Health Policy, Management and Evaluation at the University of Toronto, that focuses on integrating health, economic and equity evidence to inform policy. The Centre is funded by the Province of Ontario and includes multiple partner organizations, including Li Ka Shing Knowledge Institute at St. Michael's Hospital, McMaster University, Ottawa Hospital Research Institute, ICES, Health Quality Ontario, Public Health Ontario, and the Ministry of Health and Long-Term Care.

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OpenLab is a design and innovation shop dedicated to finding creative solutions that transform the way health care is delivered and experienced.

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Executive Summary

The Assistive Devices Program (ADP) is a Ministry of Health and Long Term Care (MoHLTC) program that is mandated to provide support and funding for assistive devices to those who have a long-term physical disability. The program provides much needed help to those in need across Ontario.

There have been several analyses conducted for how the ADP program can improve upon its services, such as a pricing review and a literature review of programs in other jurisdictions. To add to these analyses, OpenLab, a design and innovation lab, conducted a research study focusing on the client journey and experience. We connected with clients and caregivers through surveys and in-depth interviews. This report provides a description of the client journey of obtaining funding for assistive devices through the ADP and their related experiences. The report breaks down the journey into 3 distinct phases, with several steps under each phase. Gaps and opportunities for improvement, from the client's perspective, for each step are highlighted.

Introduction

As a program of the Ontario MOHLTC, the objective of the ADP is to provide consumer-centered support and funding to Ontario residents who have long-term physical disabilities and provide access to personalized assistive devices. Devices covered by the program are intended to enable people with physical disabilities to increase their independence through access to assistive devices responsive to their individual needs. Although the ADP provides funding to clients to access many types of devices, the most commonly funded devices are home oxygen, hearing aids, and mobility supports.

Methods

To gather client and caregiver input, we created and shared an online survey and we conducted semi-structured interviews with those who were willing to share their experiences with us. Information from multiple sources was synthesized and analyzed.

Survey

The survey was meant to obtain a large response rate related to the client journey. It was shared widely through OpenLab's networks. The survey included 43 questions asking such things as who interacts with the client on the journey (health care providers, vendors, etc.), client demographics (age, economic status, location), client experience related to key themes found in the report review, and client-identified gaps and opportunities. The survey was reviewed and adapted by our multi-disciplinary team with input from the ADP working group. Survey questions can be found in **Appendix 1**.

Interview Guide

The interviews provided an in-depth perspective on client experiences and

probed further into themes that arose in the survey responses. The interviews were semi-structured which allowed the team to explore different concepts more deeply, depending on the client or caregiver being interviewed. The interview guide was reviewed and adapted by a multi-disciplinary team with input from the ADP working group. The interview guide can be found in **Appendix 2**.

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Although I understand they only have so much money to go around, it doesn't take into account the fact that computer equipment quickly becomes obsolete or outdated, and when something needs repairs the user may not be able to afford them.

Maria

Analysis

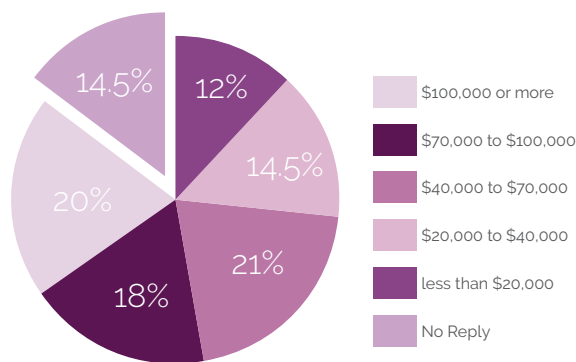
To analyse the data, quantitative and qualitative mixed methods were used. Numeric survey responses were reviewed and analyzed using statistical methods and stratified by key demographic variables. Qualitative responses were analyzed using a direct content analysis approach. Interviews were recorded and transcribed and independently analyzed for themes. The group met to consolidate themes and conduct analysis within each theme. Themes were organized and structured using the stages of the client journey.

Results

We had 150 survey responses in a one-week period. We further conducted 9 in-depth interviews with clients and those that help them through the process. The following are key points from the survey and interviews.

Demographic Profile

The majority of survey respondents were between the ages of 30 and 44 (59%), followed by those between 45 and 65 (26%). The remainder of respondents were over 65 and under 30. Respondents represented a broad range of income and geographic profiles. See **Appendix 3** for a map and full table of the respondent demographics..



yearly household income level

The survey respondents used a variety of devices including mobility aids, hearing aids, and home oxygen among others. Over 52% of respondents use more than one device. The majority of respondents were clients who use the ADP to fund their assistive devices, but 34% were caregivers to loved ones who are clients.

Of the 9 in-depth interviews, 4 were with clients, 3 were with caregivers, 1 was with a respite worker who often helps clients through the process of obtaining assistive devices, and 1 was with a pair of authorized therapists working at the Assistive Technology Clinic (ATC) at Baycrest Health Sciences who assist

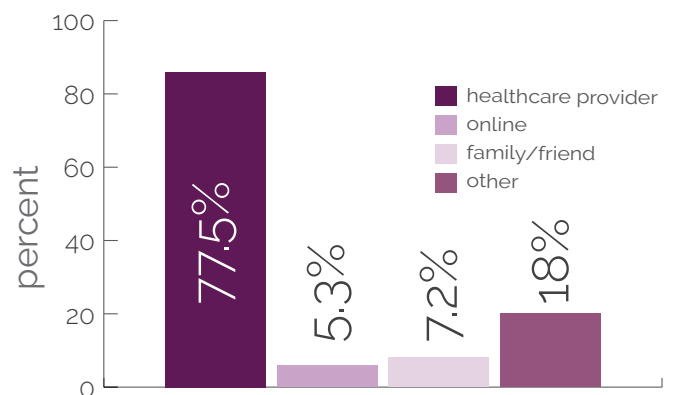
many complex clients and families through the process of accessing assistive devices. A selection of these interviews are highlighted as case studies (**Appendix 4**) and referenced throughout the report.

