World Health Organization
USAID FROM THE AMERICAN PEOPLE

WHEELCHAIR

SERVICE TRAINING OF TRAINERS PACKAGE

Trainer's Manual

BASIC LEVEL

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Wheelchair service training of trainers package

Contents: Trainer's manual basic level – Trainer's manual intermediate level – Trainer's manual managers and stakeholders – ToT handbook basic level – ToT handbook intermediate level – ToT handbook managers and stakeholders

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Terminology

The following terms used throughout the WSTPtot are defined below.

ToT trainer	Person delivering the WSTPtot
Trainees	All participants attending the WSTPtot
Lead trainees	Trainees leading the delivery of an assigned WSTPb/i/m/s session
Support trainees	Trainees assigned to support the lead trainee in specific WSTPb/i/m/s sessions
ToT participants	Trainees who are in the role of the WSTPb/i/m/s participants during practice delivery sessions
Participants	People who are attending the WSTPb/i/m/s
ToT Handbook	Combined reference manual and workbook for ToT trainees

Acronyms

The following acronyms used throughout the WSTPtot are defined below.

ASIS	Anterior superior iliac spine
AV equipment	Audio-visual equipment
CBR	Community-Based Rehabilitation
CRPD	United Nations Convention on the Rights of Persons with Disabilities
DPO	Disabled People's Organization
INGO	International Non-governmental Organization
ISO standards	International Organization for Standardization standards
ISPO	International Society of Prosthetics and Orthotics
ISWP	International Society of Wheelchair Professionals
ITs	Ischial tuberosities (seat bones)
NGO	Non-governmental Organization
OPD	Organization of Persons/People with Disabilities
PPT/s	PowerPoint Presentation/s or slides
PSD	Postural Support Device
PSIS	Posterior superior iliac spine
PWDs	Persons with disabilities
SDGs	Sustainable Development Goals
ToT	Training of Trainers
USAID	United States Agency for International Development

WHO	World Health Organization
WSTP	Wheelchair Service Training Package
WSTPb	Wheelchair Service Training Package – Basic Level
WSTPi	Wheelchair Service Training Package – Intermediate Level
WSTPm	Wheelchair Service Training Package for Managers
WSTPs	Wheelchair Service Training Package for Stakeholders
WSTPtot	Wheelchair Service Training of Trainers Package

CONTENTS

About the Wheelchair Service Training of Trainers Package

Introduction

Following the release of its *Guidelines on the provision of manual wheelchairs in less-resourced settings*[1] in 2008, the World Health Organization (WHO) in partnership with the United States Agency for International Development (USAID) developed a series of four training packages to increase wheelchair access in developing countries. The *Wheelchair Service Training of Trainers Package* (WSTPtot) is the latest in this series and focuses on developing trainers to deliver the existing packages.

The need for wheelchair personnel, and therefore trainers of wheelchair personnel, is universal. With the launch of the WSTPtot, WHO expects the numbers of trained wheelchair personnel to increase substantially, enabling many more people to access an appropriate wheelchair and fulfil their potential.

The WSTPtot comprises a *Core training skills* module and one package-specific module from the existing four packages: the *Wheelchair Service Training Package – Basic Level* (WSTPb) 2012; the *Wheelchair Service Training Package – Intermediate Level* (WSTPi) 2013; the *Wheelchair Service Training Package for Managers* (WSTPm) 2015; and the *Wheelchair Service Training Package for Stakeholders* (WSTPs) published in 2015. The WSTPm and WSTPs have been combined into one package-specific module within the WSTPtot.

The WSTPtot can be delivered in 40 hours, but this period may be extended or reduced depending on the specific needs and resources available in each context. On completion of the WSTPtot, a trainee should go forward to deliver their training package alongside an experienced trainer, allowing them to gain the skills and experience to then train independently.

1 Guidelines on the provision of manual wheelchairs in less-resourced settings. Geneva: World Health Organization; 2008 (http://www.who.int/disabilities/publications/technology/wheelchairguidelines/en/).

Target audience

The WSTPtot is made up of four modules:

- *Core training skills* – two days
- *Basic Level* (WSTPb) – three days
- *Intermediate Level* (WSTPi) – three days
- *Managers and Stakeholders* (WSTPm/s) – three days.

All trainees should complete the *Core training skills* module followed by one of the package-specific modules:

- **The *WSTPtot Basic Level*** module is targeted at trainers who plan to deliver the WSTPb. Previous experience providing basic-level wheelchairs is essential; the WSTPtot has been designed assuming that trainees are able to demonstrate the competencies taught in the WSTPb.
- **The *WSTPtot Intermediate Level*** module is targeted at trainers who plan to deliver the WSTPi. Previous experience providing intermediate-level wheelchairs is essential; the WSTPtot has been designed assuming that trainees are able to demonstrate the competencies taught in the WSTPi.
- **The *WSTPtot Managers and Stakeholders*** module is targeted at trainers who plan to deliver the WSTPm and WSTPs. Previous experience implementing, managing or evaluating wheelchair services; or working to raise awareness among stakeholders of the need, benefit or development of wheelchair services is essential for trainees to gain the most from the *WSTPtot Managers and Stakeholders* module.

Trainees should have access to co-training opportunities within three months of completing the WSTPtot in order to consolidate and practise newly acquired skills.

Trainers

Skills: The ToT trainers delivering this package should have:

- significant experience delivering the WSTPb and mentoring others to deliver them
- a good understanding of the context in which they are delivering the WSTPtot
- knowledge of international guiding documents related to wheelchair provision
- the experience and ability to engage stakeholders in discussions about wheelchair provision.

Wheelchair users: As with the other WSTP, inclusion of wheelchair users in the training team is highly recommended. Wheelchair users can draw on their own experiences to give a valuable perspective on how appropriate wheelchair provision affected their feeling of inclusion and quality of life. They can also talk about the central role wheelchair users play in the selection of their own wheelchair.

Number of ToT trainers: Trainees need to be closely supported, so it is recommended that there is one ToT trainer for every four to five trainees for the *Basic* and *Intermediate* modules, and one ToT trainer for every six trainees for the *Managers and Stakeholders* module.

How to get started

Before running the ToT programme, copy the WSTPtot folder from the WSTP Pen Drive to your computer's hard drive.

- Read *1. Guidance notes for ToT trainers* below. Prepare materials in the tables on pages xviii-xxiv.
- Make all the necessary arrangements, as described in the section *How to prepare to deliver the training package*.
- Give each trainee a full set of the training materials listed on pages xviii-xxii of this manual.

1. Guidance notes for ToT trainers

Training overview

Core training skills **module**	**Minutes**	**Day**
ToT.1 *Introduction to the Wheelchair Service Training of Trainers Package*	75	Day 1
ToT.2 *Wheelchair service training packages*	90	
ToT.3 *Practice delivery sessions*	60	
ToT.4 *Preparing for diversity*	60	
ToT.5 *Adult learning*	85	
ToT.6 *Preparation time*	15	
Preparation	45	
ToT.7 *Presenting and facilitating*	60	Day 2
ToT.8 *Communication skills*	90	
ToT.9 *Knowledge of guiding documents*	75	
ToT.10 *Audio-visual tools and equipment*	45	
ToT.11 *Feedback*	45	
ToT.12 *Managing group dynamics*	40	
Preparation	75	
Basic Level **module**		
A.1 Wheelchair users	35	Day 3
A.3 Wheelchair mobility	120	
A.4 Sitting upright	55	
A.5 Pressure sores	70	
A.6 Appropriate wheelchairs (part 1)	45	
Session preparation, ToT trainer individual feedback	75	
A.6 Appropriate wheelchairs (part 2)	88	Day 4
A.7 Cushions	85	
A.8 Transfers	90	
B.3 Assessment interview	100	
Session preparation, ToT trainer individual feedback	60	

Basic Level module		
B.4 Physical assessment	95	Day 5
B.5 Prescription	135	
B.7 Product preparation	45	
B.9 Fitting	70	
B.13 Follow-up	40	
Evaluation	15	
Closing ceremony	15	
Total training time	**2100**	

Training package timetable and duration

The WSTPtot *Core training skills* and *Basic Level* modules can be delivered on consecutive days or in blocks over a period of time. A sample five-day timetable is available in the WSTPtot folder on the WSTP Pen Drive.

ToT trainers are encouraged to adapt and modify the timetable to suit the local context and the learning needs of trainees.

Core training skills session plans

The *Core training skills* module is made up of 12 sessions that each begin with a detailed session plan. The plan covers the following key points and is designed to help ToT trainers organize and deliver the sessions.

- Aim – what is the aim of the session
- Learning objectives – what will trainees have achieved by the end of the session
- Resources – what resources are needed for the session
- To prepare – checklist to help the ToT trainer prepare for the session
- Outline – the main contents of the session with timing.

ToT trainers are encouraged to bring their own knowledge, skills and style to the sessions and to draw out the trainees' experience throughout the WSTPtot.

WSTPb session plans

After completing the *Core training skills* module, trainees go on to the second part of the WSTPtot where they will practise the training skills they have learnt by delivering sessions from the WSTPb. Sessions are allocated to trainees and their delivery is followed by feedback and discussion. The practice delivery sessions allow the ToT trainer to observe and assess the trainees' skills.

- **Practice delivery:** Each practice delivery includes presentations of allocated sections of a session by the trainee.
- **ToT trainer demonstrations:** some sessions include a section that the ToT trainer will deliver as an example of good practice.
- **Feedback:** After the session, the ToT trainer will facilitate feedback from the trainee and the ToT participants. Further instructions for providing feedback can be found on page xxiii–xxiv of this manual, *Guide to facilitating practice delivery sessions.*

Prepare trainees for practice deliveries

To enable trainees to prepare well for the WSTPtot, it is important to give them the WSTPb materials in advance. This can be a paper copy of the package, an e-copy or a link to download it. Trainees should be prepared to deliver any of the sessions.

A sample letter for trainees to prepare for the WSTPtot can be found in the WSTPtot folder on the WSTP Pen Drive.

Practice delivery allocations

Example practice delivery allocations can be found in the *WSTPtot Basic Level allocation* document in the WSTPtot folder. ToT trainers should modify this to their training context and trainee numbers. Practice delivery sessions are assigned during the first day of the *Core training skills* module in session *ToT.3 Practice delivery sessions.*

Note: If trainees have already attended the Core training skills module and will begin directly with the WSTPb module, they should be notified of their practice delivery sessions two-to-three days in advance.

Mentoring and peer support

The ToT trainer has an important role to play as a mentor. Each trainee must be allocated a mentor ToT trainer at the beginning of the training programme. ToT trainers should divide trainees equally between them. As a mentor the ToT trainer is the trainee's main point of contact for questions about their practice delivery sessions and is also there to provide feedback on the trainee's progress.

ToT trainers are encouraged to continue to mentor trainees after the WSTPtot.

Trainees can also get valuable ongoing support from their peers, which will help them to develop their skills and confidence. Trainees may benefit from joining or creating a group on a social media platform, to ask questions and share learning experiences.

Co-training

After completing the WSTPtot, trainees should continue to develop their skills by co-training alongside experienced trainers. ToT trainers should promote co-training experiences as the best way for trainees to continue to develop their training skills after completing the WSTPtot.

The recommended ratio for co-training is one mentor trainer for every two to four co-trainers.

In some cases, ToT trainers may recommend that trainees develop stronger clinical or technical knowledge or skills before co-training. This information should be recorded in the feedback from practice deliveries and shared with the trainee.

Evaluating the ToT programme after each delivery

It is good practice to evaluate every training programme after it has been delivered. ToT trainers should gather regular feedback from trainees and record their own thoughts during the ToT programme. This will help ToT trainers to improve both the WSTPtot and their own training skills. It is very helpful if you can provide feedback and data including:

- participant registration and evaluation forms
- your reflections or comments on the WSTPtot.

Training programme evaluation forms are available in the WSTPtot folder on the WSTP Pen Drive and can be adapted by ToT trainers to meet their specific needs.

2. How to prepare to deliver the training package

Know the background of each trainee

It is important to be familiar with the background of each trainee. This includes:

- understanding what experience the trainee already has in wheelchair provision
- being aware of any training programmes the trainee has already attended or delivered
- knowledge of future opportunities for the trainee to deliver the WSTPb.

Find out how wheelchair service delivery and training fits within the trainee's overall duties at their place of work.

Prepare the training facilities

To run the WSTPtot you will need:

- one large training room (or space) that is big enough to allow trainees to divide up and work together in small groups and quiet enough to enable trainees to concentrate
- a separate space for lunch/refreshments
- clean toilets

All areas, including toilets, must be wheelchair accessible.

The following checklist can be used to assess and prepare training facilities.

Facilities checklist

Training room	
Lecture area	☐
Chairs for each trainee with a flap-tray or other facility so trainees can write notes	☐
Space for trainees to break into small groups of two-to-four people	☐
Space to display at least three wheelchairs and be able to move them around	☐
Adequate lighting and ventilation	☐
Lockable/secure space	☐
Lunch/refreshment area	
Clean area for eating	☐
Tables and chairs	☐
Nearby space for washing hands – clean towels and soap	☐
Toilets	
Clean toilets supplied with water, toilet paper, washing facilities and bins	☐

Prepare the training resources and equipment

WSTPtot printed resources

Resource	Quantity	X	Comments/instructions
Manuals			
ToT Trainer's Manual	1 per ToT trainer (for each module delivered)	☐	Print and bind.
ToT Handbook	1 per trainee (for each module delivered) and 1 per ToT trainer	☐	Print and bind.
WHO *Guidelines on the provision of manual wheelchairs in less-resourced settings*	1 per trainee	☐	Print and bind or provide a soft copy.
United Nations *Convention on the Rights of Persons with Disabilities (CRPD)*	1 per trainee	☐	Print and bind or provide a soft copy.
Set of printed resources for package-specific module (WSTPb)	1 per trainee and ToT trainer	☐	This includes manuals, workbooks, posters, forms and checklists. See table below for more details.

Training programme forms			
Participant registration form	1 per programme	☐	Use this form to keep a record of trainees attending.
Name tags	1 per trainee and per ToT trainer	☐	–
Timetables (*Core training skills* and package-specific module)	1 per trainee for each relevant module	☐	Sample for each module available on WSTP Pen Drive; adjust to suit local context.
Photo consent form	1 form	☐	Adapt this form for the host/ training organization; translate into local language; ensure any person who is photographed signs this form.
Trainee certificate	1 per trainee	☐	Prepare trainee certificates or adapt the template provided on the WSTP Pen Drive.
Training programme evaluation forms • *Core training skills* • Package-specific module	1 per trainee	☐	Collate information after delivery and share with WHO.
Feedback sheet for WSTPtot practice delivery sessions	ToT trainer will require 1 per trainee	☐	Print at least 1 per trainee. This sheet can be used to provide feedback on up to 3 practice deliveries.

WSTPb printed resources

Resource	Quantity	X	Comments/instructions
Manuals, workbook and posters			
Trainer's Manual	1 per trainee and ToT trainer	☐	Print and bind.
Reference Manual	1 per trainee and ToT trainer	☐	Print and bind.
Participant's Workbook	1 per trainee and ToT trainer	☐	Print and bind.
Set of posters, including: Wheelchair service steps Wheelchair mobility skills Pressure sores How to care for a wheelchair at home.	1 per trainee and ToT trainer	☐	–
Wheelchair service forms and checklists:			
Wheelchair service referral form	1 per trainee and ToT trainer	☐	–
Wheelchair assessment form		☐	Print the updated form from the WSTP Pen Drive.
Wheelchair prescription (selection) form		☐	–
Wheelchair summary form		☐	–
Wheelchair follow up form		☐	–
Wheelchair fitting checklist		☐	Print and laminate. Checklists can be found in the WSTPb resources under *Forms, and checklists.*
Wheelchair user training checklist		☐	
Wheelchair safe and ready checklist		☐	

Equipment

General training equipment

Item	Quantity	X	Comments/instructions
Large whiteboard	1	☐	–
Whiteboard marker pens	3–4	☐	Various colours
Data projector	1	☐	–
Computer	1	☐	–
Portable speakers	1 set	☐	To improve video sound quality
Pointer/remote control	1	☐	–
Flipchart stand and paper	1–2 stands and 1 pack of paper	☐	–
Flipchart pens	3–4	☐	Various colours
Post-it notes	3–4 blocks	☐	Various colours
Masking tape or similar	1 roll	☐	To attach flipchart sheets and posters to walls
Extension cord	At least 1	☐	–
Multi-plugs/adapters	As needed	☐	–

Basic Level equipment

Item	Quantity	X	Comments/instructions
Assessment bed	3	☐	–
Set of foot blocks	2	☐	–
Transfer board	3	☐	–
Tape measures	4	☐	Firm retractable tape measure in mm (not soft dressmaker's tape measure).
Anatomical model of the spine and pelvis	1	☐	Preferably with short femurs (if available)
Wheelchairs and cushions, including: • Rigid frame 3-wheel • Rigid frame 4-wheel • Folding frame with adjustment options • Basic folding frame (such as hospital or transfer type).	At least 1 of each locally available	☐	Ensure all wheelchairs are in good working order and have cushions. Ensure there is at least one good example of a pressure relief cushion. Examples should include a mix of short and long wheel bases and a variety of arm and foot rests.
Sample contoured foam pressure relief cushion and cover	1	☐	–
Sample cushion lift	1	☐	–
Hacksaw blades or long knives	1 per 3 participants	☐	–
Black permanent markers	1 per 3 participants	☐	–
Firm foam (chip foam)		☐	5 50 × 400 × 400 mm pieces
Soft foam		☐	5 50 × 400 × 400 mm pieces
Sample fabric for cushion covers	1 of each type locally available	☐	–

Get to know the training resources

As a ToT trainer, you will need a comprehensive knowledge of all the WSTPb resources. This includes familiarizing yourself with all aspects of the package-specific *Trainer's Manual* as well as the *Reference Manual for Participants, Participant's Workbook* and other resources on the WSTP Pen Drive.

You should also be familiar with all sections of the *ToT Trainer's Manual* and the *ToT Handbook*. You may be co-training the WSTPtot with another ToT trainer, however it is important for you to be familiar with all sessions. For example, you will need a good understanding of all the *Core training skills* taught in the WSTPtot and to model them as good practice during your own session deliveries.

Guide to facilitating practice delivery sessions

- Monitor the delivery time and stop the trainee when their allocated time is up, even if they have not finished.
- Where a session is shared by two or more trainees, to keep things moving run the whole session before facilitating feedback for each of the trainees in turn (unless the session requires a break due to WSTPtot timing).
- Be familiar with the *Errors in the WSTP materials* and *Key considerations for teaching this session* in the *ToT Trainer's Manual,* and watch to see if the trainee has addressed them.
- Follow the session in the WSTP *Trainer's Manual* and the *ToT Trainer's Manual.*
- During the delivery, complete the *Feedback sheet for WSTPtot practice delivery sessions,* found on the WSTP Pen Drive.
- During practical activities don't step in too quickly if the session is not running smoothly. Allow the trainees time to rectify the situation and redirect participants themselves. Only step in if there are safety concerns, or if trainees are unable to bring the session back on track themselves.

Facilitating feedback after practice deliveries

Your role is to facilitate the feedback sessions and ensure they are brief, constructive and relevant.

After the practice delivery is completed, go through the following process.

Self-reflection	• Ask trainee to comment on what they did well, followed by what can be improved.
Participant feedback	• Facilitate feedback from ToT participants, asking them to provide one comment on what the trainee did well, followed by one comment on what can be improved.
ToT trainer feedback	• ToT trainers to feedback, using the trainee skills list* for guidance. It is not necessary to comment on every competency: focus only on the areas the group as a whole can learn from, and which reinforce learning from the *Core training skills* sessions. Do not repeat what has already been mentioned by the trainee or ToT participants.
Key points	• Discuss any *Key considerations for teaching this session* not yet addressed through the trainee's delivery and/or by the ToT trainer feedback.

** Found in the Feedback sheet for WSPTtot practice delivery sessions.*

Closely monitor the feedback to ensure that it is constructive. Step in if a participant gives feedback that is negative or hurtful. Give examples of how to rephrase feedback so that it is constructive.

Individual feedback

Based on the ToT trainer mentor allocations, ToT trainers arrange a time to discuss feedback with each lead trainee, using the *Feedback sheet for WSTPtot practice deliveries* as a guide. Use this time to also feedback any additional or sensitive comments.

Core training skills module

ToT.1 Introduction to the Wheelchair Service Training of Trainers Package

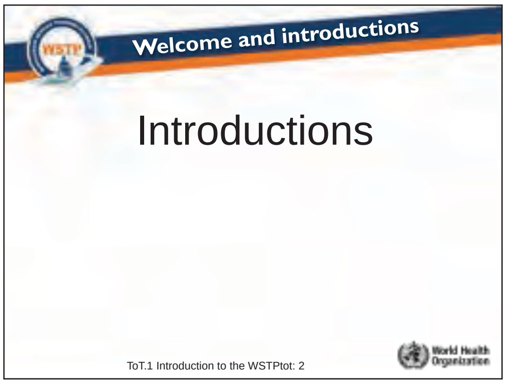
AIM	To introduce trainees to the Wheelchair Service Training of Trainers Package (WSTPtot).
LEARNING OBJECTIVES	By the end of this session trainees will be able to: ☐ describe the aim and objectives of the ToT programme ☐ explain the ToT programme timetable and WSTPtot process.
RESOURCES	For the session: ☐ PPT slides: *Core training skills ToT.1: Introduction to the WSTPtot* ☐ name tag for each ToT trainer. For each trainee: ☐ different coloured sticky notes (A5 or similar): 3 or 4 pieces ☐ *ToT Handbook* ☐ module-specific WSTP trainer's manual, participant's reference manual and workbook, posters and WSTP Pen Drive ☐ *WHO Wheelchair Guidelines* and the *United Nations Convention on the Rights of Persons with Disabilities (CRPD)* ☐ timetables for *Core training skills* module and package-specific module ☐ blank name tag.
TO PREPARE	☐ Gather resources, review PPT slides and read through the session plan. ☐ Review related notes in the *ToT Handbook*. ☐ Arrange a short opening ceremony for the WSTPtot as locally appropriate. ☐ Prepare the housekeeping information. ☐ Prepare flipchart papers for Ground Rules and Car Park. ☐ Set up the training room: tables and chairs; projector, computer and screen; whiteboard; flipchart stand and paper; and markers. ☐ Sort resources into sets for each participant and set them out. To avoid confusion only provide trainees with the *ToT Handbook*, their package-specific WSTP *Trainer's Manual* and the ToT timetable at the start of the day. Provide remaining resources at the end of the day. ☐ Prepare a Wall of Experience. Print or write headings given in Section 5 on large sticky notes or A5 paper and put them on the wall under a Wall of Experience heading.

OUTLINE		
	1. Opening ceremony	10
	2. Welcome and introductions	10
	3. Introduction to this session	1
	4. Housekeeping and Ground Rules	10
	5. Wall of Experience	15
	6. Overview of the WSTPtot	27
	7. Key point summary	2
	Total session time	**75**

1. Opening ceremony (10 minutes)

In collaboration with the host organization, hold an opening ceremony for the WSTPtot as locally appropriate.

2. Welcome and introductions (10 minutes)

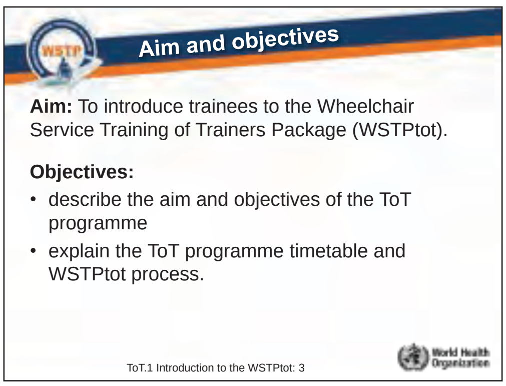


ToT trainers: Welcome everyone and introduce yourselves. Give a brief overview of your background and your experience in wheelchair provision and training.

Ask trainees to introduce themselves, giving their name, job role and organization.

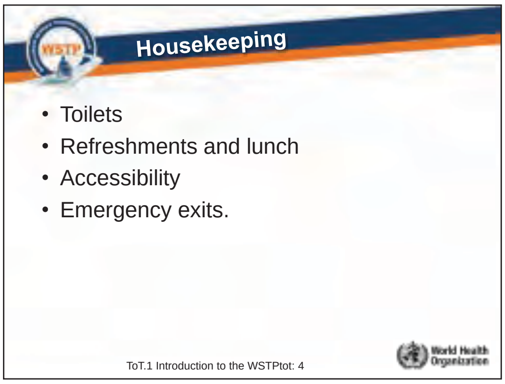
Give out name tags and ask trainees to write their name.

3. Introduction to this session (1 minute)



Explain the aim and objectives of the session.

4. Housekeeping and Ground Rules (10 minutes)



Explain the following, as required:

- location of toilets
- refreshments and lunch arrangements
- any accessibility issues
- what to do if there is an emergency
- any other administration issues.

Show the slide throughout the activity.

Activity 1	
Groups:	**Divide** trainees into pairs.
Instructions:	**Explain:** We will now establish the Ground Rules for this training. **Ask** trainees to briefly discuss the Ground Rules they would like to have in place for the week.
Monitor:	**Monitor** the groups and assist as needed.
Time:	**Allow** 2 minutes for the activity and 5 minutes for feedback.
Feedback:	**Ask** each pair to give one item from their list and record each rule on the flipchart until there are no more ideas. **Gather** feedback from trainees to ensure they agree on the rules. **Ask** how the group wants to manage people who break these rules. **Pin up** the Ground Rules on the wall for reference throughout the ToT programme.

Notes for ToT trainers:

- ***Explain*** *that everyone is responsible for enforcing the Ground Rules, not just the ToT trainer.*
- ***Refer*** *trainees to the list each time a Ground Rule is broken.*

Examples of Ground Rules include:

- *mobile phones – switch to silent*
- *no side talking or talking over other people*
- *respect for others' points of view*
- *be on time for all sessions*
- *keep the training area clean and tidy*
- *contribute to the discussions*
- *use appropriate disability terminology.*

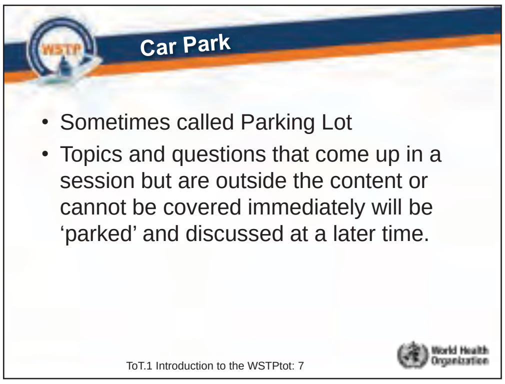
Explain:

- The WSTP promotes the use of positive terminology in relation to people with disabilities.
- Trainers must model good practice and follow the language guidance set out in the WSTP and the *CRPD*.
- Terms such as 'the disabled' or 'disabled people' or 'special people' are not appropriate, and should not be used.
- Always use 'persons with disabilities' or 'people with disabilities'.
- Avoid using the term 'normal people' when referring to people without disabilities.

