

Safety and Rehabilitation

E.H. ASPNES. Everyday rehabilitation supported by technology. Gerontechnology 2018;17(Suppl):103s; <https://doi.org/10.4017/gt.2018.17.s.100.00> **Purpose** Implementing the concept "Everyday Rehabilitation" (hereinafter shortened to ER) is considered as the most important innovation in primary care in Scandinavia during recent years. It represents a paradigm shift of mindset from: "What do you need help with?" to: "What can be trained and arranged for you so you can master what you want?" The purpose of this presentation is to demonstrate the great potential for research and innovation implementing technology supporting the promising ER concept. ER is rehabilitation and prevention while the user lives in his or her own home. It started in Østersund (Sweden) in 1999 with "Home Rehabilitation: Everyday Life and Specific Rehabilitation", and from 2008 the municipality of Fredericia and other Danish municipalities implemented it under the name "Everyday Rehabilitation". Fredericia did serious research on the effects and it showed very positive results¹, both for the person receiving training etc. and for the municipality. Based upon¹, from 2011 implementation started in Norway, and SINTEF played an active role in this phase. Primo 2018 about 50% of the municipalities of Norway have accumulated experience with the concept. What is ER? The process begins with an interdisciplinary team consisting of occupational therapist, physiotherapist and nurse visiting the resident, starting with asking the question: *What is important in your life now?* The team makes a mapping and documentation of: (1) User wishes and experiences; (2) What is important to you now? (COPM Canadian Occupational Performance Measure); (3) ADL function (ADL taxonomy, ADL staircase); (4) Motor Function (General Motor Function, Assessment Scale, Timed Up and Go; and (5) Eventually Cognitive Function. With this starting point, goals and action plans are developed in cooperation with the individual citizen. Then a period of intensive, but time-limited training begins in the resident's home where the team from the municipality often is supplemented by a home trainer. Needs for technical aids is also considered and possibly acquired. **Method** In 2013-2014, SINTEF conducted a pre-project for the Directorate of Health, and under the auspices of InnoMed (<http://innomed.no/information-in-english>) called "Everyday Rehabilitation - Technology Support"². In the project interviews and observations were conducted in two municipalities, Arendal and Kristiansand. Search was also conducted on the web for relevant technologies. **Results & Discussion** The project revealed the needs and opportunities for digitizing mapping tools as well as technology that could assist the resident in achieving his or her goals. An example of the latter is a simple technical solution that can help the resident to safely manage stairs, a very common challenge: <https://assistep.no/en/> (Figure 1). Some students at NTNU (www.ntnu.no) got the idea for this product from a pre-project in InnoMed that revealed the needs for people with movement disabilities. A company was established, and in 2016 the product was nominated by Nordic Innovation as one of the most important innovations in health. In conclusion, both the project² and an InnoMed project investigating opportunities for support for self-training after completed stay with specialized rehabilitation³, a great potential for technological support has been revealed. In addition to many gaming technology solutions, we have examples such as <https://icura.dk/>, www.iaid.dk/en/treax-pads and <http://agilitas.com.au/>.

References

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Figure 1. AssiStep