Client Journey

The client journey of accessing ADP to obtain assistive devices follows 3 phases and 5 main steps which are described in detail below: The first step is part of the pre-approval process (1) Learning about ADP. The next three steps fall into the approval process; (2) Determining need/assessment; (3) Preparing forms; and (4) Gaining approval. The final step is in the post-approval process (5) Obtaining a device and renewal. Quantitative details, and themes surrounding gaps and opportunities arose through the survey and interviews. See **Appendix 5** for a complete client pathway infographic.

Pre-Approval Process

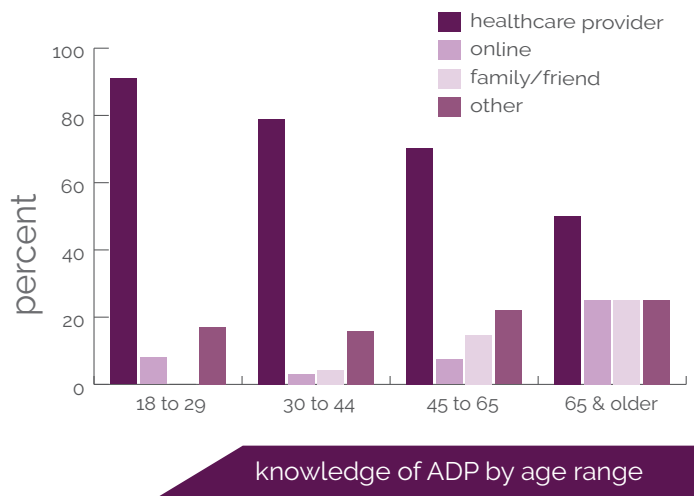
1. Learning about ADP



how did you learn about ADP?

The first step in obtaining devices is learning about ADP. Most clients and families learn about ADP via a health care provider (noted by ATC **see case study 4**).

It is interesting to note that there was a difference between how the different age groups first learn about ADP. Those who are between 18-29 learn about ADP mostly through their healthcare provider and online and not from their family and friends. This changes as the the clients get older.



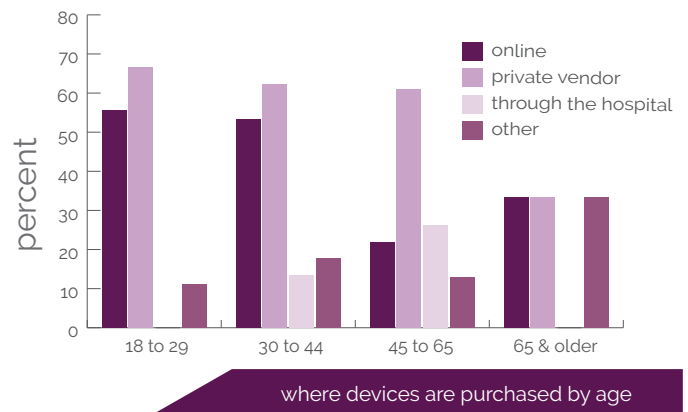
Once they know about ADP, clients and families then need to learn more, particularly about what is and what is not funded, how often, and for which clients. Again, the most common way to learn about this is through health care providers. Patients connected to rehab centres or treatment clinics had the easiest time with this as was referenced by 4 of the interview subjects. Through our survey, we identified this as a gap, with 43% of respondents being unaware of what is funded through ADP. Participants noted that there was a lack of awareness of what is covered (devices in general and specific details of what parts of various devices). **See case study 1.**

At this point, clients and families may choose to pursue obtaining a device with ADP funding or obtaining a device some other way. Many people use multiple devices, some of which they obtain with ADP funding and others that they obtain other ways. The survey revealed that the majority (77%) of people purchase a device without ADP.

The reasons for this include:

- Being ineligible
- Finding a cheaper option online
- Finding a second hand or used device online or through a charity
- Assuming that the process is too long

When purchasing a device that is non-ADP, clients either go directly through a vendor (61%) or purchase it online (44%). It is interesting to note that those 18-29 and 30-44 are more likely to purchase devices online.



Another way that clients obtain devices is by using rental or loaner services (52%). Clients obtain these devices mostly through vendors or a non-ADP affiliated rental/loaner program.

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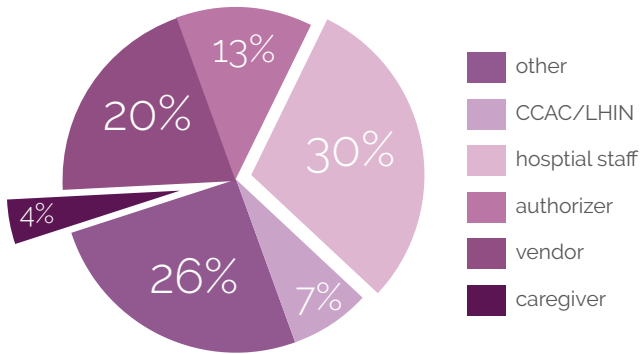
I would love an online portal where I can log in and see our ADP history and the upcoming payments.

Susan

Approval Process

2. Determining Need/Assessment

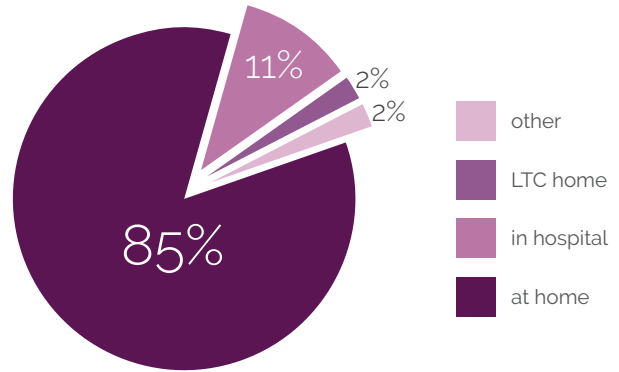
After learning about ADP or deciding that a device is desired or needed, clients must see a healthcare professional to be assessed and determine which device is right for them. Clients may come to this on their own, through a recommendation by their physician or therapist, or if they are already seen by a rehab or treatment centre or provider that is also an ADP authorizer. They will then go through the process of engaging a vendor, going through a process to fit or try out devices and then obtain a prescription for the device that is best suited to their needs.