Add 'use appropriate disability terminology' as a Ground Rule if it is not listed. Suggest that trainees monitor the use of positive terminology throughout the ToT.

Notes for ToT trainers:

- *Although we recommend avoiding use of the term 'disabled people', the terms 'Disabled People's Organization' and 'DPO' are still in wide use and generally accepted. Encourage the use of the term 'Organization of Persons/People with Disabilities' (OPD), which is becoming increasingly common.*

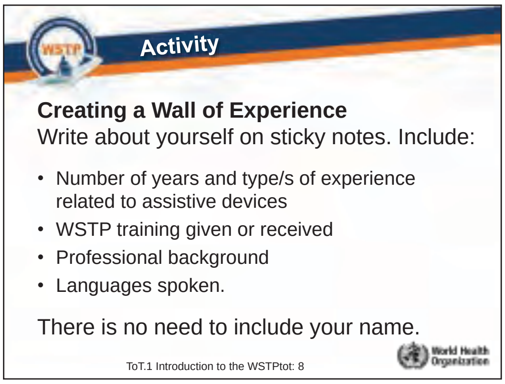


Explain:

- During the training, you may have questions that the trainers are unable to answer immediately, or that may be covered during a later session.
- These questions will be placed in the Car Park to be discussed at an appropriate time.

Pin up the Car Park flipchart on the wall.

5. Wall of experience (15 minutes)

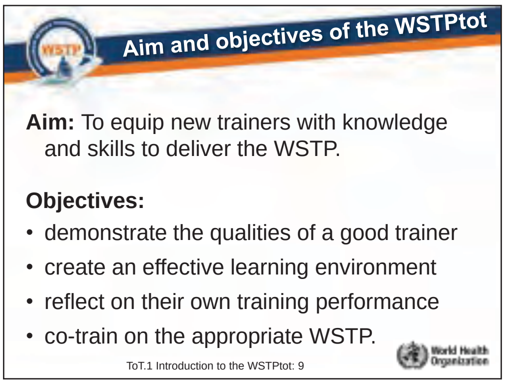


Show the slide throughout the activity.

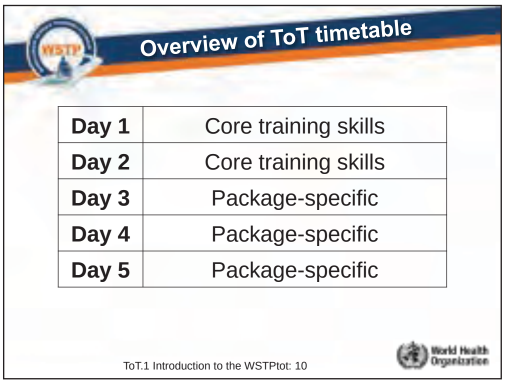
Activity 2	
Groups:	**Ask** trainees to work alone.
Instructions:	**Put** the Wall of Experience headings on the wall, including: • WSTP training given or received • number of years and type/s of experience related to assistive devices • professional background • languages spoken. **Explain:** We all come to this training with different types of experience, knowledge and skills. We will create a Wall of Experience together. Write your answers using sticky notes in a different colour for each heading (or more than one if required). **Ask** trainees to write clearly and then stick their notes up onto the wall under each heading.
Monitor:	**Monitor** the trainees and assist as needed. **Check** that trainees are writing clearly, with one statement on each piece of paper/card.
Time:	**Allow** 10 minutes for the activity and 5 minutes for feedback.
Feedback:	**Ask** trainees to comment on the Wall of Experience. **Draw attention** to the wealth of existing knowledge, skills and experience in the room. **Emphasize** that trainees have already progressed a long way to get to this point and they will build up even more experience from here.

Notes for ToT trainers:
• *Keep referring to this Wall throughout the programme and link this to other parts of the training as appropriate.*

6. Overview of the WSTPtot (27 minutes)



Explain the aim and objectives of the WSTPtot.



Ask trainees to look at their copy of the ToT timetable.

Explain: the ToT is divided into two sections:

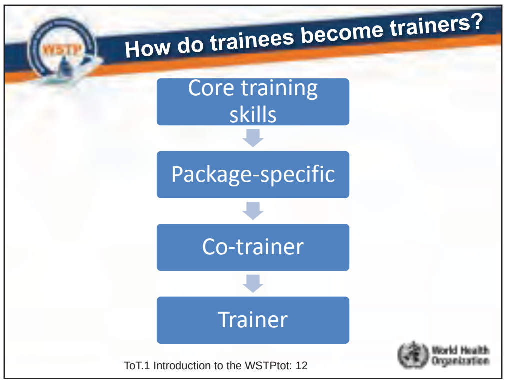
- *Core training skills* module
- package-specific module, during which trainees will practise delivering WSTP sessions to their peers.

Notes for ToT trainers:
• *While there are four Wheelchair Service Training Packages, there are only three package-specific modules because the Managers and Stakeholders packages are covered in one module.*

Introduce the resources that are being provided to each trainee. Briefly **explain** and **show** each one. **Explain** that some of the materials will be distributed at the end of the day.

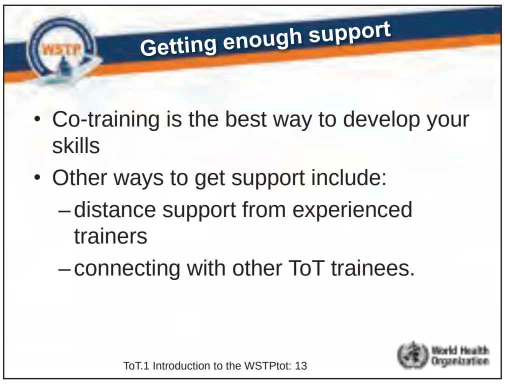
Explain: in order to get the most out of the WSTPtot, trainees should:

- have completed one or more WSTP
- have experience in wheelchair service provision or the disability sector
- be able to read and write in the language used to deliver the ToT programme
- have some experience of training or facilitating
- have opportunities to deliver the package after the ToT programme.



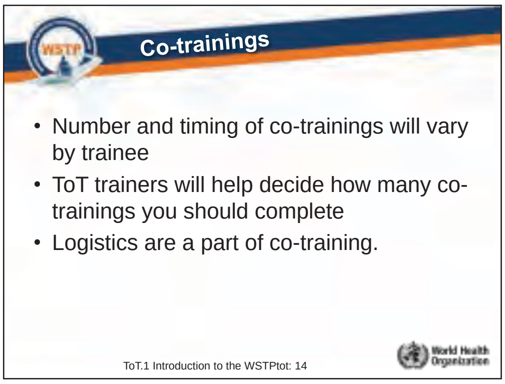
Explain:

- Co-training takes place after the ToT programme and before trainees train independently. Co-training experiences are the best way to further develop your training skills after completion of the WSTPtot.
- After completing the ToT programme, all trainees should have at least one co-training experience.
- Co-training with an experienced trainer will help strengthen your training skills including:
  - planning and preparing to deliver the WSTP
  - presenting and facilitating
  - mentoring participants
  - coordinating training logistics.



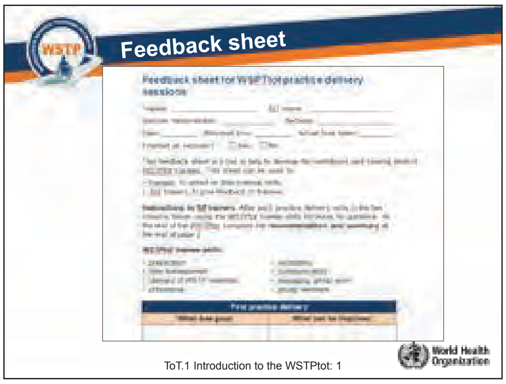
Explain: if you are unable to co-train with experienced trainers consider other ways to get the support you need, such as:

- contacting experienced trainers and asking them to mentor you from a distance – through email and phone contact
- connecting with other ToT trainees and supporting each other through the planning, preparation and delivery of the WSTP.



Explain:

- The number of co-trainings you will complete will vary by trainee.
- The timeframe for becoming a trainer will also vary based on when co-trainings are available and how many co-trainings you complete.
- ToT trainers and trainers who mentor you while co-training will support you in deciding how many co-trainings you should complete before training on your own.

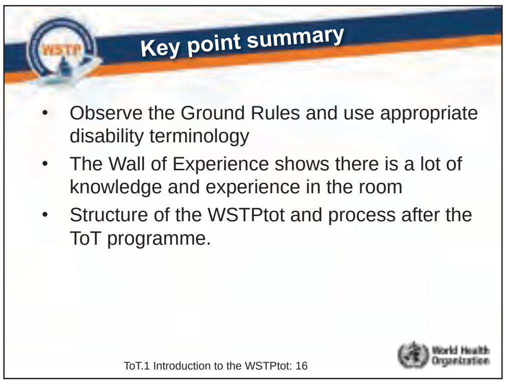


Ask trainees to look at their copy of the *Feedback sheet for WSTPtot practice delivery sessions* in their *ToT Handbook* on page 132–134.

Explain:

- Reflecting or thinking about what you do well and what can be improved will help you to become a better trainer.
- The *Feedback sheet for WSTPtot practice delivery sessions* includes a list of the trainee skills that this training aims to develop.
- The feedback sheet will be used to guide feedback to trainees after each practice delivery.
- ToT trainers will also use it to provide feedback to lead trainees at the end of each day, and written feedback at the end of the ToT programme.

7. Key point summary (2 minutes)



Read the key points.

Ask whether there are any questions.

WALL OF EXPERIENCE

Number of years and type/s of experience related to assistive devices

WSTP training given or received

Professional background

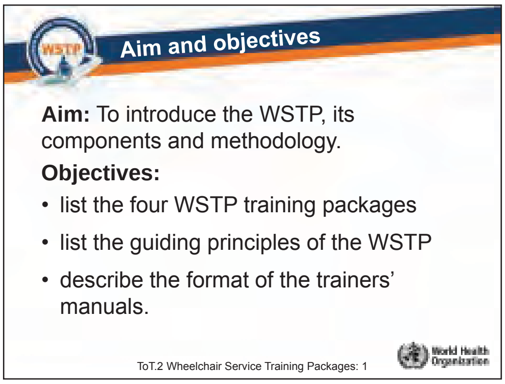
Languages spoken

ToT.2 Wheelchair Service Training Packages

AIM	To introduce the WSTP, its components and methodology.
LEARNING OBJECTIVES	By the end of this session trainees will be able to: ☐ list the four WSTP ☐ list the guiding principles of the WSTP ☐ describe the format of the trainers' manuals for each package.
RESOURCES	For the session: ☐ PPT slides: *Core training skills ToT.2: Wheelchair Service Training Packages* ☐ hard copy of the *Trainer's Manual* for each trainee: WSTPb, WSTPi or WSTPm and WSTPs, according to the package-specific modules trainees will attend after the *Core training skills* module.
TO PREPARE	☐ Gather resources, review PPT slides and read through the session plan. ☐ Review related notes in the *ToT Handbook.* ☐ If possible, embed the WSTP Pen Drive link into PPT slide 20 to demonstrate its use.

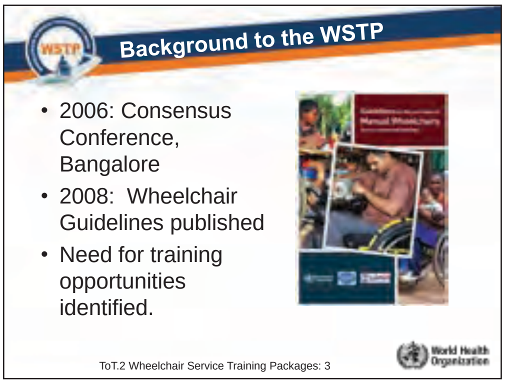
OUTLINE		
	1. Introduction	2
	2. Background and rationale of the four WSTP	15
	3. Structure of the different WSTP	5
	4. Getting to know the *Trainer's Manual*	30
	5. How to use the WSTP	35
	6. Key point summary	3
	Total session time	**90**

1. Introduction (2 minutes)



Explain the aim and objectives of the session.

2. Background and rationale of the four WSTP (15 minutes)



Explain:

- The Consensus Conference on Wheelchairs for Developing Countries, held in Bangalore, India, in November 2006[1] laid the foundation for the *WHO Guidelines on the provision of manual wheelchairs in less-resourced settings.*[2]
- The *Wheelchair Guidelines* identified the need for training opportunities, which led to the development of the WSTP Basic, Intermediate, Managers, and Stakeholders.

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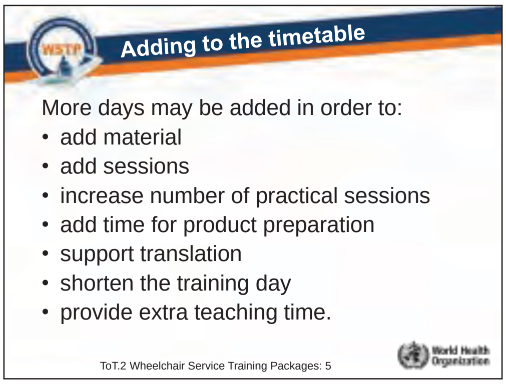
1 Sheldon S, Jacobs NA, editors. Report of a Consensus Conference on Wheelchairs for Developing Countries, Bengaluru, India, 6–11 Nov 2006. Geneva: World Health Organization; 2006 (http://www.who.int/disabilities/technology/WCGconcensusconf/en/).

2 Guidelines on the provision of manual wheelchairs in less-resourced settings. Geneva: World Health Organization; 2008 (http://www.who.int/disabilities/publications/technology/wheelchairguidelines/en/).

Explain:

- The WSTPb[3] trains personnel to provide an appropriate manual wheelchair and cushion for adults and children who have mobility impairments but can sit upright without additional postural support.
- The WSTPi[4] trains personnel to provide an appropriate manual wheelchair and cushion for adults and children who need additional postural support to sit upright.



Explain:

- Both the WSTPb and WSTPi are designed to be delivered in a minimum of five days.
- Extra time can be added to the training programme to:
  - add material to the session plans
  - add sessions
  - increase the number of practical sessions with wheelchair users
  - provide more preparation time for products used in the training
  - allow for translation
  - reduce the length of training days
  - provide extra time to learn key concepts.

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3 Wheelchair Service Training Package – Basic Level. Geneva: World Health Organization; 2012 http://www.who.int/disabilities/technology/wheelchairpackage/en/

4 Wheelchair Service Training Package – Intermediate Level. Geneva: World Health Organization; 2013 (http://www.who.int/disabilities/technology/wheelchairpackage/wstpintermediate/en/).

Explain:

- The WSTPb and the WSTPi are intended to increase the number of personnel trained in wheelchair service delivery.
- However, trained personnel alone cannot ensure appropriate wheelchair provision without higher-level involvement.
- To support the development of services, WHO developed:
  - WSTPm[5] – designed to guide managers to effectively support appropriate wheelchair provision. This includes promoting the involvement of managers and stakeholders in establishing appropriate wheelchair provision. WSTPm can be delivered in a minimum of two days.
  - WSTPs[6] – designed to create awareness and develop the skills and knowledge of all stakeholders in establishing appropriate wheelchair provision in their country/region. It can be delivered in a minimum of four hours.
- Both packages can be delivered over a longer period allowing time for translation, more detailed discussion and planning, or to combine with other sessions relevant to the local context, such as a stakeholder action-planning meeting.

5 Wheelchair Service Training Package for Managers. Geneva: World Health Organization; 2015 (http://www.who.int/disabilities/technology/wheelchairpackage/wstpmanagers/en/).

6 Wheelchair Service Training Package for Stakeholders. Geneva: World Health Organization; 2015 (http://www.who.int/disabilities/technology/wheelchairpackage/wstpmanagers/en/).

Explain: The WSTP has been developed following a set of guiding principles, including:

- a user-centred and rights-based approach, which sets the wheelchair user at the centre of the wheelchair service
- following available evidence-based, international best practice
- a focus on less-resourced settings
- inclusion of wheelchair users as trainers and target participants in all training packages.

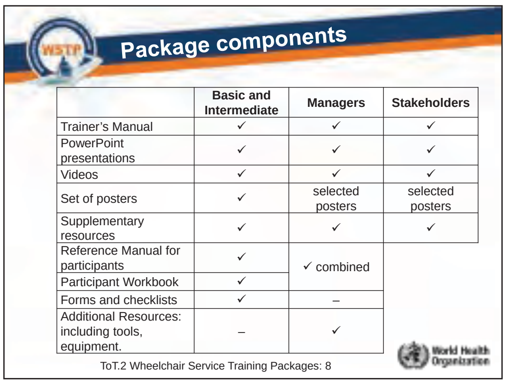
Explain: The WSTP uses accessible, non-medical language and terminology so that:

- participants without clinical or technical qualifications can be trained
- service personnel can use terms that are easily understood by wheelchair users.

3. Structure of the different WSTP (5 minutes)

Notes for ToT trainers:

- *Keep this section brief, as more details are given later in the ToT programme during the package-specific modules that follow the Core training skills. Focus on the WSTP the trainees will deliver during the following package-specific module.*

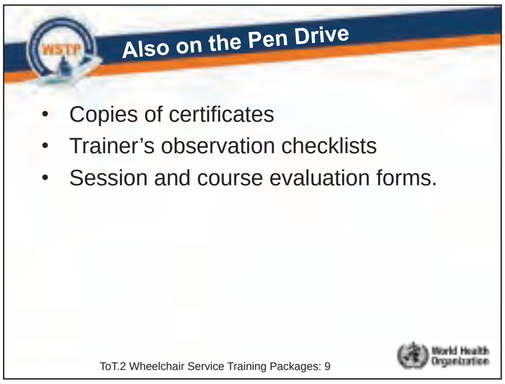


	Basic and Intermediate	Managers	Stakeholders
Trainer's Manual	✓	✓	✓
PowerPoint presentations	✓	✓	✓
Videos	✓	✓	✓
Set of posters	✓	selected posters	selected posters
Supplementary resources	✓	✓	✓
Reference Manual for participants	✓	✓ combined	
Participant Workbook	✓		
Forms and checklists	✓	–	
Additional Resources: including tools, equipment.	–	✓	

Explain: Each package contains a range of resources:

- a *Trainer's Manual,* PPT presentations, videos and posters
- reference manuals for participants are available for WSTPb, WSTPi and WSTPm
- service forms, checklists and a separate participant workbook are included in the WSTPb and WSTPi.

Explain: All the WSTP materials are provided on the WSTP Pen Drive included in your training resources. They can also be downloaded from the WHO website.

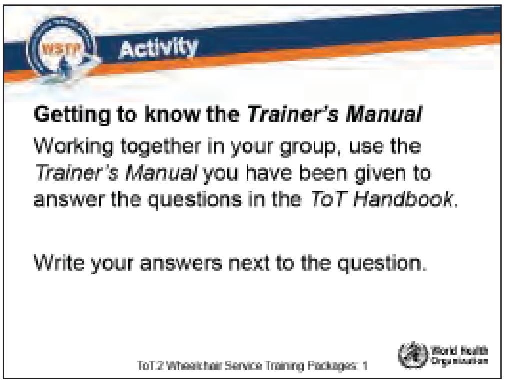


Explain: The WSTP Pen Drive also contains:

- certificates
- trainer's observation checklists
- evaluation forms.

These will not be used during the ToT, but should be used during delivery of the WSTP.

4. Getting to know the *Trainer's Manual* (30 minutes)



Explain: While the four WSTP cover different subjects, they all have the same structure and approach. We will become more familiar with the structure during this activity.

Show the slide throughout the activity.

Activity 1	
Groups:	**Divide** trainees into pairs. If trainees will be attending different package-specific modules after the *Core training skills* module, pair trainees with others who will learn to train the same package.
Instructions:	Each pair will need at least one copy of the *Trainer's Manual* for the WSTPb, WSTPi or WSTPm. **Explain** that the aim of this activity is to familiarize trainees with the Trainer's Manual. **Ask** pairs to work together to answer the questions in the *ToT Handbook.*
Monitor:	**Monitor** the groups and assist as needed.
Time:	**Allow** 15 minutes to find the answers and 10 minutes to feedback.

Feedback:	Questions	Answers
	1. Where can you see a list of everything included in the *Trainer's Manual?*	In the list of contents at the beginning of the manual.
	2. How are group activities shown in the sessions?	There is an *Activity* table describing the groups, instructions, monitoring, time and feedback for each activity.
	3. Where can you find the overall aim or purpose of the training package?	In the section headed *Purpose* on page 2.
	4. How does the session plan indicate when the trainer should show a PowerPoint slide?	An image of each slide is shown on the left-hand side of the page in the session plan, in the order of delivery, next to the related text.
	5. Where can you find out what facilities, resources and equipment are needed to run the training sessions?	Lists are provided in Section 2 of the *Trainer's Manual: How to prepare to deliver the training package:* • on page 14 in WSTPb, and WSTPi • on page 9 in WSTPm.

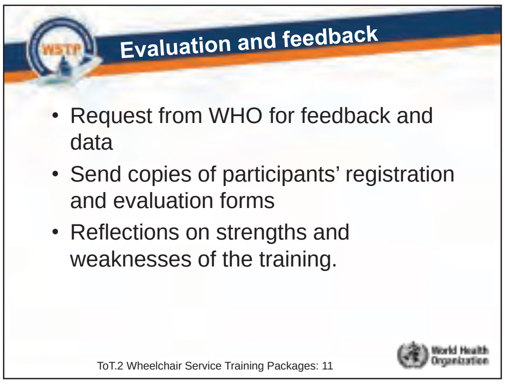
5. How to use the WSTP (35 minutes)

Ask participants to turn to the first section of the *Trainer's Manual: About the Wheelchair Service Training Package.*

Explain: There are helpful notes and guidance for trainers in the front of each *Trainer's Manual.*

Ask one of the participants to read out the headings in this section of the *Trainer's Manual.*

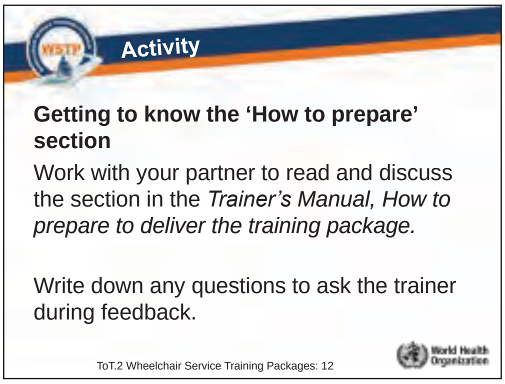
Most important answers:
• Introduction • Target audience • Purpose • Scope • Trainers • How to get started.



Explain:

- On the WSTP Pen Drive you will see a file called *Read Me First*. This is an important document.
- It includes a request from WHO to provide feedback and data from the WSTP training programmes that you deliver including:
  – participant registration and evaluation forms
  – trainer's reflections or comments on the training.

Explain that section 2 of the *Trainer's Manual* is called *How to prepare to deliver the training package* (or for WSTPs *How to prepare for the Stakeholder Workshop*).



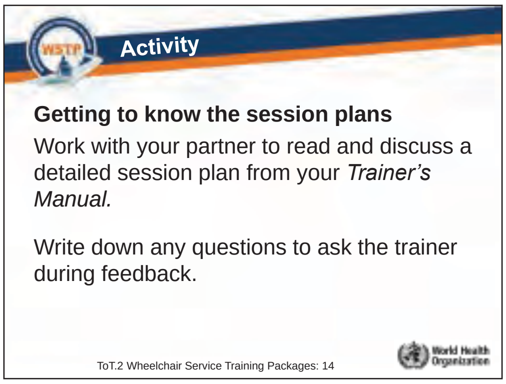
Show the slide throughout the activity.

Activity 2	
Groups:	**Divide** trainees into the same pairs as the previous activity.
Instructions:	**Ask** trainees to look through the section on *How to prepare to deliver the training package* with their partner, reading and discussing the different sections. **Ask** trainees to write down any questions they have.
Monitor:	**Monitor** the groups and assist as needed.
Time:	**Allow** 7 minutes to discuss and 5 minutes to answer questions.
Feedback:	**Ask** the whole group if they have any questions related to their training package. Broader questions about the training can be parked in the Car Park if you do not have time to cover them, or if they will be covered in a later session.

Notes for ToT trainers:
• *There are variations in the section headings between the packages.*

Explain: Session plans work like a recipe to guide trainers through the session. Following the session plans will help trainers to:

- stay focused on the learning objectives
- keep to time
- focus group activities, discussions and questions on relevant topics.



Show the slide throughout the activity.

Activity 3	
Groups:	**Divide** trainees into the same pairs as the previous activity.
Instructions:	**Ask** trainees to read and discuss a detailed session plan with their partner, and to write down any questions for discussion with the group. **Allocate** a session from the following list, according to which package each pair is going to present during the ToT: • **WSTPb:** *Trainer's Manual,* page 99: A.8: *Transfers.* • **WSTPi:** *Trainer's Manual,* page 52: B.1: *Assessment overview and assessment interview.* • **WSTPm:** *Trainer's Manual,* page 15: A.1: *What is appropriate wheelchair provision?*
Monitor:	**Monitor** the groups and assist as needed.
Time:	**Allow** 7 minutes to discuss and 5 minutes to answer questions.

Feedback:	**Ask** the whole group for any questions or clarifications. **Park** any questions on changing PowerPoint slides in the Car Park. These can be addressed in session ToT.10 Audio-visual tools and equipment.

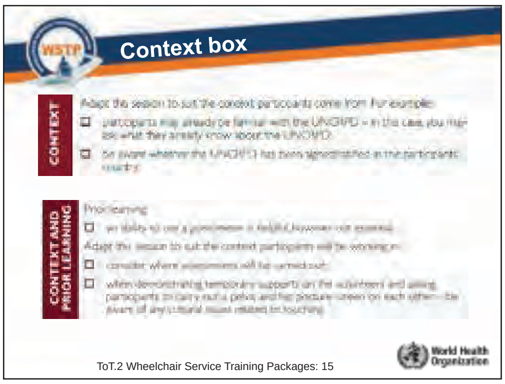
Explain: There is a session summary box at the beginning of each session plan.
Ask one of the pairs: What are the different sections of the session summary?

Most important answers:
• **Objectives:** describes the aims of the session. • **Resources:** any resources required for the session. • **Context (For WSTPi this is called Context and prior learning):** Suggested adjustments to suit the local context/country/service. • **To prepare:** things to prepare before the session starts. • **Outline:** summarizes sections of the session with timings.

Ask another pair: What is the purpose of the *Context* or the *Context and Prior Learning* box?

Most important answer:
• It provides trainers with guidance about how the session plan could be adapted for the local situation or the type of participants attending the training.