Who started the process of applying for ADP?

Again here, clients that are seen at a rehab or treatment centre or a familiar therapist who is an ADP authorizer are better off and are more likely to have a smoother process. The ATC (**case study 4**) notes that they spend quite a bit of time undoing prescriptions from the community where patients went straight to the vendor to start this step of the process and the authorizer that was brought in to help with their assessment and prescription did not assess them properly for the device that would work best for them. There is a knowledge gap between clinicians who are able to authorize

devices. In some cases, there is also a conflict of interest in that the person assessing and recommending the device is also the seller/creator of the device so is therefore incentivised to recommend it.



Primary residence at time of application

“

It's a lot. Assessments are time consuming and there's the amount of money that's covered for the actual device. But it's also the time of missing work and transportation, all the support necessary taking cabs instead of TTC and all the lifestyle changes, it's disruptive to go through the process so I will avoid it as long as long as possible. ADP is just one piece of that. The funding covers one piece, the leg but it's a small percentage of the overall cost.

Jennifer

Within this step, several themes came up in terms of gaps and opportunities for improvement:

1. Clients needing more than one or different devices than what they are eligible for on the current schedule of devices per year (this is sometimes because of growth, sometimes lifestyle for example a power chair for winter) .
 - I. Gap in needed devices that aren't funded (Quality of life devices such as smart devices, toileting aids, etc). that may improve client independence and dignity. **See case study 1**
 - II. Gap in needed devices even within categories of devices that are covered - examples include higher end hearing aids and knee ankle foot prthotics (KAFO) with dynamic features. **See case study 2**
 - III. A majority (77%) of respondents need devices that are not funded. This is a potential point of exit from the pathway of obtaining a device through ADP. In some cases, the best device for the client is not covered by ADP, so they will try and obtain that device through other means. **See case study 2**
2. Consistency and separation across branches/types of devices covered by ADP. Here we see the issue of conflict of interest and the process of whom a client needs to go to for assessment and authorization. People are confused about whom is their advocate and who they should go to for what, especially if they are not followed by a treatment centre or clinic. Additionally, many people need multiple devices that rely on each other. For example, if a client needs augmen-

tative and alternative communication (AAC) and seating, the setup of each will depend on each other. Because the process is different for all types of devices and clients often have to go to multiple clinics, this causes extra waiting and issues when devices are interdependent.

See case study 4

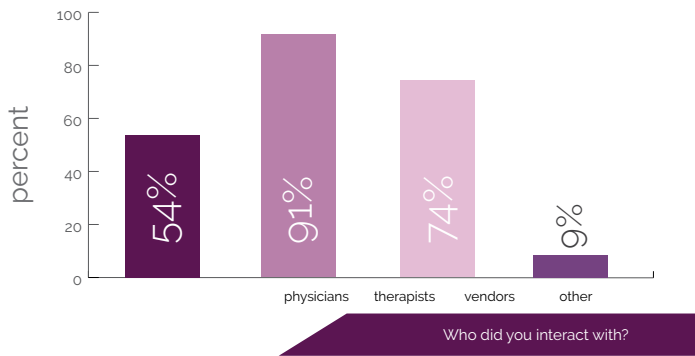
3. Renewals
 - I. Clients that need devices long-term often need new ones when their old ones wear out and their need doesn't change. They question why this step of determining need is required for all renewals. Additionally, especially in some cases, clients have suggested that starting the process in anticipation of need would help facilitate renewal as it takes a very long time. Although in some cases clients note that they work with a clinic or provider that does this for them, others note that sometimes the therapist may be resistant to starting the process early. **See case study 1**

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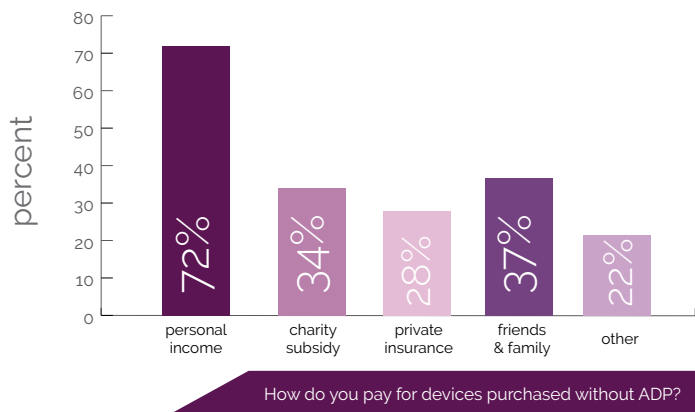
My experience with getting a wheelchair is that the process is very long. When you need it to get around you become paralyzed to another chair. It takes 14 months and a lot of that time is the approval of your application. Elsa

3. Preparing Forms

Once the device is chosen, the client and family obtains a quote and begins preparing the paperwork. Most often the completion of paperwork is completely facilitated by the treatment centre/clinic or therapist. However, for some devices, signatures from a client's physician are needed in addition to those from the authorized therapist. In these cases, the client will need to make an appointment with their physician to get the forms signed. If the client is getting more than one device, they will need to complete this process for every device.



During this phase, clients also need to identify who will pay the portion of the cost not covered by ADP. In the survey, most clients (87%) have had to secure funding for a portion of expenses that the ADP does not fund. In cases where the client does not receive government benefits that cover the remaining portion, clients have to pay out of pocket, or apply to third party funders or charities for this portion.



As the previous graph shows there is a variety of ways that clients have purchased a device without funding from ADP, including personal income, charities, private insurance or friends and family. If the client is not wealthy enough to pay for the remainder owing when third-party funding is not received, they will need to get the funding approved prior to submitting the forms. This is another potential exit point from the client pathway. A majority of respondents (73%) have said that the need for extra funding has impacted their ability to get a device. Clients who cannot secure funding and cannot afford to fund the device on their own, may choose to forgo the device. In the survey, 62% of clients said that they have had to go without a device due to financial strain. It is interesting to note that elderly people have more access to funding for the extra portion and are less likely to need to forego a device due to financial strain. Furthermore, regardless of income, respondents have had to secure funding for the extra portion.

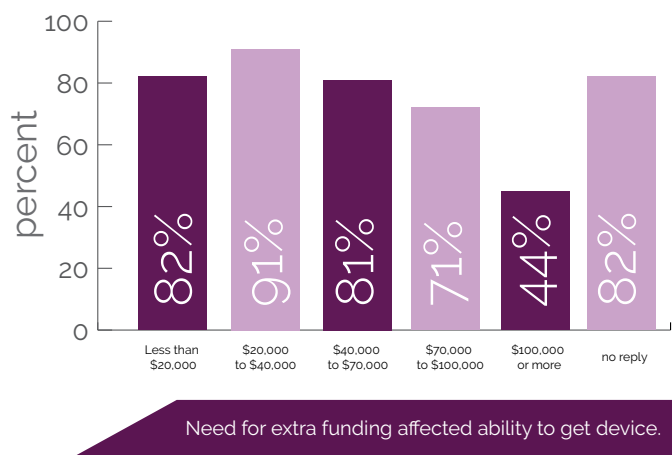
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I had to call ADP to see why they hadn't approved my chair yet, apparently my OT forgot to check one box and instead of calling her they sent the form back to her. Once she received it weeks later, she checked the box and it was back at the bottom of the pile. I had to wait another 6 weeks before it was processed.

Steve



Although having higher income makes one less likely to need to forego a device for financial strain, half of respondents with an income of over \$100,000 have also needed to go without.



4. Approval

Once the forms have been submitted to ADP, clients and families have to wait for approval before ordering their device; however, some clients mentioned that due to their long-standing relationships with their clinics or vendors (in particular those with ongoing relationships with orthotists or prosthetists), they were able to place the order for the device while waiting. Established and experienced clinics, such as the ATC, are also more likely to be able to do this.

Two themes related to gaps and opportunities arose during this step of the pathway:

Length of the process

Clients that we talked to claim that the process is very long (sometimes up to one year). It is, by far, the most common complaint. Adding to this is the fact that there is often a step that must occur before ordering a device, which can also extend wait times. A client may have grown or their needs may have changed by the time the device arrives. **See case study 1**

As several clients mentioned during interviews, if the form has an error the process can be extra long and problematic. Even small typos may result in the process needing to be restarted even when an error is found after months of being in a queue. This length is especially problematic in times of urgent need.

Transparency

It is stressful for clients and families not to know where in the queue their forms are. Several clients mentioned the desire for an online portal with tracking. And a desire for more transparency in general.

“

If an authorized healthcare provider and the client both think a certain device is the best fit for them and they are approved for a device of that type, they should be able to get funding to cover a portion of the device they need, i.e. the ankle foot orthotic (AFO) part of the KAFO or up to a max amount for the category.

Mary

Post-Approval Process

5. Obtaining a Device and Renewal

Once the ADP paperwork has been received, the client/vendor can order the device. Once ordered, it could take as long as 6 months for the device to arrive. When the client needs another device, they begin the renewal process by returning to step 2.

Again, there are two themes regarding opportunities and gaps for this step:

Client Choice

Clients feel constrained by the limited choice of vendor. If a specific device is covered and approved by their healthcare provider/authorizer, they question why do they also have to purchase it through specific vendors and why they are not able to go to any vendor or have self-directed funds. **See case study 3**

Repairs and Loaners

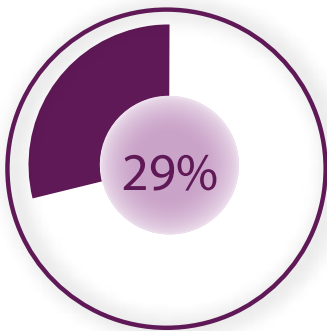
Clients feel there is a gap in services when their devices need repairs. They try to go back to their vendors, but find the service very poor and are left using broken and dangerous devices if they are not eligible for a new one. Many clients expressed the desire for loaner or rental programs for devices, although there was not agreement as to who would be best suited to run this type of program. A rental or loaner

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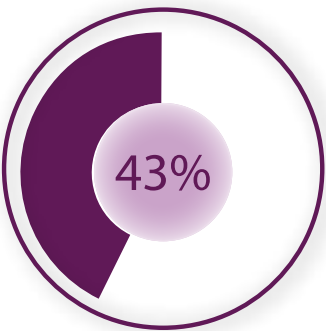
As you get more into adulthood, it gets harder to renew devices. I've seen chairs where pieces are falling off or bolts falling out or that are going to get fixed every month, but coming back and kind of fixed or not fixed at all. But ADP won't approve a new device because they just got one 6 years ago and it's still holding together. Or ADP won't approve them for a second piece of equipment. Some people need a power chair and a manual chair and it's really hard to get approved for both.

Marjorie

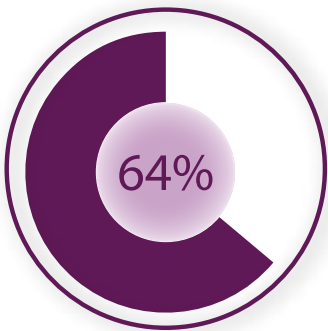
program would be especially useful in times of urgent need, times of repair, and for travel. Clients noted that a rental/loaner program is in use for ventilators and would be especially useful for devices that will be outgrown, or are standard. **See case study 1** Rentals are also available for ADP devices such as writing aids and is done ad hoc by families using grassroots groups such as **Zach's List** and **For the Needy not the Greedy**



feel communication is good



feel navigation is easy



have experienced frustrations



Summary

This report outlines a research study focusing on the client journey and experience through the MoHLTC's ADP program. OpenLab connected with clients and caregivers through surveys (with 150 respondents) and 9 in-depth interviews. Using the data from both, the team synthesized and analysed the data for themes and summarized the information into a client journey with 3 distinct phases and steps within those phases. Although the program works for most, there are gaps in the services, from the clients perspective. These include funding for devices that are not covered, the length of the process and the renewal process. This report contributes to ADP's goal of providing client-centered services

Limitations

We are aware that the research conducted for this report has limitations. Survey respondents and those who agreed to provide interviews are subject to self-selection bias, which may have consequently skewed the results. We are also aware that a majority of the respondents reside in urban and suburban areas. Lastly, it should be noted that, although we had a high response rate, the survey was only posted for one week.