Ask another pair: What might influence the context of the training?
Acknowledge responses.



Explain: Sessions can be influenced by different:

- service delivery models
- levels of experience among participants
- institutional, regional or national policies
- available products for prescription.

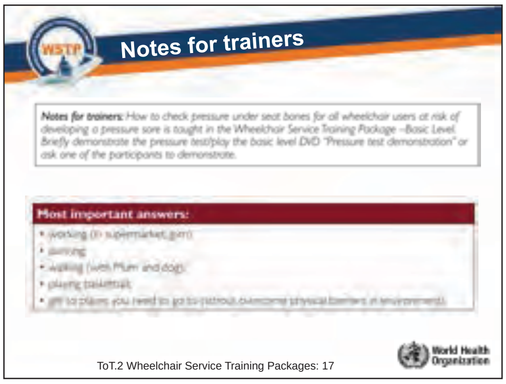
Ask another pair: How do the session plans indicate that a video should be shown?

Most important answer:
• A video box is shown, with a video icon.

Explain:

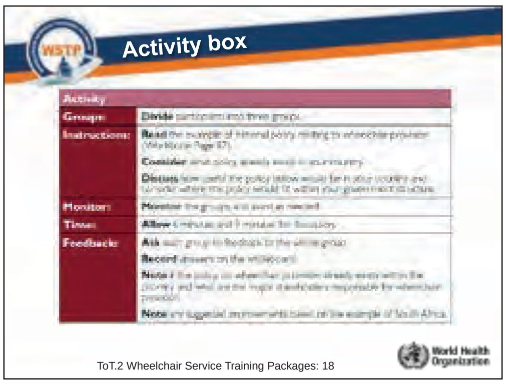
- It is important for trainees to be familiar with the content, relevance and timing of all the videos.
- More details on the use of videos are given later in the ToT.

Explain: The *Trainer's Manual* uses different words in **bold** to guide trainers. This includes words such as: **Ask, Explain, Show.**



Explain: Extra information to help to guide trainers is provided in the *Trainer's Manual,* including:

- additional information that can assist trainers to answer questions from participants
- most important answers to questions
- guidance about group activities.



Ask another pair: What information is provided in the *Activity* table in the session plans?

Most important answers:
• **Groups**: how to split the whole group for the activity. • **Instructions**: how the activity should be carried out, what to say to participants. • **Monitor**: how to monitor groups during activities to ensure they are doing the right thing. • **Time**: gives the duration of the activity and any time for feedback at the end. • **Feedback**: questions to ask, key points to cover and how to draw out participants' thoughts and feelings.

Explain: The electronic copy of the WSTP can be run either on a computer hard drive or via an external storage device (DVD or WSTP Pen Drive).

Exit slideshow mode. **Pull up** the WSTP Pen Drive folder, from the WSTP Pen Drive or from the files on your computer.

Show the electronic copy of the *START.pdf* file on the projector.

Explain: Resources can be accessed from the standard WSTP Pen Drive menu or by clicking on the "Start" menu.

Show the links. Click on one or two sessions to show the PPTs.

Explain:

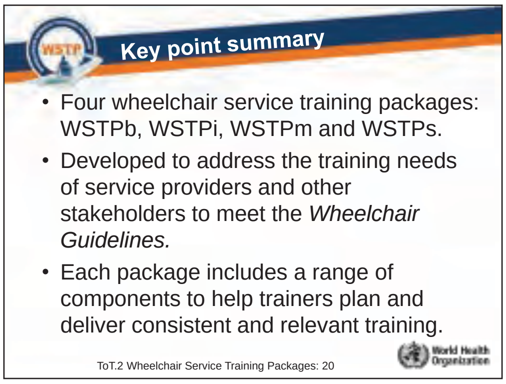
- Videos are embedded into the PPTs in the PDF versions of the files.
- All individual PPT files are available, and can be modified if necessary. Modifying PPTs will be discussed in a later session.

Show how to find the manuals, posters and forms.

Notes for ToT trainers:
• *Macintosh (Mac) computers cannot open the "Start" file and use the "Start" menu links unless the file is opened with Adobe Pro or similar.*

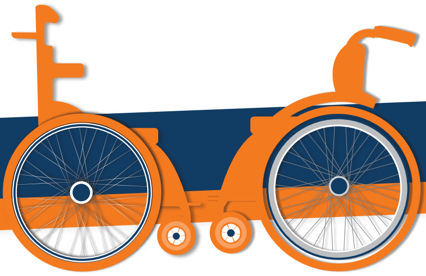
Explain: Each session ends with a *Key point summary* or *Actions for Managers* in the case of the WSTPm.

6. Key point summary (3 minutes)



Read the key points.

Ask whether there are any questions.



ToT.3 Practice delivery sessions

AIM

To provide details of the package-specific modules and the roles of ToT participants and trainers.

LEARNING OBJECTIVES

By the end of this session trainees will be able to:

- ☐ describe the aim and structure of the WSTPtot practice delivery sessions
- ☐ describe the roles and responsibilities of lead and support trainees
- ☐ know which practice sessions they are to present
- ☐ know how to prepare for the practice delivery sessions.

RESOURCES

For the session:

- ☐ PPT slides: *Core training skills ToT.3: Practice delivery sessions*
- ☐ WSTPtot allocation (trainee copy) for the package-specific module: one for each trainee
- ☐ Lucky Dip trainee numbers on pieces of paper
- ☐ flipchart sheet with trainee numbers written on it.

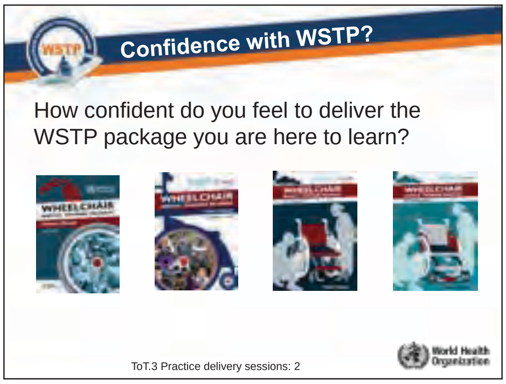
TO PREPARE

- ☐ Gather resources, review PPT slides and read through the session plan.
- ☐ Review related notes in the *ToT Handbook*.
- ☐ Refer to the terminology box at the beginning of this manual.
- ☐ Finalize and copy the *WSTPtot allocation* for the package specific module based on the number of trainees.
- ☐ Prepare Lucky Dip trainee numbers in bucket/hat based on final numbers.
- ☐ Prepare a flipchart sheet with the trainee numbers and a space to add participants' names once their numbers are selected.
- ☐ Discuss how you will allocate trainees for mentoring with their co-trainer. Give participants this information during the session, or at the beginning of *ToT.6 Preparation time*.

OUTLINE

1. Introduction	4
2. Structure and aims of the package-specific module	3
3. Format of practice delivery sessions	2
4. Roles of lead and support trainees and ToT participants	15
5. Reflection and feedback	5
6. Preparing for practice delivery sessions	30
7. Key point summary	1
Total session time	**60**

1. Introduction (4 minutes)

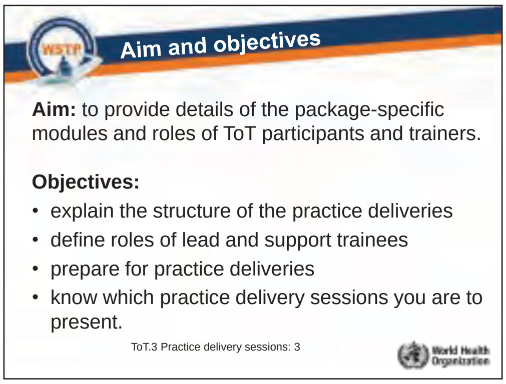


Ask: How confident do you feel to deliver the WSTP package/s you are here to learn, on a scale of one to ten?

- One means you are not at all confident
- Ten means you are very confident.

Explain:

- Record your score on page 10 of your *ToT Handbook*.
- At the end of the ToT programme, we will ask you to record how confident you now feel.
- You will add both scores to your confidential ToT evaluation form.



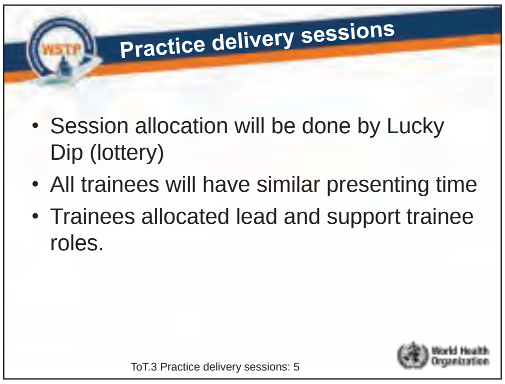
Explain the aim and objectives of the session.

2. Structure and aims of the package-specific module (3 minutes)

Explain:

- After the *Core training skills* sessions, you will begin your package-specific module.
- Package-specific modules include:
  - opportunities to deliver sessions from the WSTP you have chosen to learn
  - discussion sessions or demonstrations led by ToT trainers, or
  - a combination of the above.

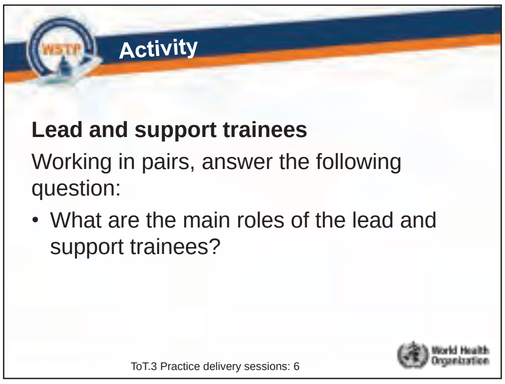
3. Format of practice delivery sessions (2 minutes)



Explain:

- Allocation of practice delivery sessions will be done by lottery (Lucky Dip) at the end of this session.
- Each trainee will have a similar amount of presenting time.
- You will be allocated roles as both a lead and support trainee.
- When two or more lead trainees are allocated to the same session, one will automatically assume the support trainee role when they are not presenting.

4. Roles of lead and support trainees and ToT participants (15 minutes)



Show the slide throughout the activity.

Activity 1	
Groups:	**Divide** trainees into pairs.
Instructions:	**Ask** participants to discuss with their partner what they think are the main roles of the lead and support trainee. **Ask** participants to record their ideas in their *ToT Handbook* on page 11.
Monitor:	**Monitor** the groups and assist as needed.
Time:	**Allow** 3 minutes for the activity and 5 minutes for feedback.
Feedback:	**Ask:** What are the main roles of the lead and support trainees? **Discuss and clarify** answers, record the most important answers on the board. **Ask** participants to record the correct information in their *ToT Handbook*.

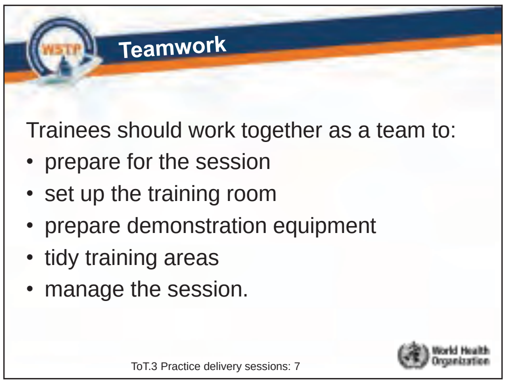
Most important answers:

The role of the lead trainee includes:

- delivering the session
- preparing demonstration and practical equipment
- keeping to time
- coordinating support trainees.

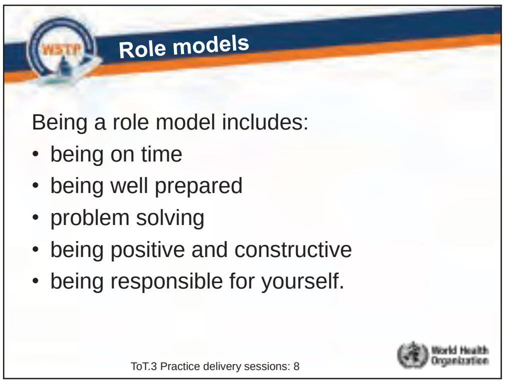
The role of the support trainee includes:

- writing answers on the board during participatory sessions
- adding any missing or supporting information
- helping to keep to time
- facilitating group activities
- giving feedback about participants to the lead trainee
- contributing to the overall feedback/reflection on the session delivery
- assisting with demonstration equipment during the session
- turning lights on/off and opening/closing blinds as needed when videos are shown.



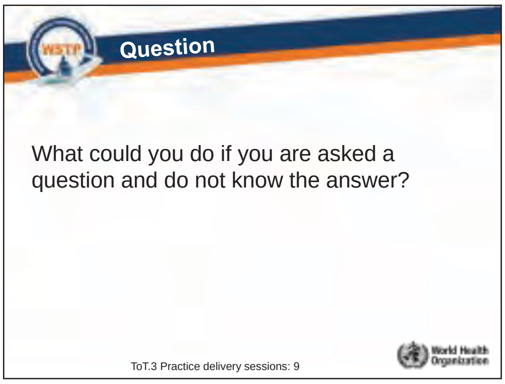
Explain: During the practice delivery sessions, trainees should work together as a team. This includes supporting each other to:

- prepare for the session
- set up the training room
- prepare demonstration equipment
- tidy training areas
- manage the session, including:
  - managing time
  - clarifying errors
  - answering questions from participants
  - managing disruptions and interruptions.



Explain:

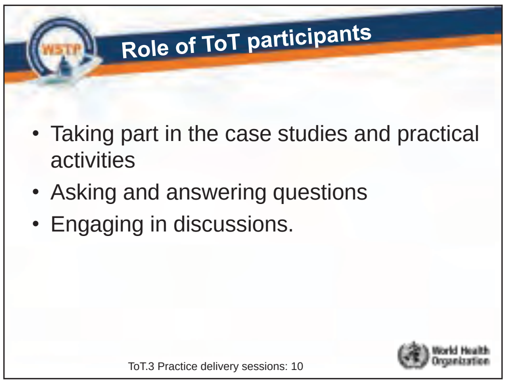
- Trainers should set positive examples of professional behaviour and practice.
- Model the behaviour you want to see from participants by:
  - being on time and well prepared
  - problem solving and finding solutions for challenging situations
  - providing positive and constructive feedback
  - managing yourself well: this includes balancing preparation with getting adequate sleep and good nutrition to help you to manage stress.



Explain: Being a good trainer and role model does not mean you always need to know the answers to questions.

Ask: What could you do if you are asked a question and do not know the answer?

Most important answers:
• Ask support trainees if they know the answer. • Ask participants if they know the answer. • Do not pretend to know the answer. • Agree to find out the answer before the training programme finishes (add to Car Park).

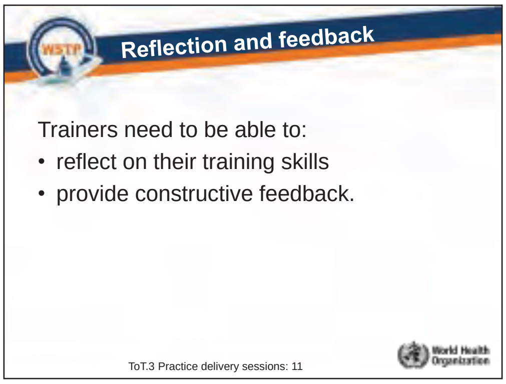


Explain:

- While your fellow trainees are delivering their sessions, you will play the role of the WSTP participant.
- This includes:
  - taking part in the case studies and practical activities
  - asking and answering questions
  - engaging in discussions.

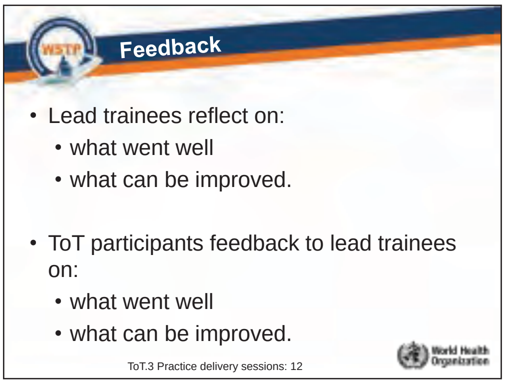
- While it is important to participate actively to create a 'realistic' training situation, do not purposefully act in a challenging manner.
- Put away your WSTPtot *Trainer's Manual* and your *ToT Handbook* during the session delivery.

5. Reflection and feedback (5 minutes)



Explain:

- It is important that trainers learn to reflect on their own training skills.
- It is also important that trainers are able to give constructive feedback to training participants.
- Both of these skills are incorporated into the ToT programme.

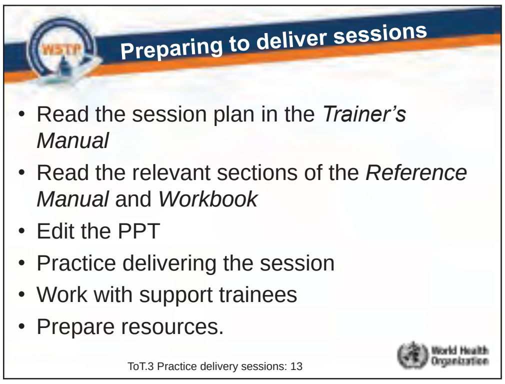


Explain:

- At the end of each practice delivery session, the lead trainee/s will be asked to reflect on:
  - what was good and what went well
  - what can be improved.

- ToT participants will provide brief feedback to lead trainee/s. We will discuss this further in *ToT.11: Feedback*.
- The ToT trainer will give feedback, adding anything not already mentioned by the lead trainee or ToT participants.

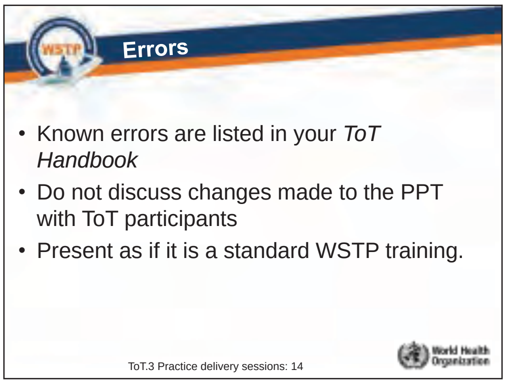
6. Preparing for practice delivery sessions (30 minutes)



Explain:

- Read the session plan in your *Trainer's Manual* and make sure you understand all the material.
- Read the relevant sections of the participant's *Reference Manual* and *Workbook* (available for all but WSTPs).
- Make any relevant changes/additions to the PPT.
- Incorporate your own knowledge and experience and use your own case studies if appropriate.
- Practice your delivery, including timing.
- Work as a team with your support trainee.
- Prepare the resources you need for the session.

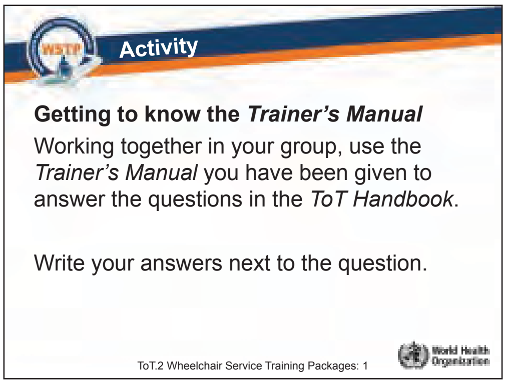
Explain: If your session includes a demonstration by the ToT trainer, discuss with them how they will manage their part of the session.



Explain:

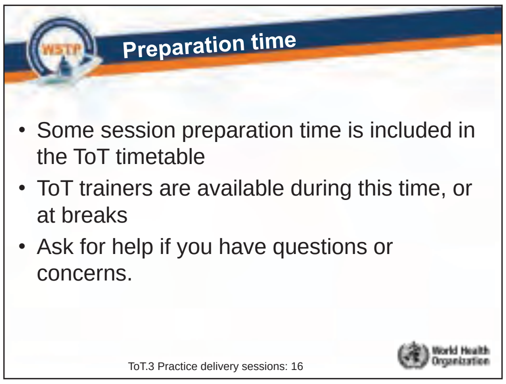
- There are some known errors in the WSTP *Trainer's Manual, Participant Manuals* and *Workbooks,* and *PPTs*.
- Known errors are listed in your *ToT Handbook*.
- When preparing for your session, check if your session has errors, and make the necessary changes.
- Do not discuss the errors with ToT participants, but present the session as if you are training on a standard WSTP.

Notes for ToT trainers:
• *The WSTP has some known errors that will not be corrected until a second edition is published. The errors are listed in the ToT Handbook so that trainees can make corrections to their materials.*



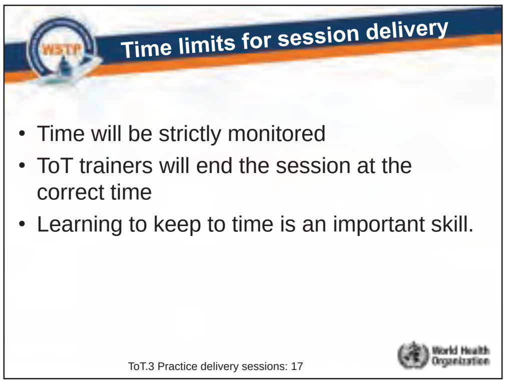
Show the slide throughout the activity.

Activity 2	
Groups:	**Divide** trainees into pairs.
Instructions:	**Ask** the trainees to look at the following sessions in their *Trainer's Manual* and find the notes relating to this session in their *ToT Handbook.* **Ask** them to read through both to understand how they relate to each other, and how they would be used to prepare to deliver a session. • WSTPb: Session A.6: *Appropriate wheelchairs.* • WSTPi: Session B.8: *Prescription (selection) of PSDs – stabilizing the pelvis.* • WSTPm: Session A.1: *What is appropriate wheelchair provision?* **Ask** them to also locate the *Guidelines for preparing practice delivery sessions* in the introduction to the *ToT Handbook* and to briefly review it.
Monitor:	**Monitor** the groups and assist as needed.
Time:	**Allow** 10 minutes for the activity and 5 minutes for feedback.
Feedback:	**Emphasize** the following: • Trainees should follow the instructions in the *Trainer's Manual* and their *ToT Handbook* for the practice deliveries and all future co-training deliveries. • They should allow enough time to follow instructions dealing with errors in the WSTP materials; take account of gender and cultural considerations; and tips on session preparation, presentations and logistics to improve flow and timing. • During the practice deliveries, trainees are responsible for setting up the training areas as needed. **Ask** whether there are any questions.



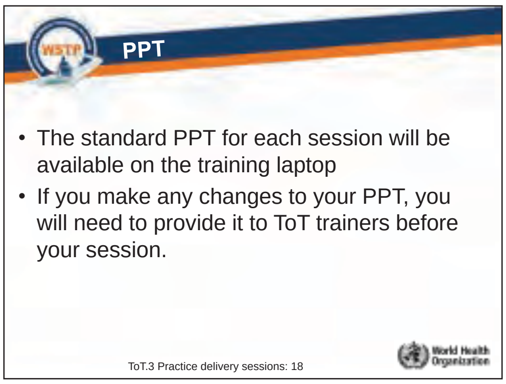
Explain:

- There will be time at the end of each day to prepare for future practice delivery sessions. We will discuss this more in session ToT.6.
- ToT trainers will be available during breaks and at the end of the day. Ask for help if you have questions or concerns.
- It is normal to feel nervous when delivering the sessions in front of your peers and the ToT trainers.
- You will grow in skills and confidence as you deliver more sessions.
- Remember that it is not a competition, everyone has different training styles.
- You will be required to present feedback from group activities over the next two days – use this as an opportunity to practise presenting to your peers.



Explain:

- Time will be strictly monitored during practice deliveries to ensure trainees are treated equally.
- If you go over your time, the ToT trainers will stop you and move on to the next trainer, or end the session.
- Learn how to keep to time. It is an important skill, and you will improve with practise.

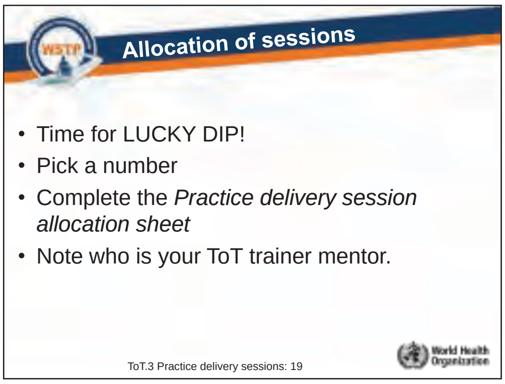


Explain:

- The standard PPT for each session will be available on the training laptop with videos already embedded.
- If you make any changes to your PPT, you will need to upload it onto the training laptop before your practice delivery.

Notes for ToT trainers:

- *Tell participants when you need the PPT to be loaded on to the computer; for instance, 30 minutes before training begins or at break time before a session.*



Explain: Now we will allocate the sessions.

Ask each trainee to pick a number.

Ask each trainee to write their name on their WSTPtot allocation (trainee copy) for the package-specific module.

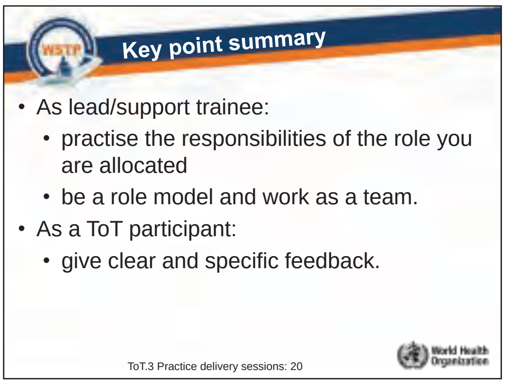
Ask each trainee to tell the group their number and to record this on their list.

Record the trainee names next to the relevant numbers you have listed on the prepared flipchart paper.

Explain: Each trainee has been assigned a ToT trainer as his or her mentor. Your mentor will:

- assist you with preparation
- provide individual feedback on your presentation skills.

7. Key point summary (1 minute)



Read the key points.

Ask whether there are any questions.

ToT.4 Preparing for diversity

AIM	To understand culture, diversity, cultural competence and the importance of these concepts in relation to training the WSTP.
LEARNING OBJECTIVES	By the end of this session trainees will be able to: ☐ understand the difference between culture and diversity ☐ understand the importance of cultural competence ☐ discuss challenges of cross cultural communication ☐ identify challenges to integrating wheelchair users into training and work environments.
RESOURCES	For the session: ☐ PPT slides: *Core training skills ToT.4: Preparing for diversity* ☐ masking tape or similar.
TO PREPARE	☐ Gather resources, review PPT slides and read through the session plan. ☐ Review related notes in the *ToT Handbook*. ☐ Plan appropriate 'divisions' to use for the first activity, based on local context and trainee group characteristics. ☐ Put a line of masking tape down the centre of an open area of the room to use for the first activity.