Appendix 1

Q1. What is your age?

Q2. What is your typical yearly household income? (please include retirement income)

Q3. In what type of community do you live?

Q4. What is the nearest city or town to your home?

Q5. Do you, or someone that you provide care for, use an assistive device?

Q6. What type of device do you or your loved one use? Please check off all of the boxes that apply.

Q7. Have you received any services or help in regards to finding or funding a device?

Q8. If you answered yes to Question 7, who provided you with services and or help in regards to your device?

Q9. Are you aware of the Ministry of Health's Assistive Devices Program (ADP)?

Q10. Are you aware of the Ministry of Health's Assistive Devices Program (ADP)?

Q11. How did you learn about the ADP?

Q12. Do you use the Assistive Devices Program (ADP)?

Q13. Why do you use the ADP?

Q14. How did you learn about the ADP?

Q15. Do you use the Assistive Devices Program (ADP)?

Q16. How would you rate the ease of navigating the ADP program?

Q17. Which of the following people did you interact with during your application process? Please check off all of the boxes that apply.

Q18. Who started the ADP application process for you? i.e. introduced you to the program and started the paperwork

Q19. Are there things that you wished the ADP also offered? for example a loaner or rental program?

Q20. Who communicated with the ADP during your application process? (This is what we sometimes refer to as your navigator)

Q21. How well did you feel the ADP communicated with you directly during your application?

Q22. Where were you living or primarily staying when you first applied to the ADP?

Q23. Where do you go to find out about what the ADP offers? Please check off all of the boxes that apply.

Q24. Do you feel you are aware of what the ADP can fund?

Q25. Are there assistive devices you need or want that are not covered by the ADP program?

Q26. Have you ever had to secure funding for a portion of expenses that ADP does not fund?

Q27. Has the need for extra funding impacted your ability to get a device?

Q28. How would you rate the experience of finding extra funding?

Q29. Where did you go to find the extra funding?

Q30. Have you experienced any frustrations with the ADP program?

Q31. Could you tell us a bit more about what types of frustrations you have experienced?

Q32. Have you ever had to file a complaint with the ADP or appeal a decision?

Q33. Please rate your satisfaction with the appeal/dispute process, if applicable.

Q34. Do you have suggestions for how the ADP could improve their current services?

Q35. Will you continue to use the ADP program?

Q36. Do you purchase other assistive devices without using the ADP program?

Appendix 1, (cont'd)

Q37. If you have heard of the ADP but don't use it, what is your reason?

Q38. How do you pay for your assistive device(s) that you purchase without funding from the ADP?
Please check all boxes that apply.

Q39. Have you ever had to go without a device due to financial strain?

Q40. Where do you usually purchase your non-ADP device?

Q41. Have you ever used a rental or loaner service to obtain or try out your device?

Q42. If you answered yes to the previous question, who gave you the rental or loaner device?

Q43. Please rate your satisfaction with the process of purchasing device(s) without the ADP.

“

Families who have less money usually have to look for second and third parties to pay the other 25 percent. They usually can't afford it.

Margaret

Appendix 2

Interview guide - Clients

Introduction

Thank you for agreeing to participate in our research about assistive devices. Our group at OpenLab is a design firm that works on co-design and research projects with clients and families and we do not work for ADP and are not connected to ADP.

We are interviewing people to better understand what clients and families think about the process of obtaining assistive devices wither through the ADP program or independently and what opportunities they see for improvement. The interview should take between thirty minutes to one hour depending on how much information you would like to share. Participation in this study is voluntary and your decision to participate, or not participate, will not affect any care you receive. Would you have time to go ahead with an interview now?

With your permission, I would like to audio record the interview because I don't want to miss any of your comments. All responses will be kept confidential. Are there any questions about what I have just explained? May I turn on the digital recorder?

Establishing Rapport

Before we begin, it would be nice if you could tell me a little bit about yourself and how you or your family/friend/clients use assistive devices.

Demographic Prompts

- o Age
- o Male vs Female?
- o Income
- o low, mid, high
- o Retired with savings?
- o Geography
- o Urban vs rural?
- o Close to a city? Northern Ontario?

Devices Prompts

- o What kind of devices do you or your loved one use? Why?
- o How long have you been using assistive devices?
- o Do you care for someone who uses an assistive device?
- o What is your process of getting an assistive device?
- o Who do you talk to about getting an assistive device?
- o Have you heard about the Ministry's Assistive Devices Program?

- Are you aware of ADP?
- If unsure, explain or give details like Ministry program, apply using forms, get a grant or reimbursement from government

Knowledge Prompts

- What do you know about the Assistive Devices Program?
- What do you think is the mandate of ADP? What services do they provide?
- Do you know what ADP does and what they provide?
- Can you tell me more about how you first found out about ADP and the process you go through to access your devices?
- Can you describe your experience with ADP?
- How did you find out about ADP?
- Online
- Healthcare provider
- Other
- How did you find out about ADP?
- Were you referred? By who?

Access Prompts

- Did you ever find it difficult to go through the ADP process? Did you need help (financially or during the process of applying, or getting your device)?
- Do you use ADP on an ongoing basis? If so, is the process different for renewal vs. first time?
- Here, try to understand more about accessibility and equity in relation to the ADP process.
- How would you rate the ease of navigating ADP?
- Or simplify: do you find it easy to go through the process with ADP?
- How well did you feel ADP communicated with you?
- Did you have any personal contact with ADP?
- Can you walk me through the process of your interaction with ADP? From when/ how you decided you needed an assistive device until you received it.
- What health professionals were involved in the process and how?
- Can you describe what it was like to apply to ADP in terms of completing the form and getting approval?
- How long did the process take?
- How many people did you need to interact with?
- Where did you get your device from? (vendor, hospital)
- What is the process of renewal for ADP?
 - Have you found renewal to be easy or complicated?
 - Why?
- What other interactions have you had after your initial interaction with ADP?
- Are there any additional services ADP could provide that would be helpful to you?

Funding Prompts

- o How do you find out which devices are available for funding?
- o Are you aware of what ADP can fund?
- o Are there devices that you currently use that are not funded but think they should be? +
- o Are there assistive devices that you wanted but can't access because ADP doesn't fund them?
- o Why do you think those devices are important?
- o Have you ever struggled to pay for a device through the ADP program?
- o Have you encountered barriers to purchasing devices even with the support of ADP?
- o Are there devices they do not fund that you need and how do you find that out?
- o Are there devices that you are not covered for? +
- o Have you had to access funding for a portion of the expense that ADP does not fund?
- o How did you find the extra funding?
- o How would you rate the experience of finding the extra funding?
- o How has having to find extra funding impacted your ability to get your device?
- o Have you applied to different charities (i.e. march of dimes)?

Frustrations Prompts

- o Have you had any frustrations?
 - o If yes, can you tell me more about any frustrations you have had dealing with ADP?
- o Did you ever have to file a complaint with ADP or appeal a decision? How did that go?
- o Can you tell me about situations where ADP does not meet your needs in relation to accessing assistive devices and what you do about that?
- o What changes would you like to see implemented?
- o Do you have any ideas of services or changes that could improve how ADP operates?

Other

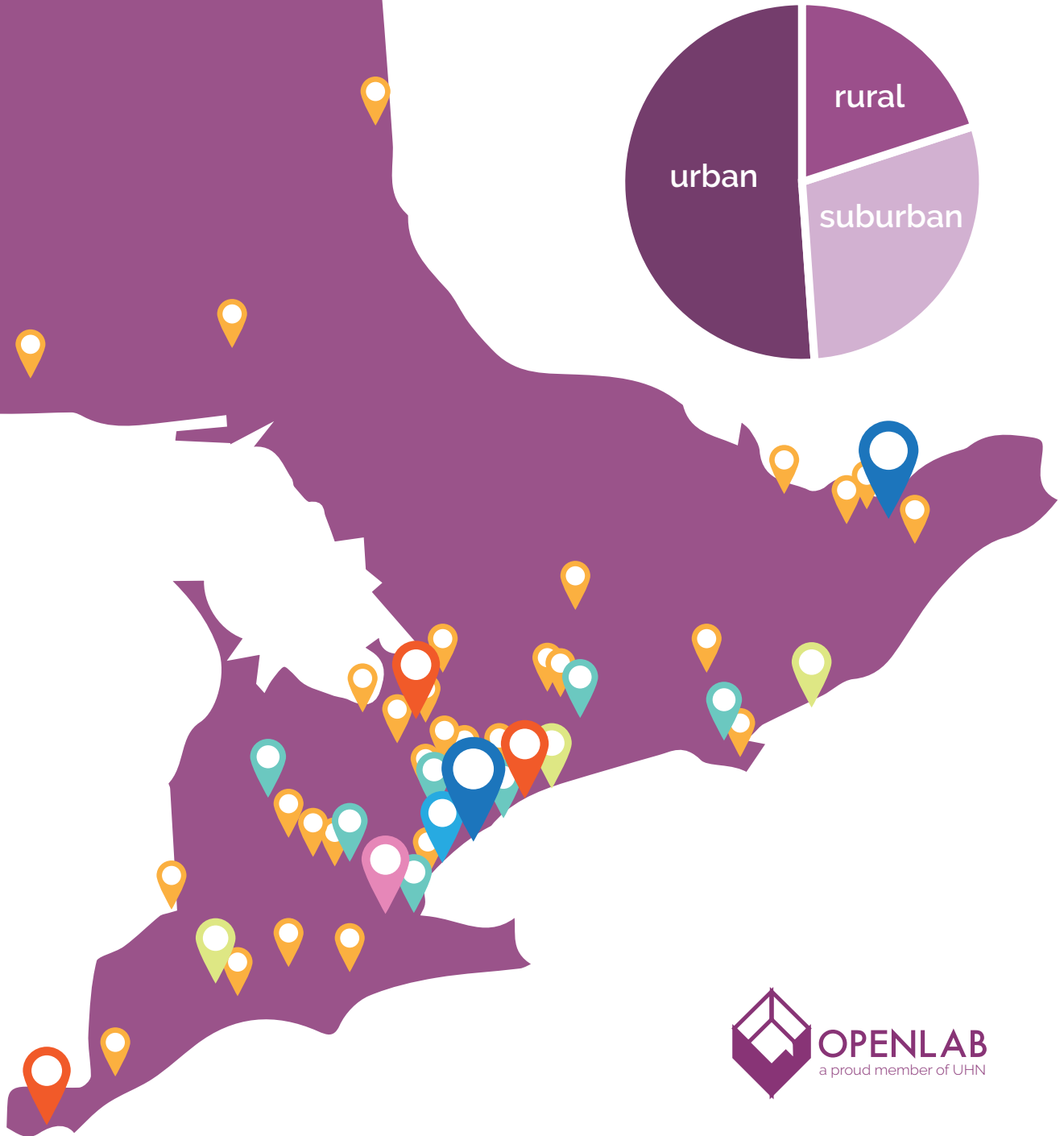
- o Are there any other services or organizations that have helped you with you assistive devices? Either helping you fund them or providing devices?
- o Can you tell me about other services you use for assistive devices (LHIN?)? Do you think there is overlap or an opportunity for coordination between ADP and that service?
- o Do you often use other assistive services that you feel could be integrated with ADP?

Closing

- o Are there any other questions/comments that you have for me that you think are relevant for us to know about?
- o If we have any additional questions, could we contact you again?

Thank you for your time today! Please feel free to contact us at anytime.