OUTLINE

1. Introduction	20
2. Culture and diversity	5
3. Cultural competence	20
4. Encouraging diversity: inclusion of wheelchair users and people with disabilities	14
5. Key point summary	1
Total session time	**60**

1. Introduction (20 minutes)

Activity 1	
Groups:	Whole group.
Instructions:	**Draw attention** to the line of masking tape down the middle of the floor. **Ask** everyone to move to one side of the room. **Ask** all the men to stand on one side of the line and all the women to stand on the other. **Explain** this is our first diverse grouping: men and women. We are going to look at different aspects of diversity. **Ask** everyone who has children to stand on one side, and all the people who don't to stand on the other side. **Ask** everyone who is over 50 years of age to stand on one side of the room. Ask everyone else to stand on the other side. **Continue** with the exercise for at least six rounds. Divisions could include: • languages spoken • country or region of origin • presence or absence of disability • professional background.
Monitor:	**Ensure** that participants are not embarrassed or uncomfortable.
Time:	**Allow** 10 minutes for the exercise and 10 minutes for feedback.
Feedback:	**Ask** people how they felt about the divisions. **Ask** how did you feel when you were in the larger group? **Ask** how did you feel when you were alone or in a minority? **Explain** that for some this may be a negative experience, but for others it may be positive.

Explain: People often feel powerful and confident when they are in a majority. They can feel isolated and marginalized when they are in a minority. Groups can be separated or brought together by culture or by diversity and we are going to look at these two concepts in more detail.

Explain the aim and objectives of the session.

2. Culture and diversity (5 minutes)

Write the words *culture* and *diversity* on either side of a board or flipchart with a line running down the middle.

Ask: What do you understand the terms *culture* and *diversity* to mean?

Encourage responses and write on the board.

Most important answers:
Culture – the things that make us the same:
• a shared or common system of values, attitudes, morals, traditions, beliefs
• a shared understanding of appropriate behaviour.
Diversity – the things that make us different:
• ethnicity, gender, gender identity, age, physical abilities
• religious or spiritual beliefs, political beliefs
• professions.

Explain: Culture and diversity can be viewed in different ways.

- Are they seen as strengths and encouraged?
- Or are they seen as a source of conflict and disharmony?
- Are they a distraction?

Ask the group to reflect on the diversity and cultures present among themselves that we experienced in the earlier activity.

Ask: Is the group diverse?

Ask: What types of diversity does the group include?

Ask: What cultures do we share?

Acknowledge responses.

Explain: Remember that we all belong to more than one cultural group and we are all diverse in many ways.

3. Cultural competence (20 minutes)

Ask: What is cultural competence?

Acknowledge responses.

Explain:

- Cultural competence is an active process through which individuals learn how to effectively and respectfully engage with a culture that is different from their own.
- It is about having a positive attitude towards cultural differences and accommodating them.
- It is about being conscious of how culture impacts on interactions between people.

Explain: Cultural differences can lead to misunderstandings, disappointments, confusion, embarrassment, anger or insult. For example, a comment made without offence intended may be insulting to someone from another culture.

Explain: WSTP training may be delivered by trainers from a different culture to that of the participants. Some examples of how different cultural considerations may affect training are given in the *ToT Handbook* on page 16.

Show the slide throughout the activity.

Activity 2	
Groups:	**Divide** trainees into pairs.
Instructions:	**Ask** trainees to think about examples of when they experienced a culture different from their own. Write down what it was like, how they felt and what they learned. **Ask** trainees to discuss the experience with their partner.
Monitor:	**Monitor** the groups and assist as needed.
Time:	**Allow** 8 minutes for discussion and 5 minutes for feedback.
Feedback:	**Ask** 4–5 people to share their experiences with the group.

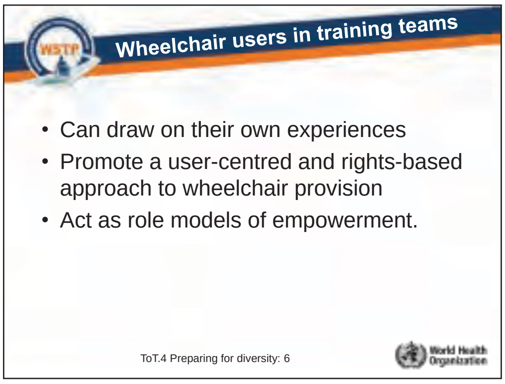
4. Encouraging diversity: inclusion of wheelchair users and people with disabilities (14 minutes)

Explain:

- Disability is one aspect of diversity.
- The WSTP promotes the inclusion of wheelchair users in training teams and as participants.

Ask: Why is this important?

Most important answers:
• Wheelchair users are able to draw on their own first-hand experiences and perspectives to communicate the learning objectives of the WSTP.
• Being taught by a wheelchair user will reinforce the central role of wheelchair users in wheelchair services.
• The inclusion and participation of wheelchair users can help to shift perspectives of what people with disabilities are capable of; combat stigma, and reinforce the principles of the *CRPD*.



Read the slide.

Ask: What are some of the barriers preventing the full inclusion of people with disabilities, including wheelchair users, into society?

Most important answers:
• Attitudinal barriers.
• Environmental barriers: lack of access to homes, schools and community buildings.
• Lack of assistive devices.
• Cultural beliefs that see disability negatively.
• Lack of supportive legislation about disability rights.
• Lack of funding for services and support.

Explain:

- Attitudinal barriers can include:
  - assumptions about what is possible for a person with a disability
  - assumptions that people with a disability cannot make decisions for themselves
  - treating people with disabilities as objects of charity
  - in some cultures, it is believed that people with disabilities are cursed and they are excluded from their communities and/or families as a result.

- Environmental barriers can include:
  - the natural environment – such as rocky or steep terrain
  - the built environment – such as inaccessible homes, schools and community buildings
  - a lack of assistive devices.

- Institutional barriers can include:
  - a lack of government legislation and policies that support the rights of people with disabilities
  - rules and regulations regarding admission criteria for school or university.

5. Key point summary (1 minute)

Read the key points.

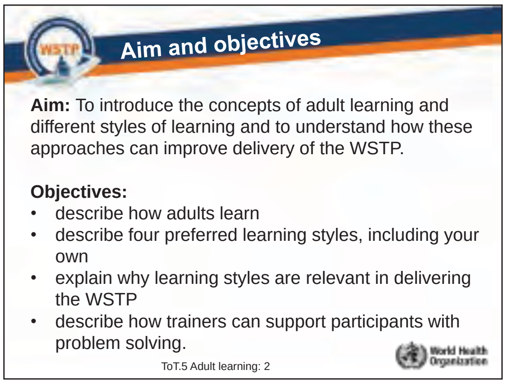
Ask whether there are any questions.

ToT.5 Adult learning

AIM	To introduce the concepts of adult learning and different styles of learning: to understand how these approaches can improve delivery of the WSTP.
LEARNING OBJECTIVES	By the end of this session trainees will be able to: ☐ describe how adults learn ☐ describe four preferred learning styles, including their own ☐ explain why understanding learning styles ensures the effective delivery of the WSTP ☐ describe how trainers can support participants with problem solving.
RESOURCES	For the session: ☐ PPT slides: *Core training skills ToT.5: Adult learning.*
TO PREPARE	☐ Gather resources, review PPT slides and read through the session plan. ☐ Review related notes in the *ToT Handbook.*

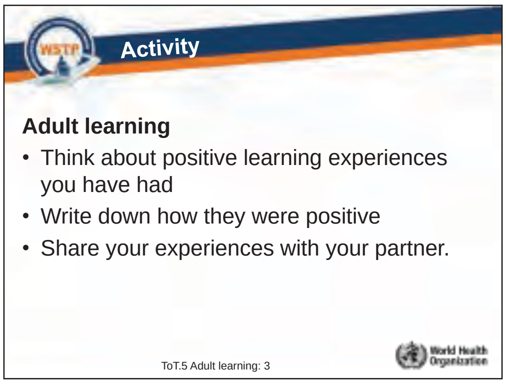
OUTLINE		
	1. Introduction	2
	2. Preferred learning styles	25
	3. Experiential learning cycle	30
	4. Supporting adult learning	10
	5. Helping participants to problem solve	15
	6. Key point summary	3
	Total session time	**85**

1. Introduction (2 minutes)



Explain the aim and objectives of the session.

2. Preferred learning styles (25 minutes)



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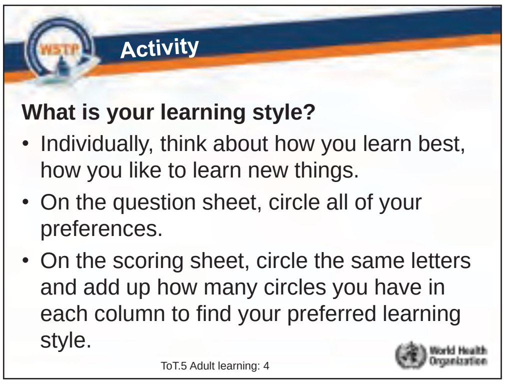
Activity 1	
Groups:	**Divide** trainees into pairs.
Instructions:	**Ask** trainees to: • Think about positive learning experiences they have had. • Write down in what way the experiences were positive in the table on page 20 of their *ToT Handbook*. • Share experiences with their partner.
Monitor:	**Monitor** the groups and assist as needed.
Time:	**Allow** 5 minutes for individual reflection and discussion in pairs, and 5 minutes for feedback.
Feedback:	**Ask** each pair to read out one item from their list, going around the room until all the experiences are written on the board. **Allow** brief discussion.

Explain: We can see from the positive learning experiences discussed during the last activity that there are different ways that we prefer to learn.



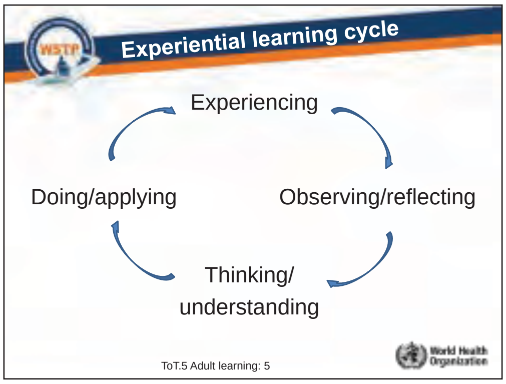
Show the slide throughout the activity.

Activity 2	
Groups:	**Ask** trainees to work alone.
Instructions:	**Ask** trainees to turn to page 21 in their *ToT Handbook*. **Explain** that there is a list of statements in the *ToT Handbook* that relate to learning. **Ask** trainees to circle all of their preferences and transfer the information to the scoring sheet on the next page. **Ask** trainees to add up the number of circles to see which column has the highest number. The column with the highest number is their preferred learning style.
Monitor:	**Monitor** trainees and assist as needed.
Time:	**Allow** 10 minutes for the activity and 3 minutes for feedback.
Feedback:	**Ask** each trainee to share their preferred learning style with their neighbour. **Highlight** that if some people have two or more styles with the same or similar number, this means they have no strong preferences and are comfortable with more than one way of learning. **Ask** trainees if their learning style/s match their positive learning experiences.

3. Experiential learning cycle (30 minutes)

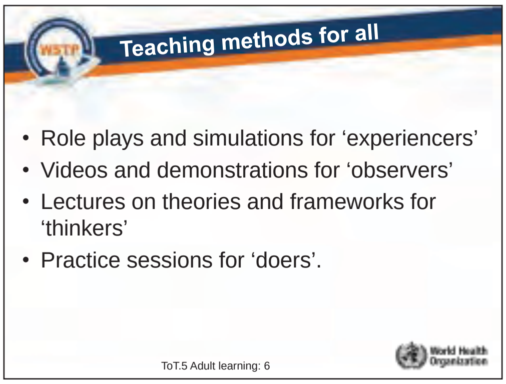
Explain:

- Each of us has a preferred learning style or styles.
- However, learning new information and skills is most effective when we learn the information in multiple ways.



Explain:

- Each stage of the experiential learning cycle matches the four learning styles.
- While we all have different styles, learning new knowledge and skills is most effective when we go through each of the four stages.
- This is why each of the four phases or types of learning are included in the WSTP.
- We can start anywhere in this cycle: with an experience; with a reflection or observation; with a theory or definition/ explanation of a concept; or by doing.



Explain: When developing the WSTP, preferred learning styles and adult learning concepts were incorporated into the structure of individual session plans and the overall training timetable.

Explain: The WSTP follows these four phases to ensure that learning happens.

- During WSTPb, participants try different mobility skills in a wheelchair. This is experiencing.
- During WSTPi, participants watch a video of wheelchair users and their families talking about the positive impact of postural support devices. This is observing or reflecting.
- During WSTPm, participants learn about concepts and principles related to wheelchair service delivery. This is thinking or understanding.
- During WSTPb and WSTPi, participants work with wheelchair users and provide them with an appropriate wheelchair and cushion. This is doing or applying.

Ask: What would happen if we missed out the experience part?

Most important answer:
• The learning will not have a connection with the person's life; it will not be anchored in the participant's personal experience – it would be abstract.

Ask: What would happen if we missed out the observation part?

Most important answer:
• The learner would not be able to explore or see how his or her personal experience connects to the larger abstract concept or framework.

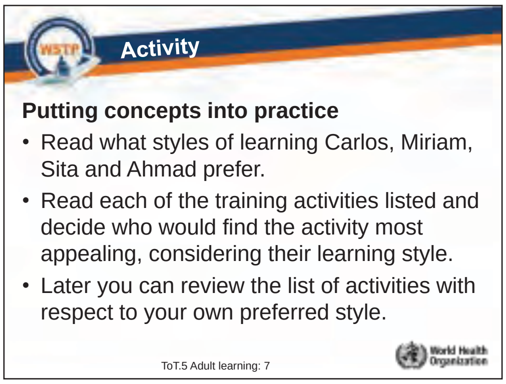
Ask: What would happen if we missed out the thinking part?

Most important answer:
• The learner would go from one experience to another without being able to see how they link together. He or she would not be able to benefit from a framework that would help organize the experiences in a meaningful way.

Ask: What would happen if we missed out the doing (practice) part?

Most important answer:
• The learner would not find out how to apply the theory or framework in the workplace or in his or her own life.

Explain: It is important that trainers support all learning styles, not just the ones that we personally prefer.



Explain: Now that we have looked at the concept of learning styles and the experiential learning cycle, let's put this into practice and learn by doing.

Show the slide throughout the activity.

Activity 3	
Groups:	**Divide** trainees into groups of two or three.
Instructions:	**Ask** trainees to look at the *Matching activities with learning preferences* sheet in the *ToT Handbook* (pg. 24). **Explain:** • Carlos learns best by doing • Miriam learns best by observing • Sita learns best by experiencing • Ahmad learns best by understanding the big picture. **Ask** trainees to place an 'x' under the name of the person who would find the training activity most effective given their learning style. **Suggest** that after the session each participant should fill in the last column with their own preference.
Monitor:	**Monitor** the groups and assist as needed.
Time:	**Allow** 10 minutes for the activity and 10 minutes for feedback.
Feedback:	Review the answers with the whole group as follows: **Ask** trainees to volunteer answers. **Check** if everyone agrees. If there is no disagreement, **acknowledge** the answer (if it is correct) and **move** to the next line. If not everyone has the same answer **prompt** the correct answer and **clarify.** **Allow** only brief discussion.

Notes for ToT trainers:
• *In the answer box below, x indicates the best answer; (x) indicates other possible answers that are also correct.*   If trainees have answers other than those marked, ***ask*** them to explain their reasoning and ***discuss*** it with the group. If you are comfortable that their reasoning is good, and that they understand the differences between the learning styles, they do not need to correct their answer.   *Key learning from this exercise is awareness that people do not all learn in the same way.*

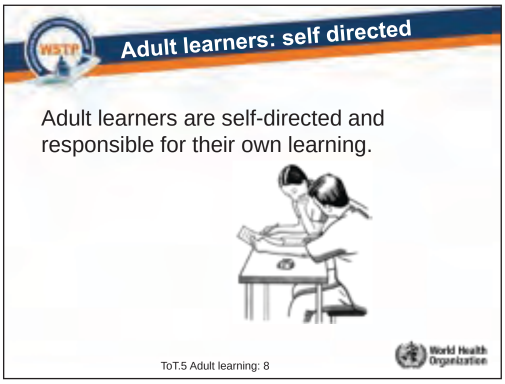
Answers

	Doing Carlos	Observing Miriam	Experiencing Sita	Understanding Ahmad
1. Using a role play to practise wheelchair user training	x		(x)	
2. Watching the trainer show how to measure a new wheelchair user		x		
3. Attending a presentation by a government official about laws and regulations regarding wheelchair services in his or her country				x
4. Watching people in wheelchairs doing the things they want to do		x		
5. Learning about the key documents that are relevant to wheelchair services				x
6. Discussing with other participants the advantages and disadvantages of follow-up in the user's home			x	

Answers				
	Doing	**Observing**	**Experiencing**	**Understanding**
	Carlos	**Miriam**	**Sita**	**Ahmad**
7. Listening to the trainer review the most important articles in the *CRPD*				X
8. Making a pressure-relief cushion	X		(X)	
9. Riding a wheelchair to get a feel for the obstacles a wheelchair user might experience			X	
10. Observing the trainer conduct an assessment		X		
11. Doing an assessment interview with a new user	(X)		X	
12. Calculating the cost-savings of adding a wheelchair service to existing rehabilitation services	X		(X)	

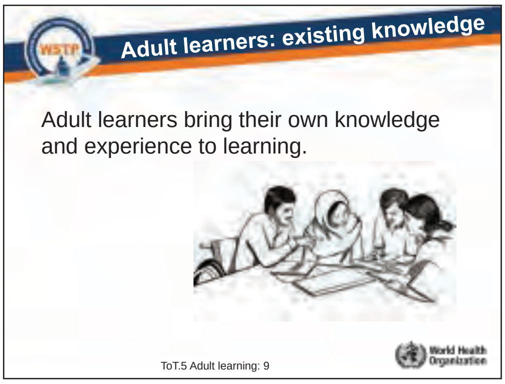
4. Supporting adult learning (10 minutes)

Explain: While we all have preferred learning styles, there are some common factors that relate to all adult learners.



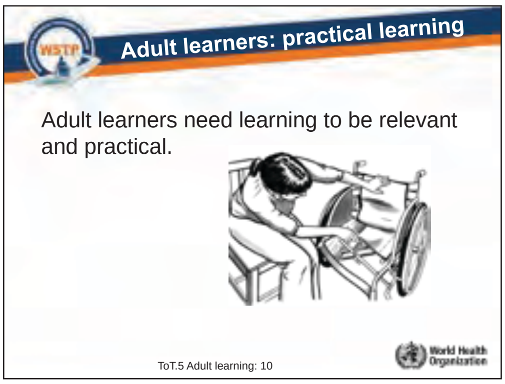
Explain:

- Adult learners are self-directed and responsible for their own learning.
- This means supporting them to be:
  - active participants
  - engaged in discussions and group activities.



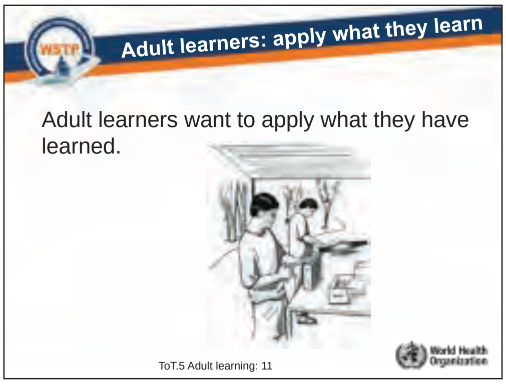
Explain:

- Adult learners bring their own knowledge and experience to each learning activity, including:
  - work-related experience
  - previous education
  - life and family experience.



Explain:

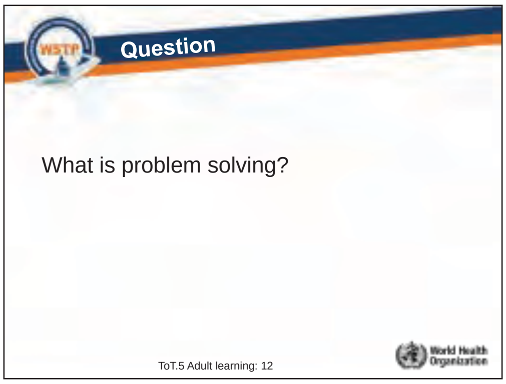
- Adult learners need learning to be relevant and practical.
- Adults must see a reason for learning the new information – and be able to apply it to their situation.
- Training should have:
  - clear learning objectives
  - obvious practical application.



Explain: Adult learners want to apply what they have learned.

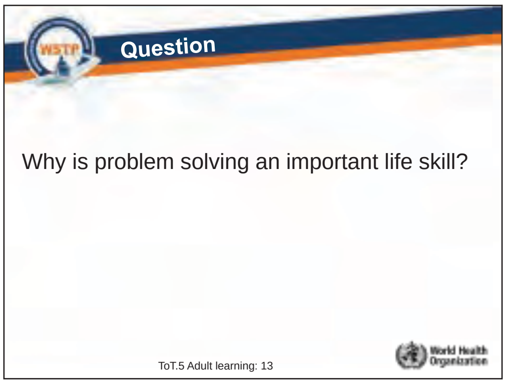
- Use examples to help them see the connection between what they are learning during training and what they will do after the training programme is over
- Use problem-solving activities
- Create learning-action plans.

5. Helping participants to problem solve (15 minutes)



Ask: What is problem solving?

Most important answer:
• The process of finding the best solution to a problem. It is an important part of adult learning.

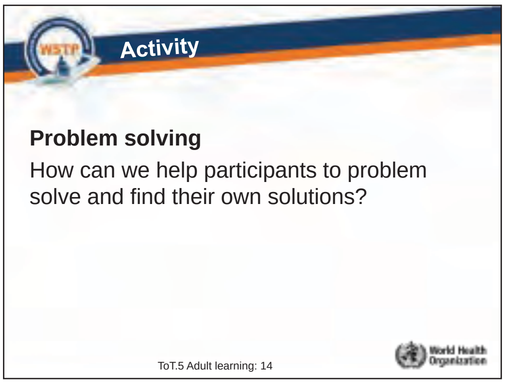


Ask: Why is problem solving an important life skill?

Most important answers:
• Because we all set goals and face challenges to achieve them. • Because we need to find ways to overcome barriers we encounter.

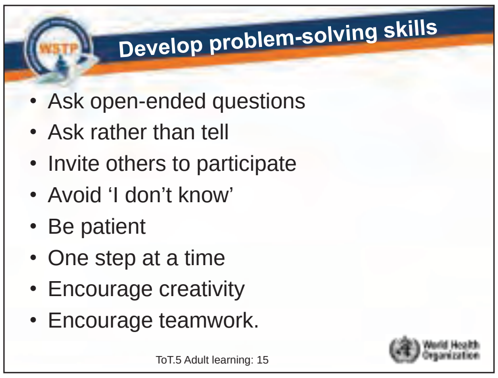
Explain:

- Problem solving is an important skill in wheelchair service provision where solutions to problems may be complex.
- We have an important role as trainers to develop participants' problem-solving skills, so they can find solutions to the difficulties they come across in their work.



Show the slide throughout the activity.

<table>
<tr><th colspan="3">Activity 4</th></tr>
<tr><td>Groups:</td><td colspan="2">Divide trainees into groups of two or three.</td></tr>
<tr><td>Instructions:</td><td colspan="2">Ask trainees to brainstorm how they can help participants to problem solve and find their own solutions.

Take 2 minutes to think about it individually, then share with your group members to create a list of ideas.</td></tr>
<tr><td>Monitor:</td><td colspan="2">Monitor the groups and assist as needed.</td></tr>
<tr><td>Time:</td><td colspan="2">Allow 12 minutes for this activity.</td></tr>
<tr><td>Feedback:</td><td>
</td><td>Ask each group in turn to describe one way to support participants in problem solving. Continue until there are no new ideas.

Record each new idea on the board using only a few key words.

Acknowledge good examples of things to consider.

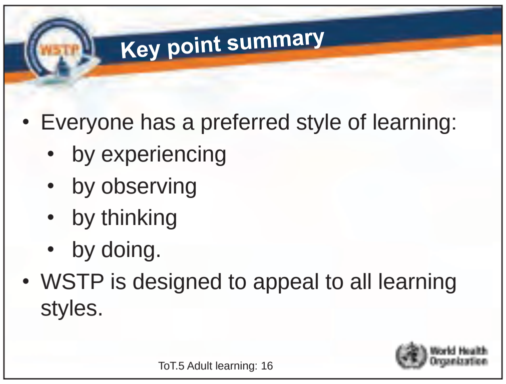
Correct/clarify any misunderstandings.

Show the slide to summarize.</td></tr>
</table>

Most important answers:

- **Ask open-ended questions –** these cannot be answered with a simple 'yes' or 'no'. Open-ended questions require trainees to think more deeply about something, or explore their own experience and think for themselves, rather than guessing the answer that the trainer expects.
- **Ask rather than tell –** ask participants what they think the solution should or could be, rather than telling them. Help them work it out for themselves.
- **Invite others in the group to come up with a response –** 'does anyone have a different idea?'
- **Encourage case discussion –** talk to participants about individual users who come to the training for assessment, fitting and user training.
- **Don't take 'I don't know' for an answer –** help participants consider what they do know about a subject and support them in considering possible answers.
- **Be patient –** developing problem-solving skills takes time.
- **One step at a time –** assist participants by breaking down the task into individual steps and asking questions/facilitating problem solving step-by-step.
- **Encourage** participants to be creative and to think laterally.
- **Encourage** participants to work together; teamwork and good communication helps to solve problems.

6. Key point summary (3 minutes)



Read the key points.

Ask whether there are any questions.

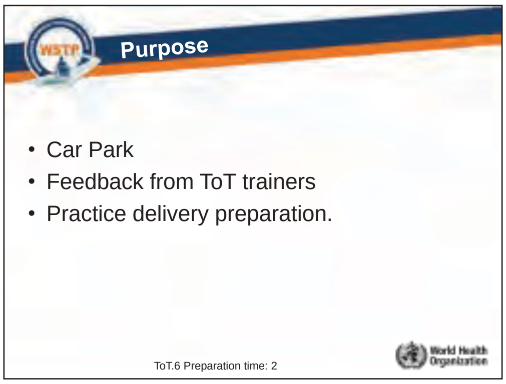
ToT.6 Preparation time

AIM	To ensure trainees use the preparation time effectively at the end of each day.	
LEARNING OBJECTIVES	By the end of this session trainees will be able to: ☐ understand the purpose of the preparation time at the end of each day ☐ discuss any questions related to their practice deliveries.	
RESOURCES	For the session: ☐ PPT slides: *Core training skills ToT.6: Preparation time.*	
TO PREPARE	☐ Gather resources, review PPT slides and read through the session plan. ☐ Review related notes in the *ToT Handbook.* ☐ Review the Car Park and prepare to answer any questions.	
OUTLINE	1. Review of Car Park 2. Purpose of preparation time	10 5
	Total session time	**15**

1. Review of Car Park (10 minutes)

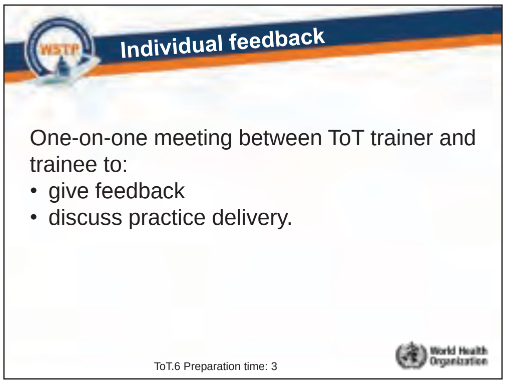
Review the Car Park with trainees. If any items need to be clarified before the next day, provide answers or explanations as needed.

2. Purpose of preparation time (5 minutes)



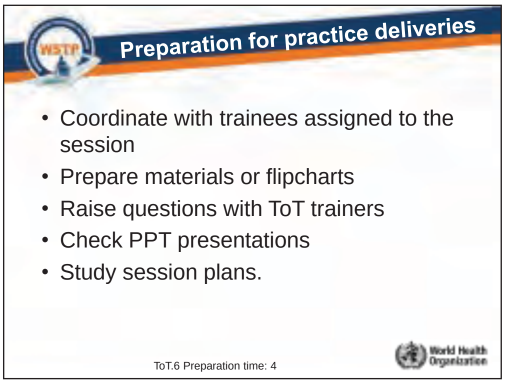
Explain: After our first day, we have time set aside for:

- reviewing any remaining Car Park items
- trainees to meet with ToT trainers for feedback
- preparing for practice deliveries.



Explain:

- ToT trainers will set up short, one-on-one meetings with lead trainees to give feedback and discuss their practice delivery.
- It is an opportunity for trainees to ask questions about how to apply this feedback to future practice deliveries.
- We will discuss how to give and receive feedback in more detail in *ToT.11*.



Explain: When you are not meeting with ToT trainers to discuss feedback, you should use this time to:

- coordinate with your co-trainers
- prepare demonstration materials and AV equipment needed for your session
- clarify any content of your session that you do not understand with the ToT trainers
- check that your PPT presentation is working correctly.

Ask whether there are any questions.

Remind trainees of any logistics they need to remember before the start of the training day tomorrow.

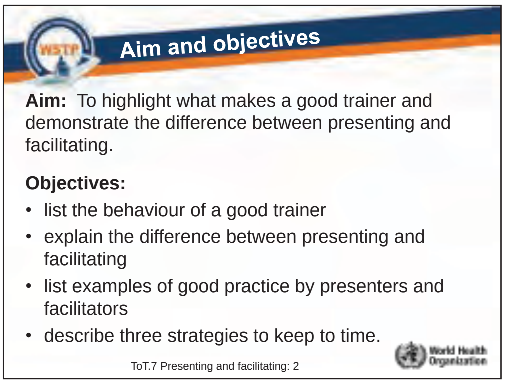
Notes for ToT trainers:
• *After the first day of the WSTPtot, use this time to arrange logistics related to practice deliveries during the rest of the programme. For example, can trainees come to the site early to set up for their session; or, when should trainees upload any modified PPTs for use the next day?*

ToT.7 Presenting and facilitating

AIM	To highlight what makes a good trainer and demonstrate the difference between presenting and facilitating.
LEARNING OBJECTIVES	By the end of this session trainees will be able to: ☐ list the behaviour of a good trainer ☐ explain the difference between presenting and facilitating ☐ list examples of good practice by presenters and facilitators ☐ describe three strategies to keep to time.
RESOURCES	For the session: ☐ PPT slides: *Core training skills ToT.7: Presenting and facilitating.*
TO PREPARE	☐ Gather resources, review PPT slides and read through the session plan. ☐ Review related notes in the *ToT Handbook.*

OUTLINE		
	1. Introduction	3
	2. Trainer skills	15
	3. Presenting and facilitating	5
	4. Good practices for presenting and facilitating	15
	5. Managing time	20
	6. Key point summary	2
	Total session time	**60**

1. Introduction (3 minutes)

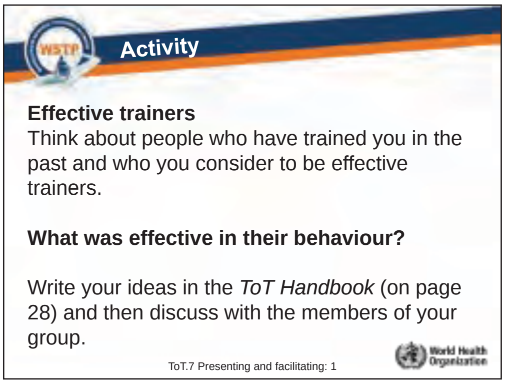


Explain the aim and objectives of the session.

2. Trainer skills (15 minutes)

Explain: You need to develop a variety of skills to deliver a successful training programme.

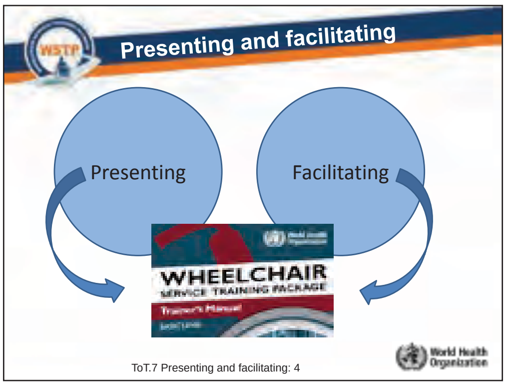
In this session we look at the skills of a trainer, both as a presenter of information and as a facilitator of learning. Effective trainer behaviour is critical to bring about participants' learning and create a positive learning environment.



Show the slide throughout the activity.

Activity 1	
Groups:	**Divide** trainees into groups of two or three.
Instructions:	**Ask** trainees to think about people who have trained them in the past and to identify who they consider to have been effective trainers. In other words, people who enabled them to learn what they needed to and who gave them positive and worthwhile experiences. **Ask** trainees to take a few minutes to reflect on the effective trainers' behaviour and write their ideas in the space on page 28. in the *ToT Handbook* headed: *What was effective in their behaviour?* **Ask** trainees to share their thoughts with the member/s of their group. **Ask** groups to consider all aspects of their previous trainers' behaviour: • how they presented themselves • how they interacted with the trainees • how they managed the training • how they created a positive environment.
Monitor:	**Monitor** the groups and assist as needed.
Time:	**Allow** 5 minutes for discussion and 10 minutes for feedback.
Feedback:	**Ask** the groups to report back, giving one idea each until all ideas have been presented. **Record** ideas on the board. **Refer** trainees to the information in their *ToT Handbook.* **Remind** trainees that they will have a chance to practise the behaviour later in the week. **Suggest** that trainees use the list of *Good practice for presenting and facilitating* in the *ToT Handbook* (pg. 29) to help them to identify behaviour they need to work on. Explain that the list can be used for self-assessment if desired.

3. Presenting and facilitating (5 minutes)

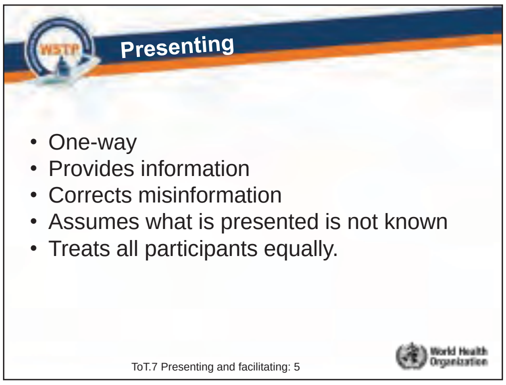


Explain: The role of the trainer in the WSTP switches frequently between presenting and facilitating.

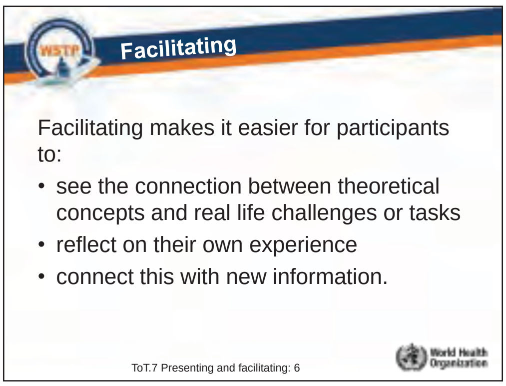
Ask: What do you think the difference is between presenting and facilitating?

Allow trainees a few minutes to think about this, then collect responses from the group.

Show the next slides and acknowledge responses already given.



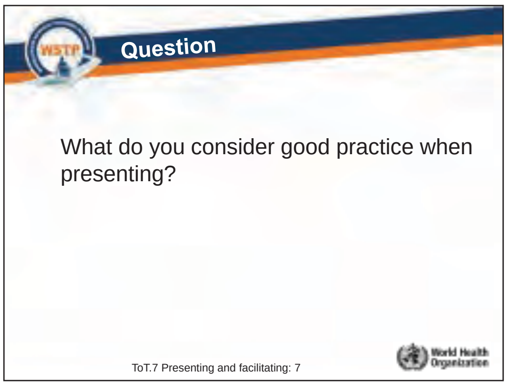
Read the slide content, expand if needed.



Read the slide content, expand if needed.

Explain that in the WSTP a combination of presenting and facilitating is used. The *Trainer's Manual* indicates when to present and when to facilitate.

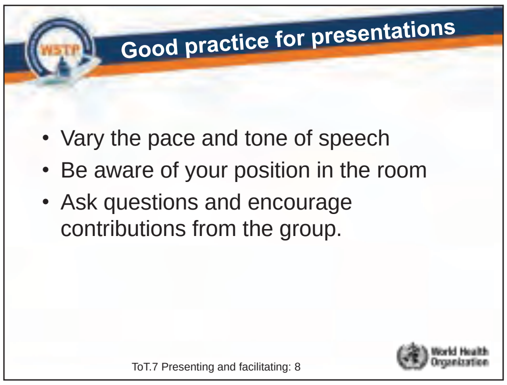
4. Good practice for presenting and facilitating (15 minutes)



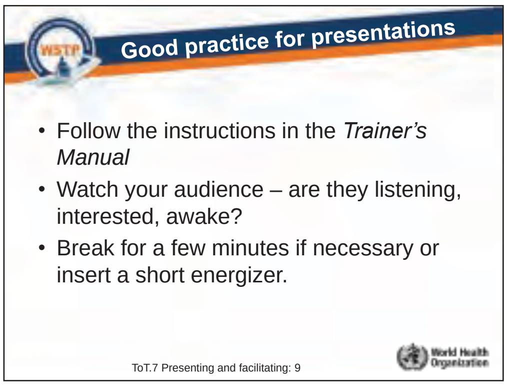
Ask trainees to reflect on what they consider good practice when giving a presentation. Collect responses from the group.

Notes for ToT trainers:

- *ToT trainers must ensure they are a model of good practice throughout the ToT, especially during this session. Make sure you practise everything you say.*



Read the slides and acknowledge examples already given by the participants when reviewing.



Ask: Who knows what we mean by an *energizer?*

Acknowledge responses.

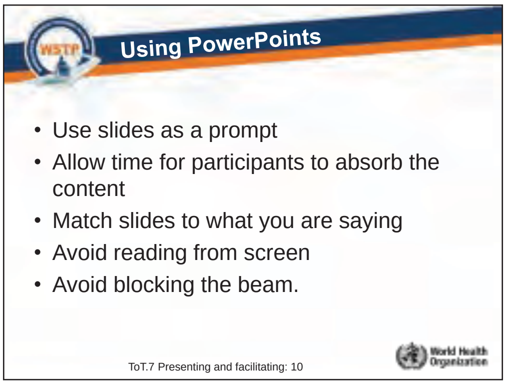
Explain:

- An *energizer* is a short activity designed to enliven and re-energize a group of participants.
- Often, but not always, the *energizer* is unrelated to the content of the session.
- There is a section about energizers, with examples, in the *ToT Handbook* on page 30–31.

Ask a trainee to lead a short energizer for the group.

Ask trainees what the energizer did to the group.

Notes for ToT trainers:
• *Most trainees will know some energizers from previous training experiences. Be prepared to give an example if no one volunteers.*



Explain:

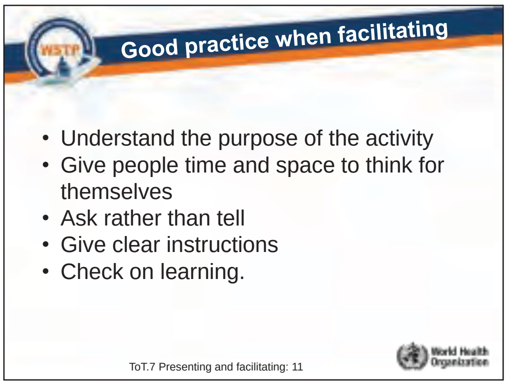
- Use the slides as a prompt and to show the key messages.
- Allow time for participants to absorb the content of each slide. This will take longer for those working in a foreign language.
- Add variety by asking participants to read slide messages out loud.
- Make sure the slide shown corresponds with what you are saying.
- Keep the slides synchronized with the *Trainer's Manual.*
- Avoid reading from the screen.
- If you do read from the screen, do not look over your shoulder or stand with your back to the audience.
- Avoid blocking the beam.

Demonstrate these last three points by showing how you can move to the side of the training room or behind the participants.

Ask: How will your presentation style and session planning change when participants have a visual impairment?

Acknowledge answers.

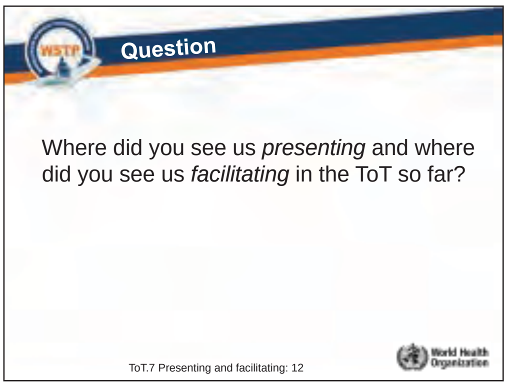
Most important answers:
• Read information on the slides to ensure participants with visual impairments get all of the information. • Make sure the presentations are in a large font and that the screen is as large as possible for those who are partially sighted. • Meet with participants before the training to understand their needs. • If participants use a screen reader, provide documents and presentations ahead of time so they can review before the training starts. • Provide documents in braille if applicable.



Read the slide.

Refer trainees to the key points in the *ToT Handbook*.

Expand as needed.



Ask: Can anyone think of examples where the trainers have been *presenting* and where they have been *facilitating* in the sessions we have done so far?

Ask: How do the two methods feel different to you as a trainee?

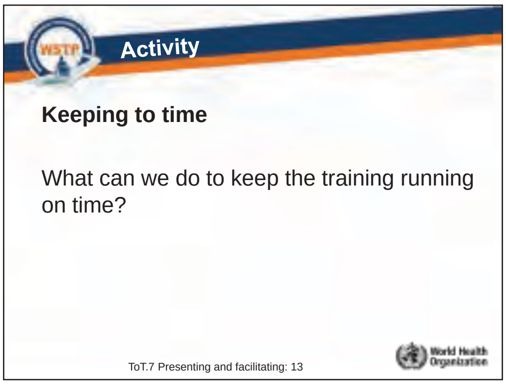
Acknowledge responses.

Remind trainees that they will have the opportunity to observe and practise both presenting and facilitating as the ToT continues.

5. Managing time (20 minutes)

Explain:

- Trainers and participants need to make sure that the training programme runs on time.
- There are many sessions and activities and a limited amount of time to complete them.



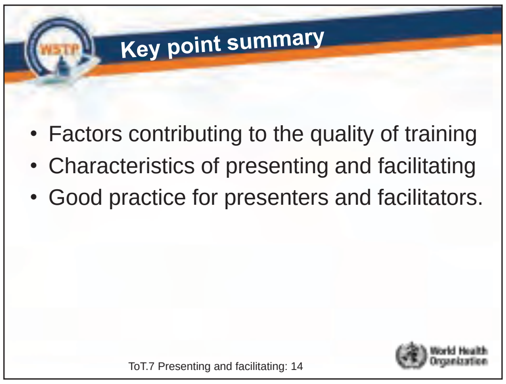
Show the slide throughout the activity.

Activity 2	
Groups:	**Divide** the trainees into pairs.
Instructions:	**Ask** What can we do to keep the training running on time? **Ask** trainees to write ideas down in their *ToT Handbook* on page 31.
Monitor:	**Monitor** the groups and assist as needed.
Time:	**Allow** 5 minutes for discussion and 15 minutes for feedback.
Feedback:	**Feedback** as a whole group, taking suggestions from pairs in turn. **Acknowledge** responses and add to them using the *Notes for ToT trainers* below.

Notes for ToT trainers:

- *Keeping to time is everyone's responsibility; encourage participants to take responsibility for their own timekeeping.*
- *Begin each session on time (at the beginning of the day and after breaks); avoid penalizing those who arrive on time by making them wait for latecomers.*
- *Prepare equipment and resources in advance; plan how you will use these and where you will position them.*
- *Follow session plans closely. Do not add material or too many examples to the WSTP unless you have additional time.*
- *Keep discussions focused on the aim and objectives of the session. Park topics for discussion that are not relevant to the current session or that cannot be answered quickly.*
- *Give clear time markers for participants, for example: '15 minute tea break, back at 10:45'; 'You have 10 minutes for discussion in your groups and 5 minutes for feedback'.*
- *Agree on signals with co-trainers to indicate how much time is remaining for a session.*
- *Have a back-up plan for sessions that require specific logistics, for example, what if rain interrupts the wheelchair mobility session?*
- *In areas with unreliable power, consider having a generator with in-line UPS (Uninterrupted Power Supply) for back-up.*
- *Check that the refreshments are organised – delays in food arriving can mean sessions start late after breaks.*

6. Key point summary (2 minutes)



Read the key points.

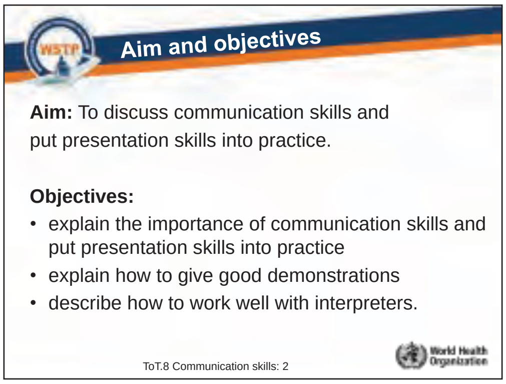
Ask whether there are any questions.

ToT.8 Communication skills

AIM	To discuss communication skills and put presentation skills into practice.
LEARNING OBJECTIVES	By the end of this session trainees will be able to: ☐ explain the importance of communication skills and put presentation skills into practice ☐ explain how to give good demonstrations ☐ describe how to work well with interpreters.
RESOURCES	For the session: ☐ PPT slides: *Core training skills ToT.8: Communication skills.*
TO PREPARE	☐ Gather resources, review PPT slides and read through the session plan. ☐ Review related notes in the *ToT Handbook.*

OUTLINE		
	1. Introduction	2
	2. Types of communication	55
	3. Demonstrations, videos and interpreters	30
	4. Key point summary	3
	Total session time	**90**

1. Introduction (2 minutes)

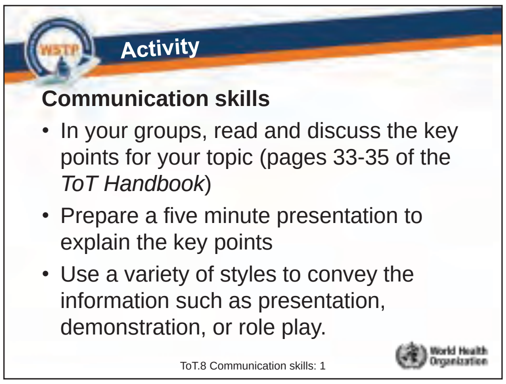


Explain the aim and objectives of the session.

2. Types of communication (55 minutes)

Explain:

- Communication skills are key to becoming a good trainer.
- In this activity you will have the opportunity to practise your communication skills.
- You will take on the role of trainer and present the key learning points for your topic yourself.
- This is a chance for you to put some of the skills discussed in the *Presenting and facilitating* session into practice.



Show the slide throughout the activity.

Activity 1	
Groups:	**Divide** trainees into four groups.
Instructions:	**Assign** each group one of the topics listed in the *Notes for ToT trainers* that follow and direct trainees to page 33–35 in the *ToT Handbook*. Each group should present the information listed under their topic. **Encourage** groups to be creative and to use props, flipcharts, or the board as desired.
Monitor:	**Monitor** the groups and assist as needed.
Time:	**Allow** 20 minutes for groups to prepare the task; 5 minutes for each group to present; 2 minutes for discussion after each presentation; and 5 minutes for final feedback and consolidation by the ToT trainer.
Feedback:	**Refer** trainees to their *ToT Handbook* to check if all the information was communicated in the session. **Focus** feedback on the content of the session and the different communication skills. The ToT trainer should briefly summarize any key points not clearly presented by the group.

Notes for ToT trainers:

Group 1 - Verbal skills

- *Be aware of speed, volume and rise and fall (intonation) of the voice when presenting.*
- *Avoid using socially inappropriate language, including slang and 'non-speak' ('er', 'um', 'like', 'you know').*
- *Be heard clearly by all participants.*
- *Be aware of when participants do, and do not, understand what the trainer says.*
- *Be sure that everyone understands when the training programme is in a second language for participants, or when it is delivered via an interpreter.*
- *Use terms that will be understood by all the participants (especially when discussing anatomical parts of the body).*
- *Terms used in the training are simple and non-medical to ensure wheelchair service users and participants without clinical or higher education understand the content.*

Group 2 – Non-verbal communication • *Maintain eye contact.* • *Be aware of your body language.* • *Use humour when appropriate. Humour is about lightness and not taking oneself and one's opinion too seriously.* • *Humour does not mean joking. Jokes are often cultural and may not work the way you intended.* • *Use appropriate actions when communicating with wheelchair users, including lowering your body to be at eye level.* • *Position yourself and participants in the room:* – *when presenting, the trainer should stand at the front or side* – *participants should be able to see and hear the trainer* – *in semi-circles so that no one is in the back row and all participants can see each other* – *standing behind participants is appropriate in certain circumstances, for instance when presenting and the trainer needs to read their PowerPoint slides* – *depending on the context, it may be appropriate for the trainer to sit at times; this creates a more relaxed, friendly dynamic.*
Group 3 – Asking questions • *Allow time for all participants to think about and respond to the question – don't always take an answer from the first respondent. Some participants may need time to think, especially if the training is not being delivered in their first language.* • *Don't jump to answer participants' questions. Help facilitate participants to think of the idea, concept, or answer without telling them the answer when possible. Draw answers from the room.* • *Rephrase questions when needed. If the response from participants is silence, confusion, or a wrong answer, the question may need to be rephrased.* • *Use open questions to check understanding (for example, 'what are the three causes of pressure sores?').* • *Avoid using closed questions (questions where the response is 'yes' or 'no').* • *Acknowledge when correct answers are given.* • *If an incorrect answer is given, first ask the same question to another participant or to the rest of the group. Only provide the correct answer if no one in the group can do so.* • *If questions are repeatedly answered incorrectly, it is a sign that something is wrong. Possible problems include:* – *participants are not learning. You may need to rephrase your explanation or return to an earlier part of the training that now appears to be poorly understood* – *questions are inappropriate for their level of knowledge* – *questions are poorly phrased* – *questions use words participants do not understand.*

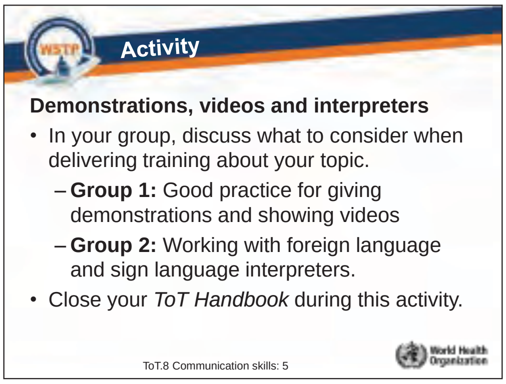
Group 4 – Answering questions

- *Sometimes participants ask a question without thinking it through for themselves. When this happens, challenge them to work out the answer themselves. (Refer to the last exercise in Session ToT.5: Adult Learning).*
- *Help participants find the answer by questioning them. For example, 'What do you think?', 'What factors are important to consider when deciding…?' Draw out the correct ideas from participants, developing their clinical reasoning and problem-solving skills.*
- *If someone asks a question that you do not know the answer to, first ask if any participants or co-trainers can answer it.*
- *If no one can answer, add the question to the Car Park and offer to look it up and share it with the group before the end of the training.*
- *Never make up an answer if you do not know.*
- *If there is not enough time to answer a question at the time of asking, use the Car Park to make a note of it and address it later in the training programme.*
- *Avoid spending time on questions that are beyond the aim and objectives of the session. Take the opportunity in a break to discuss the issue with the questioner.*
- *Questions related to upcoming sessions can be parked in the Car Park. When Car Park questions are covered, check if the participant feels their question has been answered.*
- *Listen: make sure you listen to the whole question before assuming you know what the question is. This means not interrupting or filling in the sentence.*
- *Be aware of the difference between 'right/wrong' questions (especially relevant to WSTPb and WSTPi) and those that do not have a right or wrong answer, as is often the case in WSTPm and WSTPs.*

3. Demonstrations, videos and interpreters (30 minutes)

Explain: We will now look at three more aspects of communication.

Read the slide.



Show the slide throughout the activity.

Activity 2	
Groups:	**Divide** trainees into two groups.
Instructions:	**Ask** trainees to close their *ToT Handbook* (the answers are in the book). **Assign** one topic to each group: • **Ask** group 1 to consider: Good practice for giving demonstrations and showing videos. • **Ask** group 2 to consider: Working with foreign language and sign language interpreters. **Ask** trainees to discuss what to consider when delivering training about your topic and to write it on a flipchart to present to the other group. **Refer** trainees to the activity instructions on the PPT slide.
Monitor:	**Monitor** the groups and assist as needed.
Time:	**Allow** 10 minutes for the groups to develop their lists; 5 minutes for each group to present; and 5 minutes for additional key points after each presentation.
Feedback:	**Ask** group 1 to present their findings to group 2. **Add** in any key points missed from the trainer's notes below. **Ask** group 2 to present their findings to group 1. **Add** in any key points missed from the *Notes for ToT trainers* below. **Refer** trainees to the reference material in the *ToT Handbook*.