Respondents by Location



Respondent Demographics

Table 1. Characteristics of Participants (n=150)		
	n	%
Age		
18 to 29	18	12
30 to 44	89	59.3
45 to 65	39	26
over 65	4	2.7
Annual Income		
under \$20,000	18	12
\$20,000 to \$40,000	22	14.7
\$40,000 to \$70,000	31	20.7
\$70,000 to \$100,000	27	18
over \$100,000	30	20
Location		
Urban	76	50.7
Suburban	43	28.7
Rural or Northern	30	20
Respondent		
Client	88	58.7
Caregiver	51	34
Assistive Devices Used		
Mobility Aids	110	73.3
Hearing Devices	27	18
Respiratory Equipment (including home oxygen)	65	43.3
Communication Aids	13	8.7
Feeding Aids	15	10
Insulin Supplies	5	3.3
Other	6	4

Appendix 4

Case Studies

At OpenLab we search for creative solutions that transform the way health care is delivered and experienced by patients, caregivers and healthcare workers. Building case studies helps us to keep the core users top of mind in our process. Generally, case studies are fictional characters based on compilations of data, research, interview feedback and key stakeholder input. On occasion, when a key participant is agreeable we will highlight their individual story within a case study.

Data and research provide valuable insight into the actions and demographics of core user groups. However it is through translating this data and looking at the scenarios and people involved, not just the numbers and statistics, that we are able to view problems through a new lens and from many angles.

Case studies help us to step outside of ourselves and gain a clear understanding of the needs of key stakeholders which in turn leads to improved design solutions that work for everyone.

Susan, 35 & Jaden, 4

“Multiple device needs”

About Jaden

Jaden was born with a neuromuscular disease which has necessitated multiple support devices. In the four years since Jaden's birth, Susan has been his primary caregiver and advocate. Although Susan is over-joyed by the support she has received from ADP to fund Jaden's feeding and breathing equipment supplies, she has found tracking the money in and out is really tough. Susan has also found ordering Jaden's mobility devices to be challenging. Going through the process of prescriptions, fittings, arranging extra funding and then waiting is time consuming and stressful. Not to mention that Jaden often grows out of his devices long before they are due for renewal.



“ My son is always growing and the process just takes too long”

Challenges

Susan finds it very difficult to manage the mobility devices required by Jaden. As a growing boy Jaden regularly outgrows one device before they have received or even ordered a new one. On top of that, Susan is left with multiple devices that she owns and just does not need anymore. Added to this, Susan was surprised when she learned that toileting devices were not covered. Susan sometimes feels the process is overly complicated and unnecessarily lengthy.

ADP Knowledge



Satisfaction with ADP



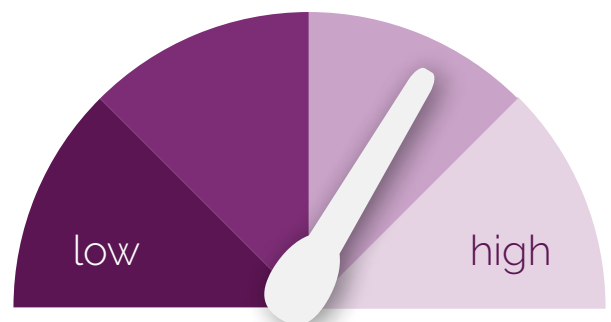
Need for extra funding



Wants to ...

- Pre-order new devices in anticipation of growth
- Consider rental options for devices that will be transitional
- Get reimbursed for device add-ons
- Obtain funding for toileting devices
- Streamline and speed up the process
- Provide access to funding information

Frustration Level



Mary, 68

"incomplete SCI at age 30"

About Mary

Mary has been undergoing rehab for a spinal cord injury for a number of years. Eight years ago she suffered a full collapse of her right leg. The collapse left her reliant on a full leg brace. Mary was prescribed a rigid brace, however as she has aged, the locked knee gait has caused hip-displacement and back pain. Unhappy with the rigid brace, Mary researched and found an improved device that would allow her to regain a more regular gait. Unfortunately, Mary has been unable to gain funding for the more expensive brace and is frustrated by the lack of response from ADP. Mary has enlisted the help of her local MPP and is petitioning the ADP to consider funding new technologies.



" New technologies are available and I should be able to access them. "

Challenges

Mary has been sent in circles trying to arrange funding for a brace with articulated joints. Charities won't fund her as her income level is above their threshold. The ADP will not authorize the new device and involving her MPP has not lead to any resolution. Mary has resorted to purchasing the articulated leg brace herself. The financial impact has been substantial. Mary is frustrated and can not understand why it has been so difficult to access this life-altering device.

ADP Knowledge



Satisfaction with ADP



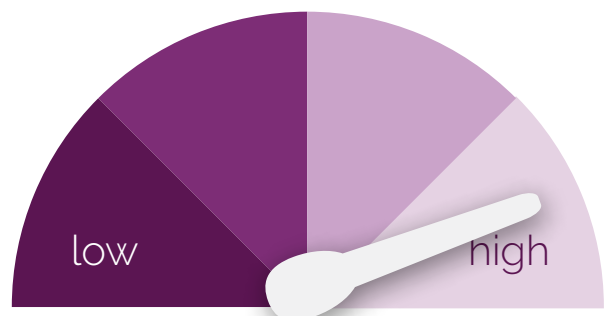
Need for extra funding



Wants to be able to . . .

- Buy the device that she needs that will improve her quality of life.
- Funding for a more technologically advanced device
- Help others access improved technology and devices

Frustration Level



Dan, 31

"type 1 diabetes"

About Dan

Dan has been dealing with his diabetes for as long as he can remember. The new pumps are so much easier than when he was a kid and had to have daily needles. But with progress comes challenges and the new pumps are very expensive. Dan has good coverage at this job, where he has worked for 6 years, but the added expenses of test strips and other supplies is costly. ADP has helped out but man is it a lot of paperwork and bureaucracy. He does not even bother to keep Ketone strips at home anymore because they are so expensive and he ends up having to throw them out when they expire. This year he needs a new pump, time to get frustrated.



"Why do I have to go through the whole process every time I need a new pump!
My diabetes is not going away."

Challenges

Acquiring a new pump will mean, signatures, forms, appointments, and long waits. Dan is not in the mood to deal with the aggravation. Dan has been working for the same company for 6 years, he knows his diabetes, with all of the time off and added aggravation has impacted how quickly he has moved up in the company. He just wants to focus on enjoying life and stop worrying about his insulin and pump.