Notes for ToT trainers:

Giving demonstrations:

- *make sure everyone can see*
- *prepare props and equipment in advance*
- *explain clearly, demonstrate and repeat*
- *know your audience*
- *allow participants to practise what has been demonstrated*
- *monitor participants and step in as necessary to give feedback (especially related to safety)*
- *consider gender during demonstrations in WSTPb and WSTPi, especially when touching is necessary.*

Using videos:

- *familiarize yourself with the content*
- *check for cultural and gender sensitivity*
- *explain what it is about before you show it*
- *mention the approximate length*
- *link it to the session*
- *play videos with subtitles to make them easier to follow*
- *ask questions about issues you want participants to consider, and highlight what they should observe*
- *repeat key sections, if time allows, or pause at critical points for emphasis.*

Working with foreign language and sign language interpreters:

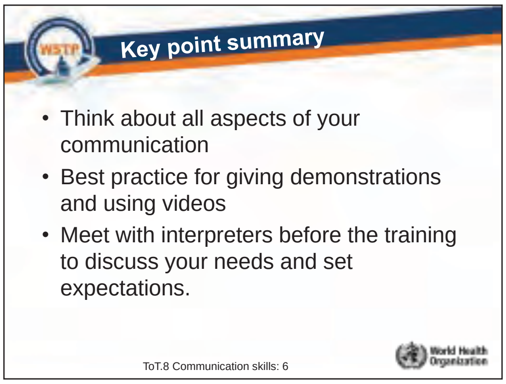
Meet with the interpreter before the training starts to discuss:

- *pace of speech*
- *key terms, including terminology related to people with disabilities*
- *how to communicate with wheelchair users*
- *their role during practical activities*
- *content of the training – provide a copy of the Trainer's Manual to interpreters*
- *instruct interpreters to translate everything, not to summarize or change what is being said*
- *interpreters should never answer a question on your behalf*
- *arrange for two interpreters so that they can take rest breaks.*

During the training make sure that you:

- *speak slowly and clearly*
- *watch your body language*
- *keep your hands away from your face for lip-readers*
- *always engage with the individual or audience directly*
- *show interest, keep eye contact and remain focused*
- *plan your time: talking through an interpreter makes conversations twice as long.*

4. Key point summary (3 minutes)



Read the key points.

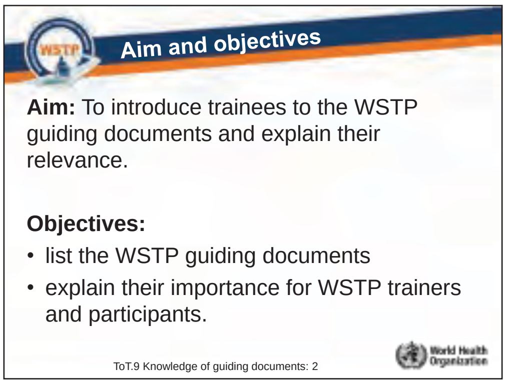
Ask whether there are any questions.

ToT.9 Knowledge of guiding documents

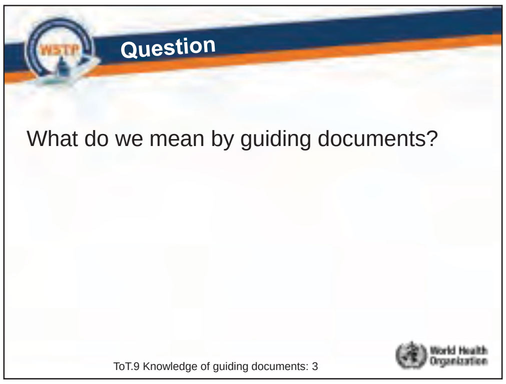
AIM	To introduce trainees to the WSTP guiding documents and explain their relevance.
LEARNING OBJECTIVES	By the end of this session trainees will be able to: ☐ list the WSTP guiding documents ☐ explain their importance for WSTP trainers and participants.
RESOURCES	For the session: ☐ PPT slides: *Core training skills ToT.9: Knowledge of guiding documents* ☐ Video: *Sustainable Development Goals.* One copy of each of the following resources: ☐ *United Nations Convention on the Rights of Persons with Disabilities (CRPD)* ☐ WHO *Guidelines on the provision of manual wheelchairs in less-resourced settings* ☐ WHO *Joint position paper on the provision of mobility devices in less-resourced settings* ☐ WHO *CBR Guidelines:* Introductory Booklet and Health Component ☐ *Design Considerations for Accessibility.*
TO PREPARE	☐ Gather resources, review PPT slides and read through the session plan. ☐ Review related notes in the *ToT Handbook.* ☐ Ensure thorough knowledge of all guiding documents. ☐ Consult the UN website to check the total number of countries that have signed the *CRPD* at the time of your training programme. Check whether the trainees' countries have signed and ratified the *CRPD* so that you can mention this and answer any questions. http://www.un.org/disabilities/

OUTLINE		
	1. Introduction	8
	2. The *CRPD* as it relates to wheelchair service provision	20
	3. WHO *Guidelines on the provision of manual wheelchairs in less-resourced settings*	5
	4. CBR Guidelines	25
	5. Other guiding documents	15
	6. Key point summary	2
	Total session time	**75**

1. Introduction (8 minutes)



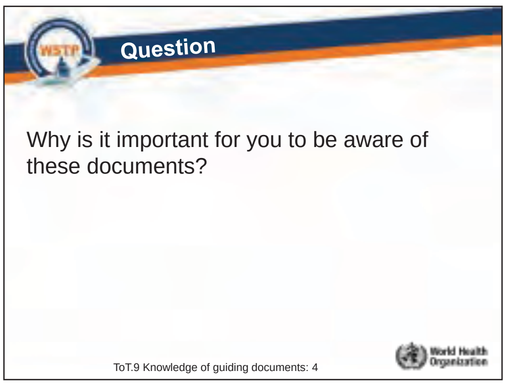
Explain the aim and objectives of the session.



Ask: What do we mean by guiding documents?

Acknowledge answers.

Most important answers:
• Publications, policies, conventions or laws that provide frameworks, guidance or rules that are relevant to wheelchair service provision. • Resources that guide stakeholders in the provision of wheelchair services.

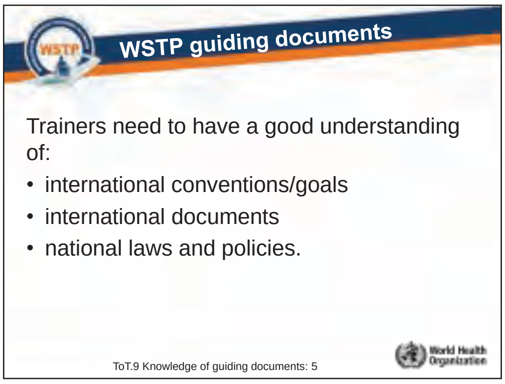


Ask: Why is it important for you as trainers to be aware of these documents?

Acknowledge answers.

Most important answers:

- Many governments, international agencies, donors and other stakeholders plan and fund development work in line with these international frameworks.
- To be in a stronger position to educate and advocate for appropriate wheelchair service provision.



Explain:

- When running a WSTP training programme, it is important to be aware of these guiding documents to help you educate and advocate for appropriate wheelchair provision.
- Local documents are likely to be referred to by participants and trainers will need a good understanding of them too.

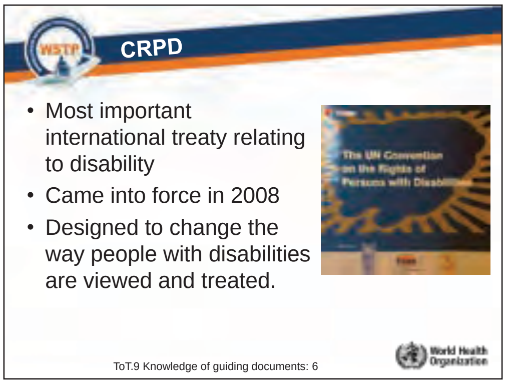
Explain: A good understanding of these resources can contribute to the quality of your training delivery. There is more information on all guiding documents in your *ToT Handbook*

Ask: What are the two most important guiding documents that relate to wheelchair service provision?

Most important answers:

- *United Nations Convention on the Rights of Persons with Disabilities*
- *WHO Guidelines on the provision of manual wheelchairs in less-resourced settings.*

2. The *CRPD* as it relates to wheelchair service provision (20 minutes)



Explain:

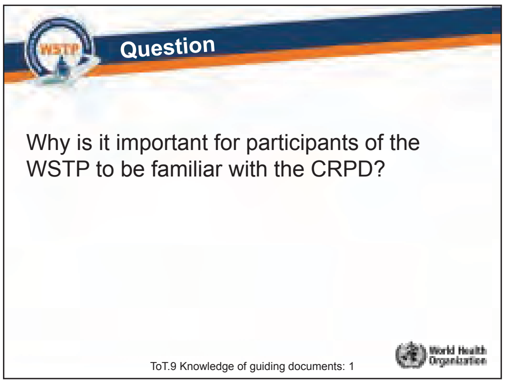
- We will look first at the *United Nations Convention on the Rights of Persons with Disabilities,*[7] commonly known as the *CRPD*.
- The *CRPD* is widely considered to be the most important international treaty relating to people with a disability.
- The *CRPD* came into force in 2008.

Explain:

- On its opening day, 82 countries signed the *CRPD* and 44 signed its Optional Protocol: the highest number of signatories to a UN Convention on its opening day in history.
- The *CRPD* was designed by representatives of the international community to change the way people with disabilities are viewed and treated in their societies.
- Representatives included people with disabilities, government officials and representatives of nongovernmental organizations.
- The *CRPD* is important because it is a tool for ensuring that people with disabilities have access to the same rights and opportunities as everybody else.

Notes for ToT trainers:
• *Look up the total number of countries that have signed the CRPD at the time of your training programme and check whether the participants' country/countries have signed and ratified the Convention.*

7 Convention on the Rights of Persons with Disabilities. In: Sixty-first session, United Nations General Assembly, New York, 6 December 2006. New York: United Nations; 2006. (Res.A/ 61/611 (http://www.un.org/esa/socdev/enable/rights/convtexte.htm).

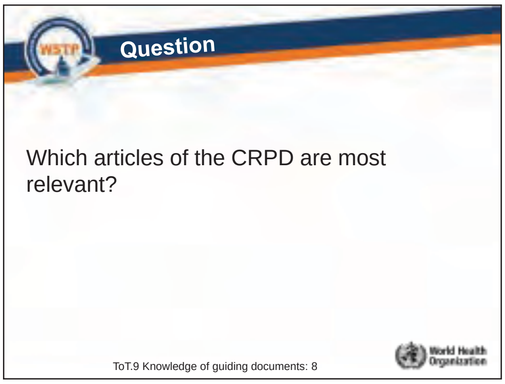


Ask: Why is it important for participants of the WSTP to be familiar with the *CRPD*?

Acknowledge responses.

Most important answers:

- To use the rights-based approach of the *CRPD* to help develop wheelchair service provision for people with disabilities.
- To use *CRPD* articles as a guide when setting goals for wheelchair service delivery.
- To help advocate to government and other stakeholders to collaborate to achieve the aims of the articles.
- To encourage donors who back the *CRPD* to support wheelchair service provision in their countries.



Explain: The *CRPD* has several articles relevant to wheelchair service provision.

Ask: Without looking at your *ToT Handbook*, can anyone remind us which articles are the most relevant?

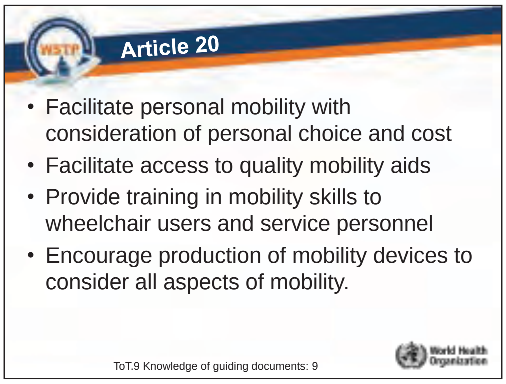
Acknowledge responses.

Most important answers:

- Article 20 – Personal mobility
- Article 4 – General obligations
- Article 26 – Habilitation and rehabilitation
- Article 32 – International cooperation.

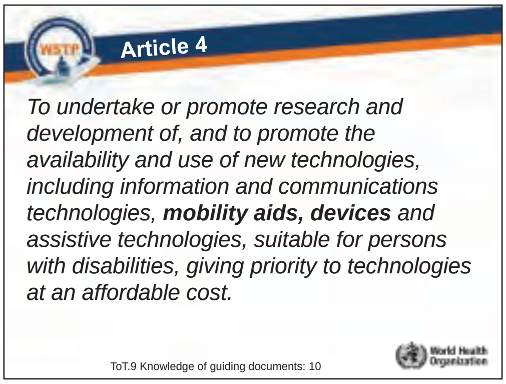
Other answers may include:

- Article 19 – Living independently and being included in the community
- Article 24 – Education
- Article 25 – Health
- Article 27 – Work and employment
- Article 30 – Participation in cultural life, recreation, leisure and sport.



Explain:

- *CRPD* Article 20 is the most relevant to wheelchair service provision.
- It requires States Parties to take effective measures to ensure personal mobility with the greatest possible independence for persons with disabilities.

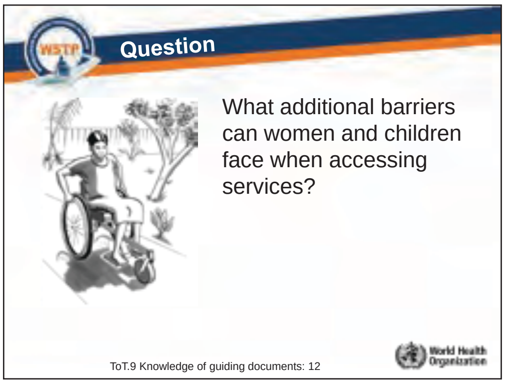


Explain: Article 4 covers General obligations and includes this statement.

Explain:

- These articles are also relevant because, for example, they mention the importance of assistive devices, reasonable accommodation, and mobility skills training.
- Article 26 is particularly important as it deals with Habilitation and Rehabilitation.

Explain: Many other articles of the *CRPD* are indirectly relevant to wheelchair service provision. For example, Article 6 is concerned with the specific inclusion of women with disabilities and Article 7 with equality for children.



Ask: What additional barriers can women and children face when accessing wheelchair services?

Ask participants to take one or two minutes to discuss this with the person next to them and then collect feedback.

Acknowledge responses and add any important points not mentioned.

Most important answers:

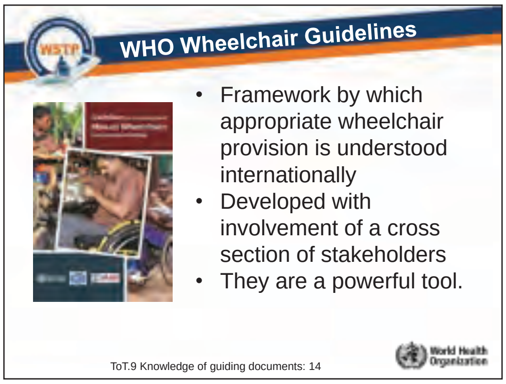
- In some cultures, and communities, women and children are not valued as equal to men.
- Where a wheelchair must be purchased, in some cultures family funds may not be prioritized for women or girls.
- Where early identification and early intervention services are not available, children may not be referred.
- Wheelchairs in suitable sizes for children may not be available.
- Children often need supportive seating, which may not be available. Parents and carers may choose to carry children with disabilities for many reasons: when they are small it can be easier; they won't have to face the stigma of their child being seen in a wheelchair; the challenges of travelling on public transport with a wheelchair are significant; or, lack of awareness of any other option.

Explain: To meet Articles 6 and 7 of the *CRPD*, wheelchair provision services must specifically ensure the needs of women and children are considered.

3. WHO *Guidelines on the provision of manual wheelchairs in less-resourced settings* (5 minutes)

Explain: The WHO *Guidelines on the provision of manual wheelchairs in less-resourced settings* (*Wheelchair Guidelines*) is the most important international document focused on wheelchair provision.

Acknowledge that most trainees will be very familiar with the *Wheelchair Guidelines.*



Explain:

- The *Wheelchair Guidelines* outline the framework by which appropriate wheelchair provision is now understood internationally.
- Prior to the publication of the *Wheelchair Guidelines,* organizations involved in wheelchair provision did not have a common understanding of what was important to consider.

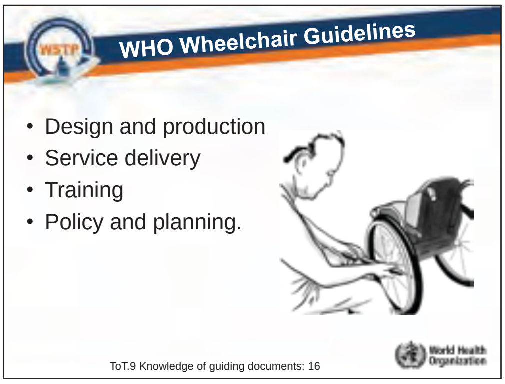
Explain:

- The *Wheelchair Guidelines* were developed with the involvement of a cross section of stakeholders from all continents.
- They provide us with a powerful tool to help us develop services in line with agreed standards, and to advocate to government and other stakeholders for appropriate wheelchair services.
- The *Wheelchair Guidelines* reflect standards that are universally achievable in low-, middle- and high-resourced contexts.

Ask: Who can remember the definition of an appropriate wheelchair?

Acknowledge answers.

Read the points on the slide.



Explain: The *Wheelchair Guidelines* also cover wheelchair:

- design and production
- service delivery
- training
- policy and planning.

Ask: Who has read the *Wheelchair Guidelines* in the last year?

Encourage all trainees to read the *Wheelchair Guidelines* thoroughly. A WSTP trainer's knowledge of the *Wheelchair Guidelines* should be comprehensive; trainers should try to raise awareness of them whenever they have the opportunity.

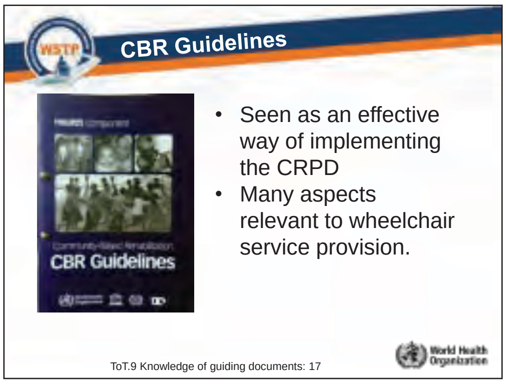
Explain: The *Wheelchair Guidelines* are available on the WHO website in a range of languages.[8]

8 http://www.who.int/disabilities/publications/technology/wheelchairguidelines/en/

4. *CBR Guidelines* (25 minutes)

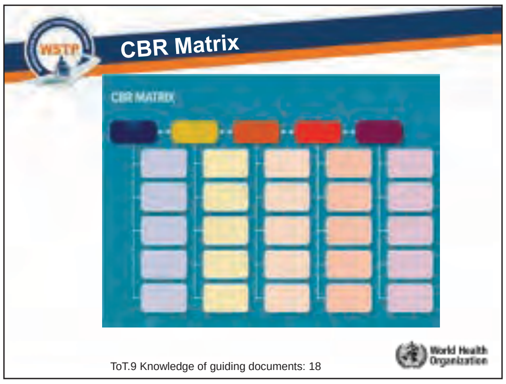
Explain: There are several other guiding documents included in the supplementary resources section on the WSTP Pen Drive. You should be familiar with these, so that you can explain their importance and relevance to others.

Explain: Community-Based Rehabilitation (CBR) is likely to come up in discussions during the WSTP. It is therefore important that trainers have a good understanding of the *CBR Guidelines*,[9] particularly the health component.



Explain:

- CBR, also often called Community-Based Inclusive Development (CBID), is increasingly seen as one of the most effective ways of implementing the *CRPD*.
- Many aspects of CBR are relevant to wheelchair service provision. For example, referral networks, community health centres and CBR workers.



Explain: The CBR Matrix[10] is one of the cornerstones of the *CBR Guidelines*.

Ask: What are the five key components of the CBR matrix?

Acknowledge answers.

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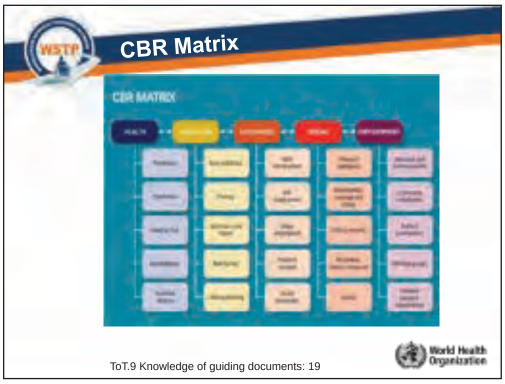
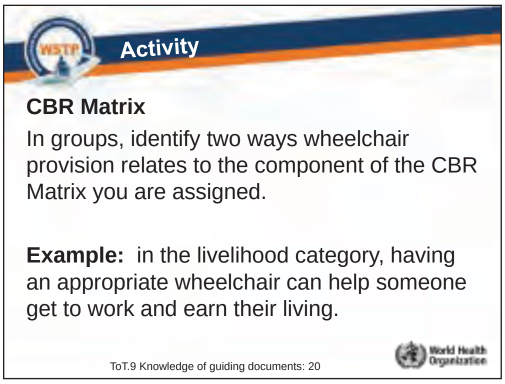
9 WHO Community-based rehabilitation: CBR Guidelines. Geneva: World Health Organization; 2010 (http://www.who.int/disabilities/cbr/guidelines/en/).

10 The CBR Matrix. Geneva: World Health Organization (http://www.who.int/disabilities/cbr/matrix/en/).



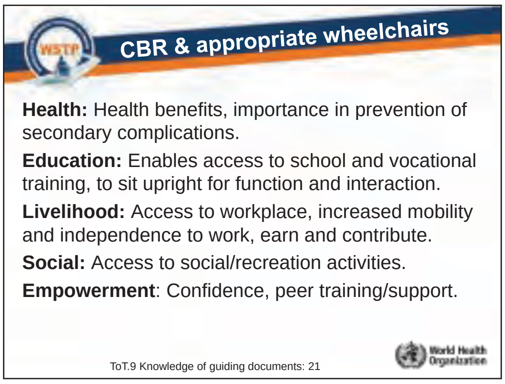
Explain:

- The five components are: Health, Education, Livelihood, Social and Empowerment.
- Each component of the Matrix has five elements within it, so there are a total of 25.



Show the slide throughout the activity.

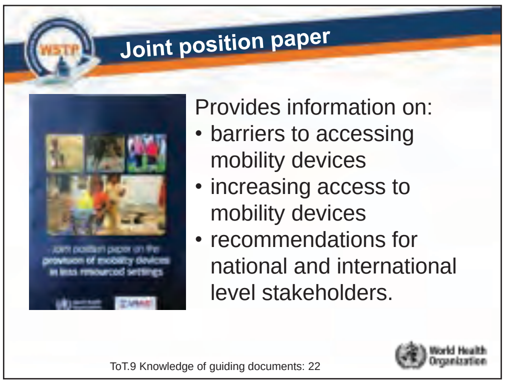
Activity 1	
Groups:	**Divide** trainees into five groups. Create a mix of gender, experience/knowledge and skills in each group.
Instructions:	**Refer** trainees to their copy of the CBR Matrix on page 45 of the *ToT Handbook*. **Allocate** one component of the matrix to each group to discuss. **Ask** trainees to consider the ways in which wheelchair service provision relates to their component and to be ready to feedback to the group on two of them.
Monitor:	**Monitor** the groups and assist as needed.
Time:	**Allow** 10 minutes for the activity and 10 minutes for feedback.
Feedback:	**Ask** each group for their first answer in turn. Then ask each group for their second answer in the same way. **Answers may include:** **Health** • Rehabilitation – long and short term. • Health promotion and prevention of secondary complications; for instance, early identification and intervention to prevent complications such as scoliosis and pressure sores. • Access to health-care services. **Education** • Enables access to school, educational programmes and vocational programmes. **Livelihood** • Access to perform livelihood activities. • Earning capacity. • Access financial services. **Social** • Promote access to social and recreational activities. • Join sport and cultural programmes with peers. • Opportunity to form and develop relationships. **Empowerment** • Improved self-image and confidence. • Peer support.



Explain:

- This slide summarizes how appropriate wheelchair provision can improve the key aspects of life identified in the CBR Matrix.
- There is further information on the *CBR Guidelines* and Matrix in the *ToT Handbook*.

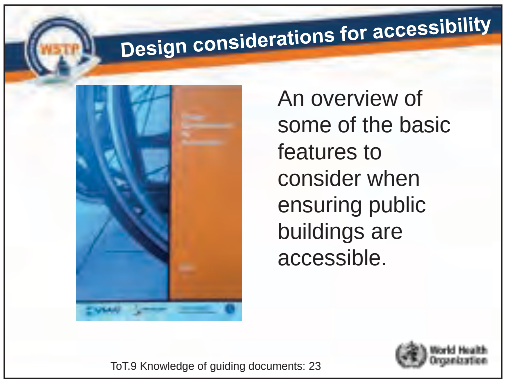
5. Other guiding documents (15 minutes)



Explain:

- The WHO *Joint position paper on the provision of mobility devices in less-resourced settings*[11] was published in 2011 to help countries implement *CRPD* articles associated with the provision of mobility devices.
- It includes information on barriers to accessing mobility devices; requirements to increase access to mobility devices; and recommendations for individual countries and international stakeholders.

11 Joint position paper on the provision of mobility devices in less-resourced settings: a step towards implementation of the Convention on the Rights of Persons with Disabilities (CRPD) related to personal mobility. Geneva: World Health Organization; 2011



Explain:

- The final guiding document included on the WSTP Pen Drive is *Design considerations for accessibility*.[12]
- This gives useful information on how to ensure all aspects of access are considered; both when visiting the wheelchair service and in other environments.

Explain: There are a number of other guiding documents that you should be familiar with as a trainer of the WSTP.

Ask: Another major international instrument has been launched since the development of the WSTP: Can anyone tell us what that is?

Acknowledge answers.

Most important answer:
Sustainable Development Goals (SDGs).[13]

Explain:

- The *SDGs* are a follow up to the *Millennium Development Goals (MDGs).*
- They were launched in September 2015 and have a timeline of 2015 to 2030.

12 Design considerations for accessibility 2006. Sri Lanka: John Grooms Working with Disabled People; 2006 (http://ascon.info/publications/accessibility.pdf).

13 The sustainable development goals [website]. New York: United Nations (http://www.un.org/sustainabledevelopment/sustainable-development-goals/).

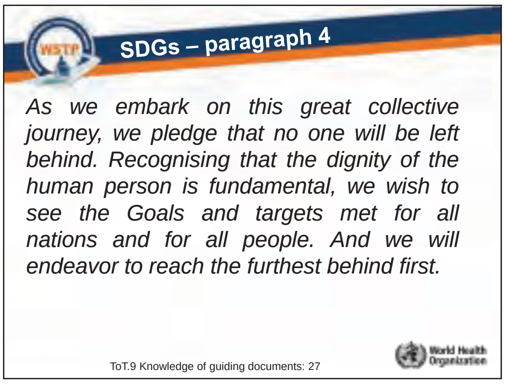
Introduce video: *Sustainable Development Goals.*

Ask participants to watch this United Nations video on the 17 *SDGs*.

Show video.

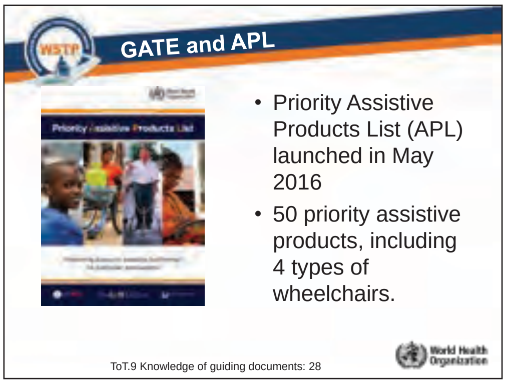
Explain:

- Five *SDGs* make specific references to disability: 4, 8, 10, 11 and 17.
- Nine global indicators relate to disability.



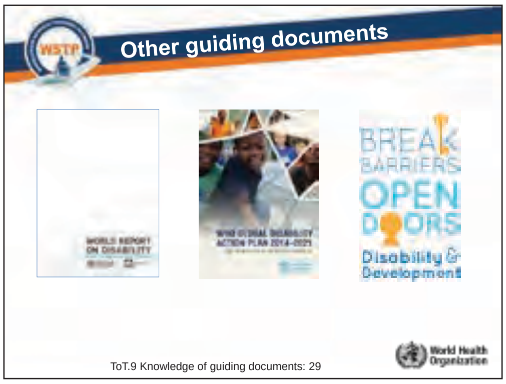
Explain:

- The *SDGs* aim to reach the most vulnerable and commit to reach the furthest behind first.
- Many stakeholders will be addressing the *SDGs* so it is important to consider how appropriate wheelchair service provision can contribute to meeting the goals.



Explain:

- WHO's *Global Cooperation on Assistive Technology (GATE*) initiative is another important step forward.
- *GATE* was created to improve access to assistive technology globally.
- GATE's first outcome is the *WHO Priority Assistive Products List* (APL),[14] launched in May 2016.
- The APL features the 50 priority assistive products/devices that governments should make available at an affordable cost, including four different types of wheelchairs.



Explain: Other relevant documents detailed in the *ToT Handbook* include the:

- *WHO World Report on Disability*[15]
- *WHO Global Disability Action Plan*[16]
- *UN High Level Meeting on Disability.*[17]

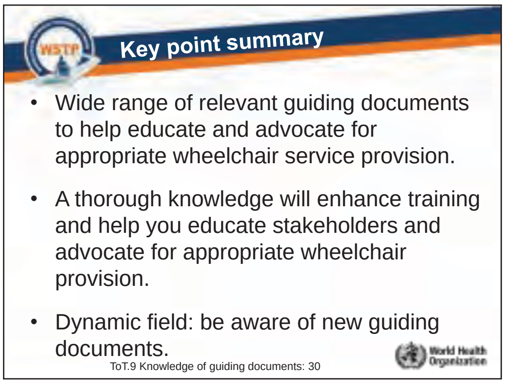
14 Priority Assistive Products List. Geneva: GATE World Health Organization; 2016 (http://www.who.int/phi/implementation/assistive_technology/global_survey-apl/en/).

15 World report on disability. Geneva: World Health Organization; 2011 (http://www.who.int/disabilities/world_report/2011/en/).

16 WHO Global disability action plan 2014–2021: Better health for all people with disability. Geneva: World Health Organization; 2015 (http://apps.who.int/iris/bitstream/10665/199544/1/9789241509619_eng.pdf?ua=1).

17 Outcome document of the High-level Meeting of the General Assembly on the realization of the Millennium Development Goals and other internationally agreed development goals for persons with disabilities: the way forward, a disability-inclusive development agenda towards 2015 and beyond. In: Sixty-eighth Session of the United Nations General Assembly, New York, 23 September 2013. New York: United Nations; 2013 (http://www.un.org/en/ga/search/view_doc.asp?symbol=A/68/L.1).

6. Key point summary (2 minutes)



Read the key points.

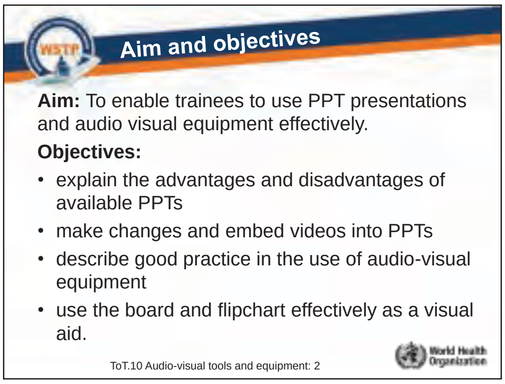
Ask whether there are any questions.

ToT.10 Audio-visual tools and equipment

AIM	To enable trainees to use PowerPoint (PPT) presentations and audio-visual equipment effectively.
LEARNING OBJECTIVES	By the end of this session trainees will be able to: ☐ explain the advantages and disadvantages of the available PPTs in the WSTP ☐ make changes to and embed videos into PPTs ☐ describe good practice in the use of audio-visual equipment ☐ use the board and flipchart effectively as a visual aid.
RESOURCES	For the session: ☐ PPT slides: *Core training skills ToT.10: Audio-visual tools and equipment* ☐ remote control slide changer and laser pointer if available.
TO PREPARE	☐ Gather resources, review PPT slides and read through the session plan. ☐ Review related notes in the *ToT Handbook*. ☐ Familiarize yourself with the equipment and with using the PPT (including embedding videos) beforehand, so you can answer questions, give a good demonstration and know what kinds of problems trainees might experience.

OUTLINE		
	1. Introduction	4
	2. PowerPoints in the WSTP	20
	3. Using the board and flipchart as a visual aid	20
	4. Key point summary	1
	Total session time	**45**

1. Introduction (4 minutes)



Explain the aim and objectives of the session.

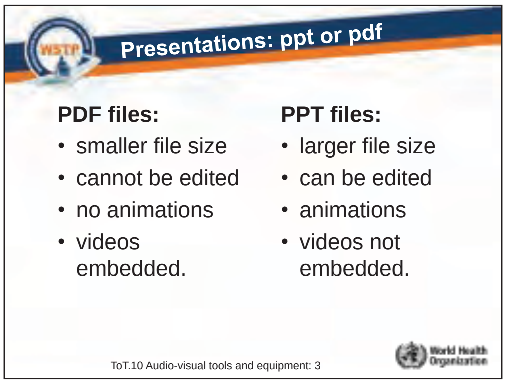
Ask: What types of audio-visual (AV) equipment have we used so far in the training?

Most important answers:
• Data projector for ppts and videos • Board • Flipchart • Sticky notes on wall.

Ask: In what ways was the equipment useful?

Most important answers:
Flipchart and whiteboard: • highlighted key information/learning points during sessions and for future reference (for example Ground Rules) • visual reminder of answers already given • assist with technical explanations. PPTs and videos: • opportunity to show diagrams to explain concepts • reinforced learning by showing images/messages as well as speaking • helped to focus attention.

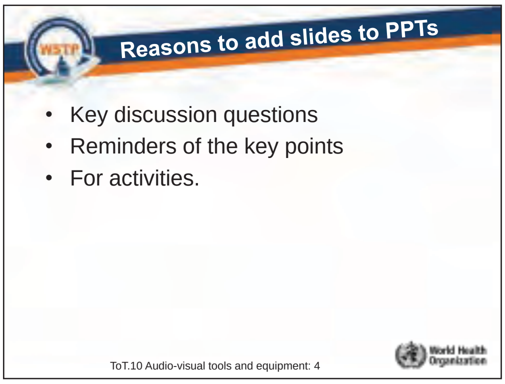
2. PowerPoints (PPTs) in the WSTP (20 minutes)



Explain:

- WSTP PPTs are available in two versions, non-editable PDF files and editable PPT.
- PDF versions are:
  - smaller in size and have the videos embedded
  - cannot be edited
  - do not include 'builds' or 'reveals' where bullet points appear one by one.

- PPT versions are:
  - larger in size
  - can be edited
  - do not come with the videos embedded
  - include animations.

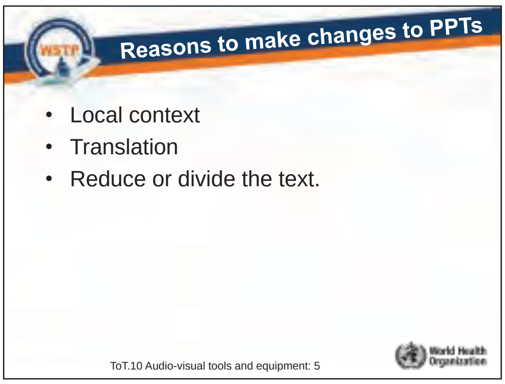


Explain: Trainers may want to add slides to include the following:

- Key questions:
  - the *Trainer's Manual* includes questions for trainers to ask participants.
  - adding the question to a slide can remind you to ask the question and not to move on to the answers too soon.

- Key points:
  - some sections of the *Trainer's Manual* have large amounts of text without reminder slides.
  - adding key points can help you to remember to cover all aspects of the session plan.

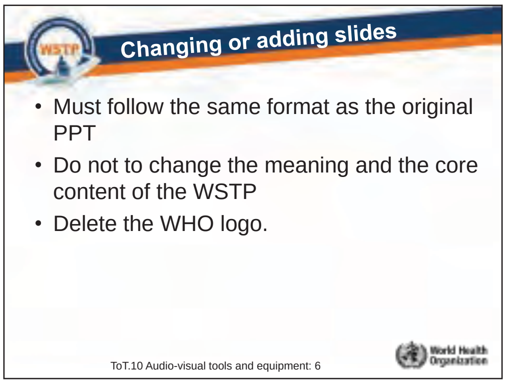
- Instructions for activities:
  - key questions or key instructions that relate to activities can be added to slides.



Explain: Trainers many want to change slides to:

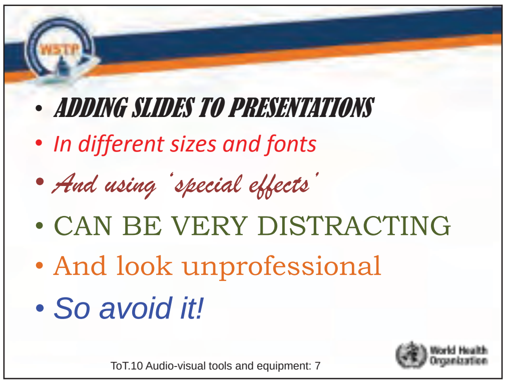
- adapt for the local context
- provide translation or locally relevant terms
- reduce the text or divide content into two or more slides.

Explain: It is important not to change the meaning of the content or the methodology of the WSTP.



Explain: If you modify slides or add extra slides you must:

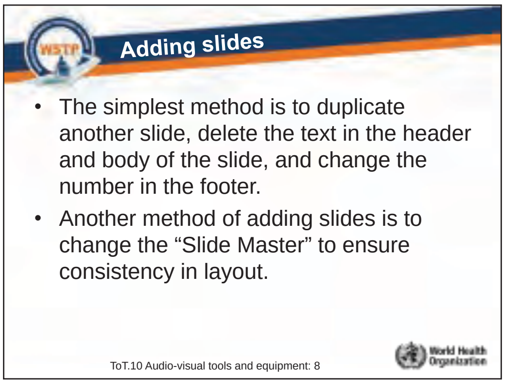
- follow the same style as the original PPT
- not change the meaning and core content of the WSTP
- delete the WHO logo (in line with WHO's copyright policy).



Explain: Do not change the style, font or colour, or add complex animations.

Adding slides

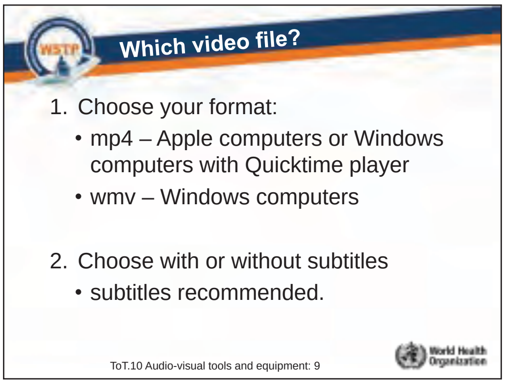
Come out of “Slide Show” mode and demonstrate the following using the next slide.



Explain:

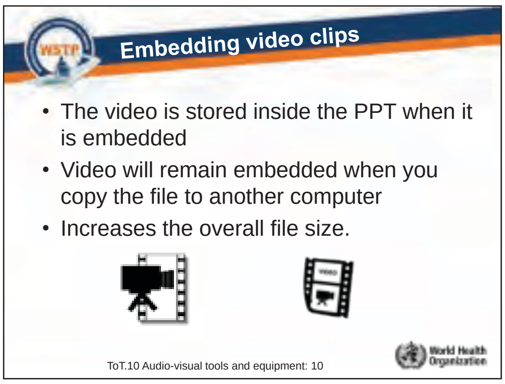
- The simplest way to add slides to an existing WSTP presentation is to duplicate another slide, delete the text in the header and body of the slide, and change the number in the footer.
- Remember to remove the WHO logo from any slides that you add.
- More details on how to do this are included in your *ToT Handbook*.

Inserting video clips (Using Office 2013)



Explain:

- All video clips are available in two formats, mp4 and wmv. Select the appropriate format for your computer.
- Some video clips are available with subtitles. Using the clips with subtitles is recommended to:
  - allow for any difficulty understanding regional accents
  - overcome poor sound quality or external noise
  - be accessible to people with hearing impairments.



Explain:

- Embedding videos is recommended.
- When embedded, the video is stored inside the PPT.
- This makes the file larger, but the video should not get lost when you copy the file to another computer.

Demonstrate the following:

To embed the video in PPT 2010 onwards, follow these steps.

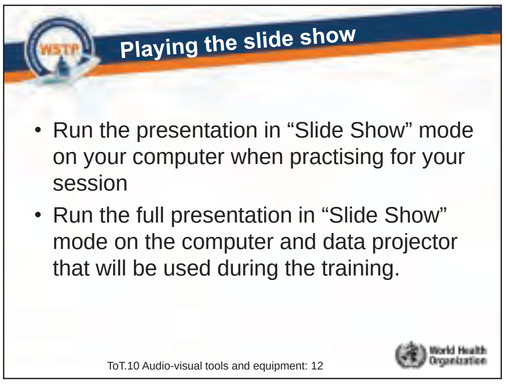
- Open the "Presentations" folder, then the "PowerPoint" folder. Open the slide you want to edit
- Click on the "Insert" tab
- Click on the drop down arrow under the Video icon
- Click "Video from File"
- Browse to the folder with the video clips, select the video clip you want and insert it
- Save your changes
- The video is now part of the PPT.

Explain:

- It is possible to set the video to always play in full screen mode.
- Windows computers: In the "Video"/"Tools"/"Playback" tab, check the box called "Play Full Screen".
- Mac computers: "Format Movie" tab, click on the "Playback Options" dropdown list and select "Play Full Screen".

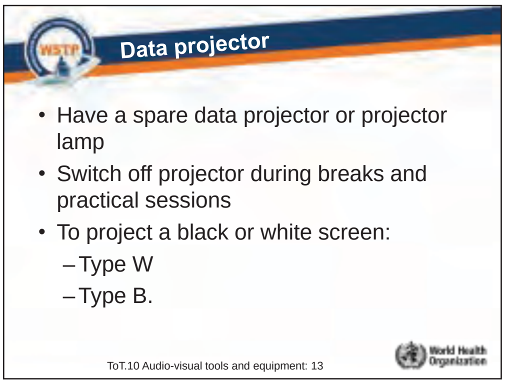
Return to "Slide Show" mode and show how to play the video. Play the first few seconds and then go to the next slide.

Notes for ToT trainers:
• *Let participants know that they can practise these skills during the preparation time at the end of the day.* • *Local photos or illustrations can be added to the slides to give them context.* • *Translation of the slides can be done locally – always check with WHO first to see if the slides have already been translated.*



Explain:

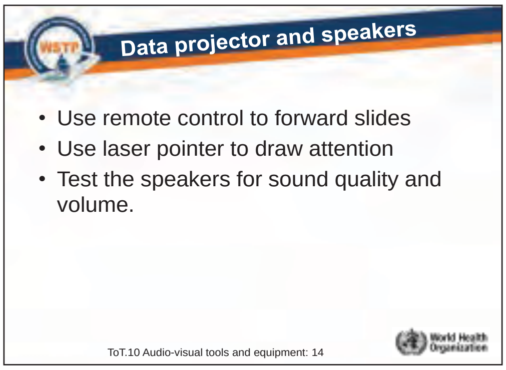
- When practising your PPT session, use "Slide Show" mode. This will identify any problems with transitions, animations and flow.
- Run through the slides and videos in "Slide Show" mode on the computer and data projector that will be used during the training.
- This is important if you are not using your own computer, as different settings on different computers can prevent presentations from running as planned.
- Consider using one computer for all presentations during training, which will save time switching between presenters.



Explain:

- If possible, have a spare data projector or projector lamp available.
- Switch off the projector during breaks and practical sessions to save use of the lamp.
- If you need to project a black or white screen, you can usually type W for a white screen and B for a black screen when you are in "Slide Show" mode.

Demonstrate how to get a black or white screen.

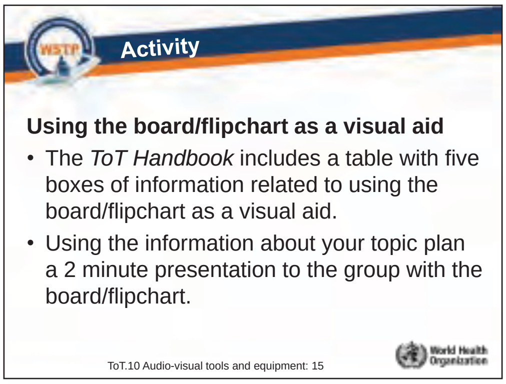


Explain:

- Using a remote control to click between slides means that trainers do not need to stand next to the computer during their presentation.
- Laser pointers can be used to draw participants' attention to a specific item on the slide.
- Test the speakers each morning to ensure they are connected properly.

Demonstrate using a remote control with a laser pointer (if available).

3. Using the board and flipchart as a visual aid (20 minutes)



Show the slide throughout the activity.

Activity 1	
Groups:	**Divide** trainees into 5 groups.
Instructions:	**Refer** trainees to the table on *Using the board/flipchart as a visual aid* on page 60 of the *ToT Handbook*. **Allocate** one topic from the table to each group and ask them to read through the information provided and plan how to communicate this to the rest of the group using the board/flipchart.
Monitor:	**Monitor** the groups and assist as needed.
Time:	**Allow** 10 minutes for preparation and 2 minutes for each group to present.
Feedback:	**Add** any information missed in the presentations.

Using the board/flipchart as a visual aid

1. Drawing a sketch or diagram

If you want to use a sketch/drawing/diagram/chart to aid in an explanation, draw it yourself:

- consider drawing the outline lightly in pencil or making drawings beforehand
- plan it in advance, so it fits the board and can be seen easily
- practise until you can draw clearly and easily.

2. Board or flipchart – writing style and marker choice

- If you have both available, use the board for writing information that you don't need to keep after the session, and the flipchart for recording information you want to put on the wall or keep to write up as notes from the training.
- Write clearly. Check that your writing can be read from the back of the room.
- Use thick markers and darker colours, for example, black and blue. Avoid red as it is more difficult to read from a distance. Use it for underlining.

3. Board or flipchart location and being neat

- Make sure everyone can see it.
- When writing on the board or flipchart, stand to the side and face your audience. If this is difficult to do, write quickly and move to the side or ask a co-trainer to do the writing.
- Keep the notes and the chart neat.
- Practise writing in straight lines. Start by using faint pencil lines (with practice you will not need them).

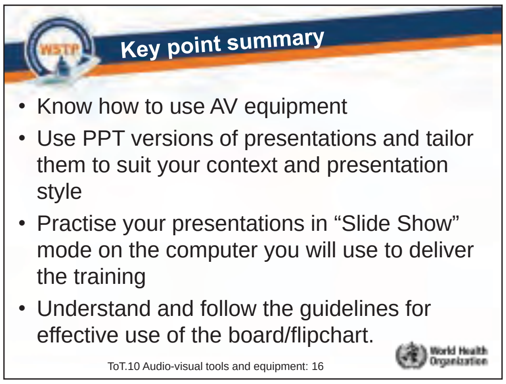
4. What to write

- Write keywords, not full sentences or phrases.
- If necessary, prepare pages in advance or outline in faint pencil where you plan to write what.
- If important details are on the board at the end of a session (for example, assessment findings, small group progress, groupings for practical sessions), take a photograph so you can refer to it later.

5. Care and use of the whiteboard

- Be careful not to use permanent markers on a whiteboard surface. If you have used permanent marker on a whiteboard by accident, you can erase the letters by using an appropriate cleaner or drawing over them with whiteboard markers (as the solvent in these markers will dissolve the permanent ink). You must do this soon after making the mistake as dried permanent marker is more difficult to remove.
- The whiteboard can be used as a projector screen when necessary, for example, to fill in a table or draw over a picture/photo from a slide (for instance, 'stick-draw' a posture from a photograph or drawing of a person).

4. Key point summary (1 minute)



Read the key points.

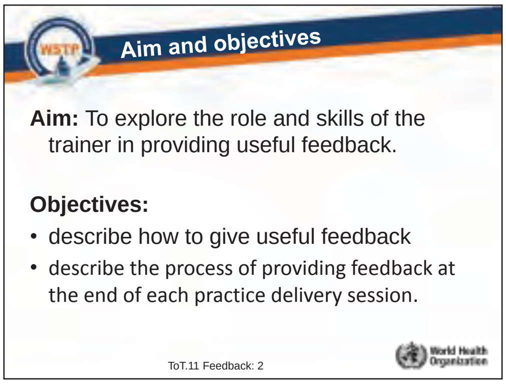
Ask whether there are any questions.

ToT.11 Feedback

AIM	To explore the role and skills of the trainer in providing useful feedback.
LEARNING OBJECTIVES	By the end of this session trainees will be able to: ☐ describe how to give useful feedback ☐ describe the process of providing feedback at the end of each practice delivery session.
RESOURCES	For the session: ☐ PPT slides: *Core training skills ToT.11: Feedback.*
TO PREPARE	☐ Gather resources, review PPT slides and read through the session plan. ☐ Review related notes in the *ToT Handbook.* ☐ Prepare a flipchart sheet with the four feedback steps: 1. Self-reflection by the trainee 2. ToT participants' feedback 3. ToT trainers' feedback 4. ToT trainers discuss key points.

OUTLINE		
	1. Introduction	2
	2. Giving feedback	35
	3. The feedback process after practice deliveries	7
	4. Key point summary	1
	Total session time	**45**

1. Introduction (2 minutes)



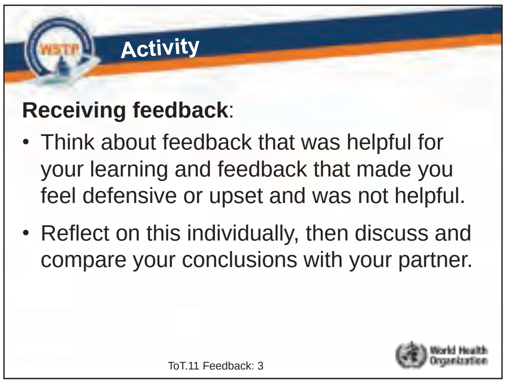
Explain the aim and objectives of the session.

2. Giving feedback (35 minutes)

Ask: What is feedback?

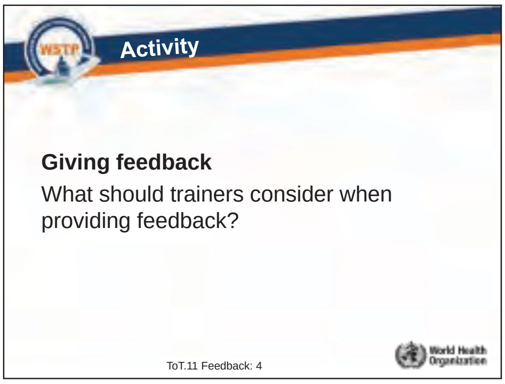
Most important answers:
• What I am doing well – positive feedback. • What I need to improve on – constructive feedback.

Explain: It is important that trainers have the skills to give feedback well, and that they can support positive learning outcomes for participants.



Show the slide throughout the activity.

Activity 1a	
Groups:	**Divide** trainees into pairs.
Instructions:	**Ask:** What experiences have you had of receiving feedback? Think about feedback that was helpful for your learning and feedback that made you feel defensive or upset and was not helpful. **Ask** trainees to briefly reflect on this question individually, and then share and discuss it with their partner. **Ask** trainees to record their reflections on page 61 of their *ToT Handbook*.
Monitor:	**Monitor** the groups and assist as needed.
Time:	**Allow** 2 minutes for reflection, 3 minutes for working in pairs and 5 minutes for feedback to the group.
Feedback:	**Ask** participants to provide examples. **Record** key words on the board.



Show the slide throughout the activity.

Activity 1b	
Groups:	**Divide** into the same pairs.
Instructions:	**Ask:** What should trainers consider when providing feedback? **Ask** trainees to briefly reflect on this question individually, and then share and discuss it with their partner.
Monitor:	**Monitor** the pairs and assist as needed.
Time:	**Allow** 2 minutes for reflection, 3 minutes for working in pairs and 10 minutes for feedback.
Feedback:	**Ask** each group in turn to describe one or two important considerations when giving feedback. **Acknowledge** good examples to consider. **Correct/clarify** any misunderstandings. **Use** the notes below to ensure the appropriate answers have been discussed by the group.