ADP Knowledge



Satisfaction with ADP



Need for extra funding



Wants to . . .

- Streamline the renewal process
- Maybe even skip the long renewal process!
- Get his updated pump quickly and easily
- Reduce time away from work
- Minimize the cost of travel for appointments
- Check in on his application status
- Get back to living a normal life

Frustration Level



ATC, Baycrest

"assistive technologies clinic"

About the ATC clinic

The ATC is a unique clinic that specializes in providing mobility, communication and environmental technologies to people with multiple types of disabilities.

The unique set up at the ATC allows the clinic staff to ensure that all aspects of a persons disabilities are addressed equally and efficiently. The focus for ATC is rehabilitation not just compensation. ATC therapists work hard with their clients to ensure paperwork is correct and forms are processed as speedily as possible but they are frustrated by the seeming conflict of interest that develops when a vendor is allowed to sign off on paperwork. They feel that the therapists are the true front line.



" It's like having a drug company be the first point of contact and the drug company brings the doctor to write the prescription."

Challenges

The ATC clinic staff regularly needs to pull back paperwork and make changes. Their clients are regularly prescribed inappropriate devices due to a lack of awareness and knowledge on the part of the authorizers and vendors. The already lengthy process can become prohibitive for some of their patients, who then forgo devices that could improve their quality of life. The team at ATC would like to work to break down the silos of the devices community.

ADP Knowledge



Satisfaction with ADP



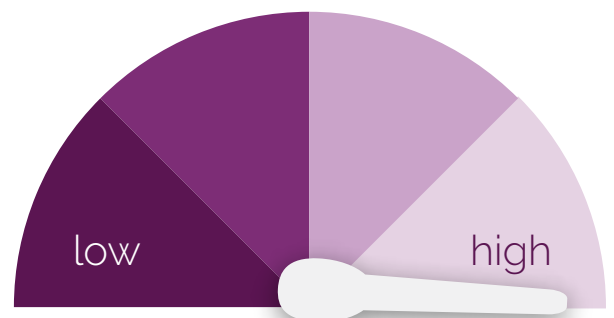
Need for extra funding



Wants to . . .

- Address the knowledge gap that exists for many therapists and vendors
- Break down the silos of the devices industry
- Streamline the ordering process for their clients
- Redefine the authorizer/vendor relationship

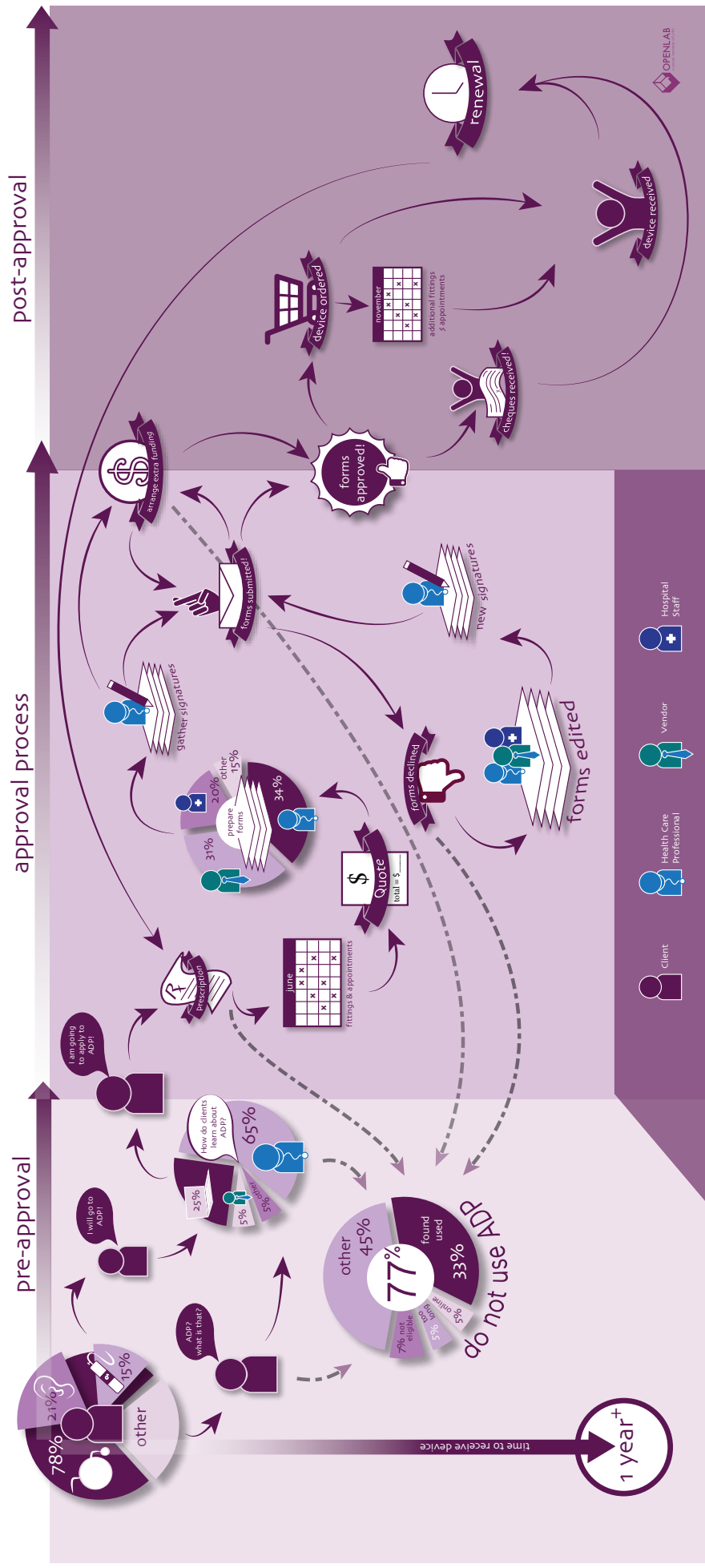
Frustration Level



Appendix 5

access a digital version of the infographic here

Assistive Devices Funding Pathways





Converge3

Integrating health, economic and equity evidence to inform policy

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