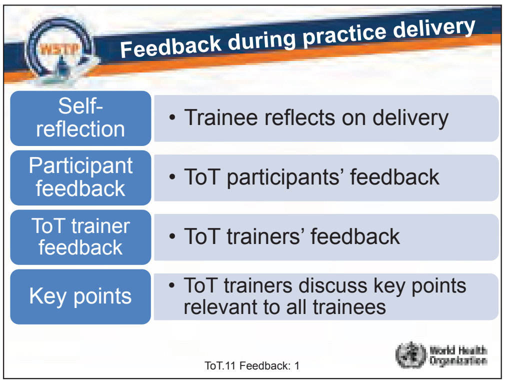
Notes for ToT trainers:

Feedback should:

- *Be timely – give feedback as soon as possible while the experience is fresh. This will help participants to connect the feedback with the recent learning or activity.*
- *Be specific – describe as clearly as possible the behaviour that was positive or that needs attention.*
- *Focus on behaviour – when providing constructive feedback, focus on the behaviour not the person.*
- *Start with the positive – point out what was done well before talking about what needs improvement. If possible, also end on a positive note.*
- *Be delivered in different ways – feedback on practice deliveries is useful to everyone. Praise and provide constructive feedback publicly to the whole group if possible. If there are attitudinal, behavioural or disciplinary issues, deal with them in private.*
- *Be from the participants' perspective – ask the participant to reflect on their performance first. They may already understand what went well and what they need to improve.*
- *Support participants, we are all different – before providing constructive feedback, consider if the participant has completed an activity incorrectly, or simply in another style. Participants will all approach service provision differently. Do not expect participants to act in the same was as you.*

3. The feedback process after practice deliveries (7 minutes)

Explain: ToT trainers will observe sessions from the back of the room but will move to the front of the room to facilitate the feedback.



Pin up the prepared flipchart sheet showing the four feedback steps and leave this on the wall for the rest of the week as a reference.

Explain: There are four feedback steps after practice deliveries.

1. **Self-reflection by trainee:** lead trainee reflects on their performance, including:
   - what went well?
   - what could be improved?

2. **ToT participants' feedback:** provide brief, specific feedback to the lead trainee, including one comment on:
   - what went well?
   - what could be improved?

3. **ToT trainers' feedback:** ToT trainers will provide additional feedback, concentrating on areas the group as a whole can learn from, and which reinforce learning from the *Core training skills* sessions.

4. **ToT trainers discuss key points:** ToT trainers discuss points about the session relevant to all trainees.

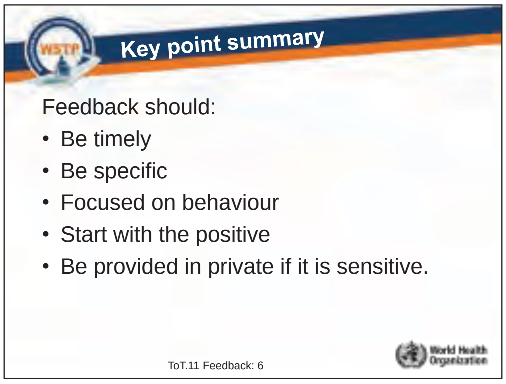
Explain: When providing feedback, it is important to:

- Look at the person you are talking about and address them directly.
- Be specific. For example, rather than saying, ‘That was really good’, you should say ‘I liked the way you divided the groups, and provided clear instructions’.
- Feedback from participants should always be constructive.
- If feedback is hurtful or insensitive to the trainee, the ToT trainer must step in to rephrase the feedback so it is more constructive.
- The feedback process will give you the opportunity to put the learning from this session into practice.

More formal one-on-one feedback to trainees will happen at the end of each day during the preparation session.

Ask if there are any questions.

4. Key point summary (1 minute)



Read the key points.

Ask whether there are any questions.

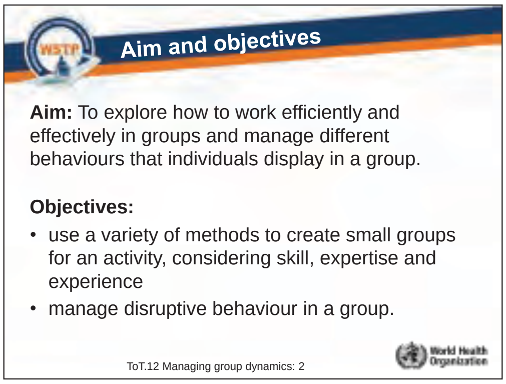
ToT.12 Managing group dynamics

AIM	To explore how to work efficiently and effectively in groups and manage different behaviours that individuals display in a group.
LEARNING OBJECTIVES	By the end of this session trainees will be able to: ☐ use a variety of methods to create small groups for an activity, considering skill, expertise and experience ☐ manage disruptive behaviour in a group.
RESOURCES	For the session: ☐ PPT slides: *Core training skills ToT.12: Managing group dynamics* ☐ prepare the disruptive behaviour cards: print and cut out the cards at the end of this session plan or write them out by hand. Have a hat or bucket ready.
TO PREPARE	☐ Gather resources, review PPT slides and read through the session plan. ☐ Review related notes in the *ToT Handbook*.

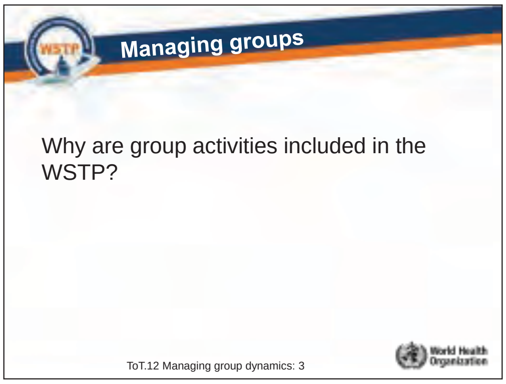
OUTLINE

1. Introduction	3
2. Organizing and managing group activities	10
3. Managing disruptive behaviour	25
4. Key point summary	2
Total session time	**40**

1. Introduction (3 minutes)



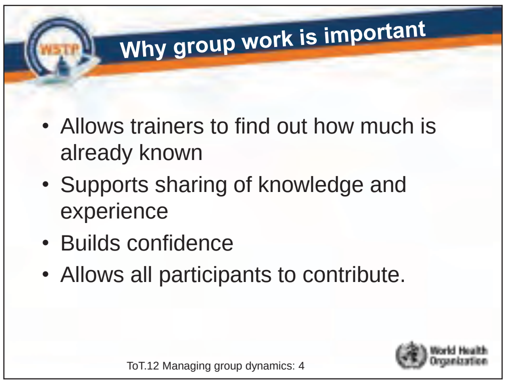
Explain the aim and objectives of the session.



Ask: Why are group activities included in the WSTP?

Acknowledge answers.

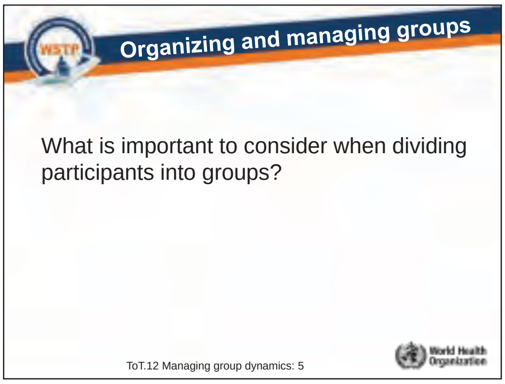
Record them on the board.



Explain:

- There are always different levels of experience and expertise in the room.
- Group work allows:
  - trainers to find out how much is already known
  - those with more experience and expertise to share it with others
  - participants to build confidence as they find out they already know a lot from their experience
  - shy or more junior participants to be more comfortable speaking out in a small group.

2. Organizing and managing group activities (10 minutes)



Ask: What is important to consider when dividing participants into groups?

Acknowledge answers.

Ask trainees to turn to page 63–65 in their *ToT Handbook* and talk through the list highlighting content not raised by trainees.

Notes for ToT trainers:

Factors to determine the size of the group

- *Time: the more groups there are the more time is needed for the feedback session. If you have less time, create larger groups, but no more than six people in a group.*
- *Privacy/confidentiality: pairs are best for discussing topics that are sensitive, when people are shy or there are language barriers.*
- *Involvement: the smaller the group the more difficult it will be for any group member not to participate.*
- *The activity: the amount of equipment/supplies that are needed for the group activity. For example, if you have three work stations then you will be able to accommodate three groups.*

Factors to determine the make-up of each group

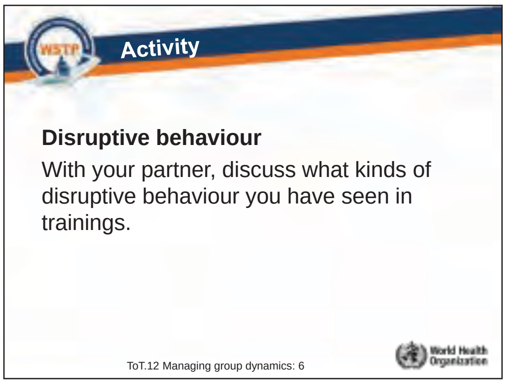
- *Think of the purpose of the activity to determine whether you want people with similar skills and background in the same group, (by placing all clinicians working together or all technicians in the same group), or the opposite by deliberately mixing skill sets and experience in the same group.*
- *Grouping of participants who work together: depending on the activity or relationships, it may be appropriate to group them together or apart.*
- *Mixing stronger/weaker (more experienced/less experienced) participants: this facilitates learning from each other, However, if you want people to have equal opportunity to express themselves consider grouping dominant participants together and shy ones together.*
- *Mixing the sexes: be aware of cultural, religious or social norms of working (especially regarding touch and privacy).*
- *Language skills: for communication between participants and wheelchair users.*
- *Ensure that all participants have the opportunity to work with each other to maximize peer learning opportunities.*
- *Sometimes, random group selection is best.*

Methods to create groups

The Trainer's Manual for each WSTP gives guidance about the size or number of groups required for each activity. You can adjust this to your situation, based on your experience in previous activities. Here are some methods to divide up a group:

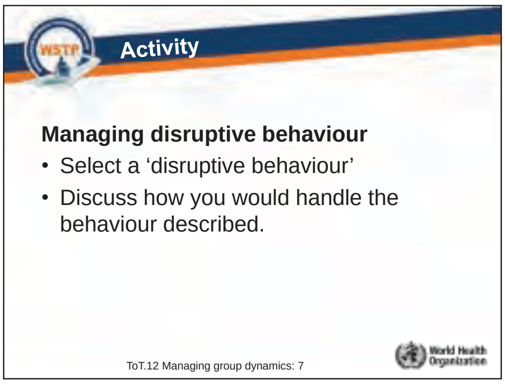
- *The fruit salad method: prepare three or four of the same fruit cards and different kinds of fruits, enough for each participant. You can then assign 'all bananas' to work together, or have a fruit salad (one of each) together.*
- *Count off. Count off to the number of groups you want, for example if you need three groups, go around the room asking the first person to count 'one', the next 'two', then 'three' and back to 'one'. All the ones, twos and threes go together.*
- *Matching puzzle pieces: cut photos or magazine pictures into two or three pieces according to how many groups you want. People find their match.*
- *Organize by birthday month: line people up by the month in which they were born and then form groups (first three together, next three, and continue until everyone is in a group). Or line up by height or by first name initial letter.*
- *Self-select: instruct people to select one or two people they have not worked with yet, but beware that self-organising with more than three people can take more time.*
- *Work in pairs with the person next to them, or if sitting in rows the people in the front row can turn their chairs around and work with the person behind them. This will work for pairs or groups of four.*

3. Managing disruptive behaviour (25 minutes)



Show the slide throughout the activity.

Activity 1	
Groups:	**Divide** trainees into pairs.
Instructions:	**Explain** that every group of participants has a range of personalities, skills, experience and learning styles. Only when specific behaviour disrupts the session should the trainer respond. **Ask** trainees to discuss with their partner what kind of disruptive behaviour they have seen in trainings?
Monitor:	**Monitor** the groups and assist as needed.
Time:	**Allow** 2 minutes for discussion and 3 minutes for feedback.
Feedback:	**Collect** one response from each pair until no new ideas are given. **Write** responses on the board.



Show the slide throughout the activity.

Activity 2	
Groups:	**Divide** trainees into pairs.
Instructions:	**Ask** each pair in turn to select a card at random from the hat/bucket. **Ask** the pair to discuss how they would handle the behaviour described.
Monitor:	**Monitor** the groups and assist as needed.
Time:	**Allow** 5 minutes for discussion and 15 minutes for feedback.
Feedback:	**Ask** each group to share their ideas: how would they handle such a problem in the group? What works/does not work? **After** each group has provided their feedback, ask if any other trainees have ideas to share.

Notes for ToT trainers:

In general, to help engage and keep participants interested and involved in the training:

- *use the different training methods given in the session plans to engage all the participants*
- *ask questions to encourage participants to come up with answers*
- *praise good work from participants and give positive but honest feedback*
- *link learning to real examples the participants can relate to*
- *keep the training fun.*

The higher status/senior participant

- *If there is a participant who is in a position of authority over others in the group, it can lead to participants being reluctant to speak, answer questions or to disagree with them.*
- *During a break, talk to the participant about their role in the group. Ask the person to help you create a comfortable atmosphere by requesting that people speak freely.*
- *You may also ask the participant to sit at the back of the group, to be less dominant in the room.*

The dominant participant

- *The participant who does not give other participants an opportunity to share knowledge, answer questions or lead a group activity because they dominate, talk loudly or for a long time. This person behaves like they know everything already.*
- *During a break, approach the person and acknowledge their experience. Ask them to help you by giving others a chance to learn and respond to questions.*
- *Consider asking specific participants to answer questions rather than asking the whole group.*
- *Pair or group the dominant participant with the strongest participants during group activities, to provide an opportunity for shy or quiet participants to contribute to their group.*

The quiet participant

- *The participant who is naturally quiet or shy and feels uncomfortable speaking in front of a large group, or contributing to group activities.*
- *Consider asking them direct questions that they are likely to be able to answer.*
- *Use praise and recognition to encourage more participation.*
- *Use small groups (pairs or three people) for group activities and discussions.*

The argumentative participant

- *The participant who likes to raise objections or question concepts that they do not believe, to start an argument or test how strongly other members of the group feel about a topic or issue.*
- *Or, they may wish to test the trainers' skills and knowledge – and demonstrate that they are superior.*
- *Request that people only speak about their own beliefs and experiences.*
- *After an objection is raised, ask the participant 'is this true for you?' If the person says no, but that it may be for others, ask other participants for their opinion.*

Notes for ToT trainers:

The distracted participant

- *The participant who is easily distracted, always in and out of the training room or on the phone.*
- *Try to find out why: is there a problem away from the training that is worrying them?*
- *Is he/she bored because of the subject matter or training style?*
- *During a break, talk to the participant about how their behaviour is disrupting the training. Remind him/her of any house rules.*

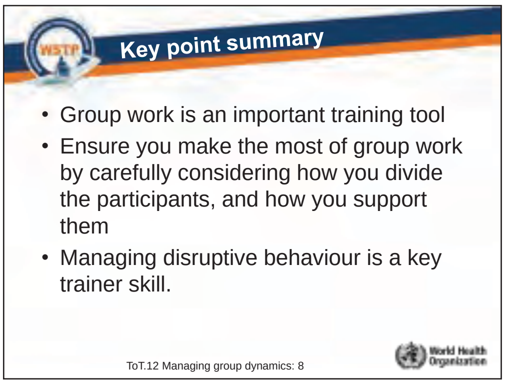
The joking participant

- *The participant who appears not to take the training seriously, making jokes all the time and sometimes making fun of others.*
- *During a break, talk to the participant about how their behaviour is disrupting the training. Ask them to help you by keeping jokes for breaks or for appropriate times during group activities.*
- *During sessions, respond to the joke as if it was a serious remark.*

The negative participant

- *The participant that tends to be negative or discourage others. They may comment that the approach taught as part of the training 'won't work where we live'.*
- *If a negative participant feels that approaches in the training will not work, give them an opportunity to explain why. Ask other participants if they agree. If other participants agree, help them problem solve by asking: how can we make it work even in those situations?*

4. Key point summary (2 minutes)



Read the key points.

Ask whether there are any questions.

Disruptive behaviour cards – photocopy or write out by hand and cut out

The higher status/senior participant If there is a participant who is in a position of authority over others in the group, participants may be reluctant to speak, answer questions or disagree with them.	**The dominant participant** The participant who does not give other participants an opportunity to share knowledge, answer questions or lead a group activity because they dominate by talking loudly or for a long time. This person behaves like they know everything already.
The quiet participant The participant who is shy and feels uncomfortable speaking in front of a large group, or contributing to group activities.	**The argumentative participant** The participant who likes to raise objections or question concepts that they do not believe are true, to start an argument or test how strongly other members of the group feel about a topic or issue. Or, they may wish to test the trainers' skills and knowledge – and demonstrate that they are superior.
The distracted participant The participant who is easily distracted, always in and out of the training room or on the phone	**The joking participant** The participant who appears not to take the training seriously, making jokes all the time and sometimes making fun of others.
The negative participant The participant who tends to be negative or to discourage others. They may comment that the approach taught as part of the training 'won't work where we live'.	

Basic Level module

A.1: Wheelchair users

Key considerations for teaching this session

a. General

Tips for preparation

- Make copies of the *CRPD* available for participants to look at during breaks. If possible, provide each participant with a printed copy.

b. Section 4. The United Nations Convention on the Rights of Persons with Disabilities (*CRPD*)

- Section 4 of the WSTPb *Trainer's Manual* (pages 26–28) focuses on the right to personal mobility (*CRPD* Article 20). Facilitate a discussion between participants, to ensure that they understand and agree with the overarching principles of the *CRPD* and of a rights-based approach. In addition to Article 20, highlight:
  - Article 1: Purpose of *CRPD*: everyone has rights and people with disabilities should have the same rights as everyone else.
  - Article 3: General principles of *CRPD*: that we are all equal and everyone should be treated with dignity and respect.
  - The *CRPD* is based on the principles of respect for dignity; non-discrimination; participation and inclusion; respect for difference; equality of opportunity; accessibility; equality between men and women; and respect for children.

c. Section 5. Wheelchair users are equal partners in service delivery

- The activity on page 28 of the *Trainer's Manual* needs to be introduced and explained well as it does not have a worksheet in the *Participant's Workbook*.

A.2: Wheelchair services

Key considerations for teaching this session

a. Section 2. Wheelchair services

Tips for preparation

- This section does not have any PPT slides and can easily be forgotten. Consider adding a slide for each of the questions within this section.

b. Section 3. Wheelchair service personnel roles

- Do not add detail to the service steps. Each step will be covered in more detail in later sessions. Park any questions requiring a more detailed explanation in the Car Park.
- All wheelchair users need access to the eight steps of service delivery. These can be delivered by one organization or by different organizations working in partnership. It is important that participants understand the role of everyone involved in each service step so that they can work together effectively.

A.3: Wheelchair mobility

Key considerations for teaching this session

a. General

- If you have additional time available, this session can be extended to allow for more practice time, or for teaching additional wheelchair mobility skills. It can also be delivered over multiple days.

b. Section 4. Wheelchair mobility skills – demonstration and practice

Tips for preparation

- The *Trainer's Manual* does not specify the type of wheelchair required for this activity. If possible, include all of the following:
  - orthopaedic-style wheelchairs
  - active wheelchairs with the rear wheel in the active position
  - long-wheelbase wheelchairs
  - three-wheel wheelchairs.

- Check there are appropriate sizes of wheelchairs available so all participants have an opportunity to practise the mobility skills.
- It is important that lead and support trainees demonstrate all skills in the same way. Before the session, review and practise the skills together to ensure consistency. Use the *Trainer's Manual* for guidance.
- In preparation for the pushing and turning section, check that lead and support trainees agree where 10 and 2 o'clock hand positions are as this varies depending from which side you are looking at the wheel.

Mobility training areas

- Identify appropriate areas in advance.
- Choose areas that are close together to save time moving.
- Plan how the rotations will be done, for example: With or without trainers? Do wheelchairs stay with participants or at the mobility training areas?
- If training areas are outside and not covered, plan around local weather conditions and run the session during the driest, warmest or coolest part of the day.

Content

- Use the video to introduce the different mobility skills. Read out the captions in the skills sections of the video to emphasize the key learning points.
- Pause the video at 2'39" (straight side on view) and point out how far forward the head and shoulders are when going up slopes.
- It may be necessary to demonstrate some of the mobility skills again during the activity.
- Ask participants to try a range of wheelchairs during the practical activity to experience the differences:
  - Over rough ground and slopes: encourage participants to try pushing with all types of wheelchairs available.
  - For partial wheelies: suggest participants use an orthopaedic-style wheelchair and an active-style wheelchair with the rear wheel in the more active position for comparison.

- The position of the rear wheel affects the effort needed to propel the wheelchair or do a wheelie. The further back the rear wheel is, relative to the user, the harder it will be to push the wheelchair or do a wheelie.
- Do not assume that a long-wheelbase wheelchair is heavier than a short-wheelbase wheelchair and therefore harder to wheelie. It is the position of the rear wheel that affects how difficult it is to do a wheelie.
- Emphasize correct practice of key skills as described on page 42 of the *Trainer's Manual*. Add these points:
  - Up slopes: lean forward. Participants and new wheelchair users usually do not lean forward enough.
  - Down slopes: do not use the brakes to slow down.
  - Up a series of steps with assistance: never go up forwards.
  - Down a series of steps with assistance: never go down backwards.

- Participants can injure themselves during this activity. Closely monitor the groups and step in as needed.
- Give clear instructions on group management and safety.
- A spotter strap is used to prevent the wheelchair user from tipping backwards and is a useful tool in wheelchair skills training. It also enables the assistant to be in contact with the wheelchair user, without interfering with the skill being learnt (Figures 1 & 2).

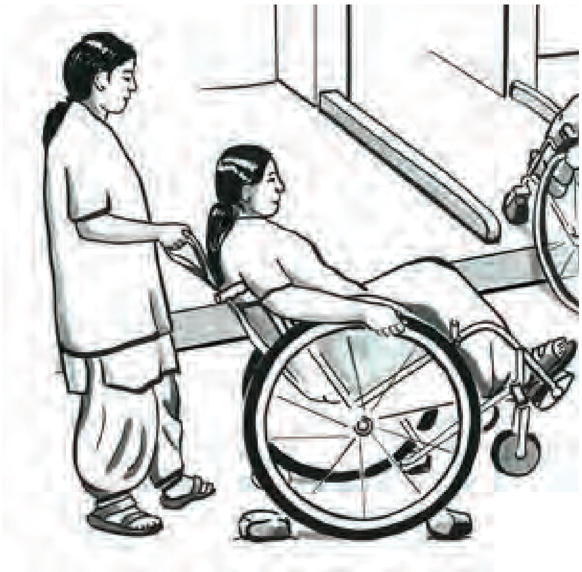


Figure 1. Using a spotter strap

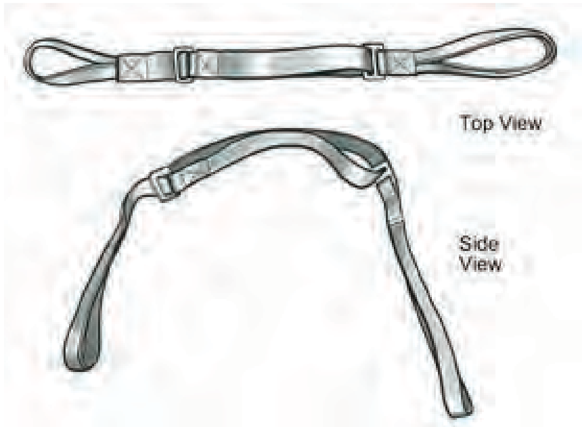


Figure 2. spotter straps[18]

Considerations for gender/culture

- Before the session begins ask any wheelchair users in the group if they want to try out the practice wheelchairs. If they do, ask if they need assistance or equipment to transfer between the wheelchairs and make arrangements accordingly. Appoint a support trainee to assist them as required.
- Participants work in pairs for this activity, with one person ready to assist to prevent tips or falls. If any participant has an impairment or physical disability, ask them before the session begins if they feel comfortable to assist others. They may need to position themselves differently during the activity.
- If any participants are unable to participate in this activity, identify a role they can perform instead, for example observing other participants and providing feedback.

18 Wheelchair skills assessment and training 2015. Canada: Dalhousie University; 2015 (http://www.wheelchairskillsprogram.ca/eng/manual.php).

ToT trainer demonstrations/explanations

a. Section 4. Wheelchair mobility skills – demonstration and practice

Demonstrate the partial wheelie

Follow the instructions on page 43 of the Trainer's Manual. Emphasize the following points:

- It is harder to do a wheelie in wheelchairs where the rear wheel is in a safe position. The technique described in the Trainer's Manual makes it easier to do a wheelie:
  - place hands on the 1 o'clock position on the rear wheel
  - roll the wheel backwards until the hands are at the 10 o'clock position. Without stopping, change direction and push forward quickly.

- If the rear wheel is in a more active position, it may be possible to do a partial wheelie by pushing forwards without rolling backwards first.
- It can be helpful to stretch out a rope on the ground so participants can do a partial wheelie over it.
- Divide participants into groups of three for practice. Common errors include:
  - starting with the hands too far from the 1 o'clock position
  - not going far enough back with the hands
  - stopping when changing direction or not changing direction quickly enough
  - not pushing forward far enough or hard enough.

A.4: Sitting upright

Errors in the WSTP materials

a. Section 2. Sitting upright/neutral sitting posture

- On slide 5, when listing the key points for sitting upright as seen from the front, the trunk has been omitted and the head is not listed in the correct order. The correct order is:
  - pelvis (level)
  - trunk (upright and symmetrical)
  - shoulders (level)
  - head (balanced centrally over the body)
  - thighs (thighs slightly open/abducted).

Key considerations for teaching this session

a. General

- Keep emphasizing the correct order when describing posture. Start at the pelvis and move up, then go to the hips and move down.

b. Section 2. Sitting upright/neutral sitting posture

Tips for preparation

- Have a stool or an assessment bed available for the volunteer to sit on.
- If the volunteer sits on a chair, their posture will change if they lean against the backrest. If you only have access to a chair, make sure that the seat is level and ask the volunteer to sit sideways on the chair (with the backrest on one side) so they cannot lean on it.

c. Section 3. How the pelvis affects the way we sit

- Do not assume that participants are familiar with the terminology used in the WSTPb (for example: anterior, posterior, ASIS).
- If available, use a model skeleton to demonstrate the important bony landmarks and movements of the pelvis.

- Allow time for participants to locate and feel bony landmarks on their own body.
- Remind participants to keep the typical size of the adult skeleton in mind when locating bony landmarks on users who are overweight (relate to model pelvis if available).
- When demonstrating the movements of the pelvis with participants, emphasize what is happening above the pelvis in the spine and below pelvis in the hips with each movement. This will help participants to link posture with the position of the pelvis.

A.5: Pressure sores

Key considerations for teaching this session

a. General

- Use the Car Park for any questions about pressure relief cushions, their design features and how to protect the cushion from moisture. This information is explained in detail in *A.7: Cushions*.

b. Section 3. When and where to get help

- Do not offer advice about medical treatment or dressings used for pressure sores. This is not the focus of the session and is outside the scope of the WSTPb.
- Warn users against any home remedies unless recommended or approved by the health care professional who is managing the wound.

c. Section 4. What causes pressure sores?

- Shear may be a new concept for participants. It needs to be explained well to avoid confusion with friction. To explain shear, ask participants to place their knuckle against the table top with enough pressure so that when the knuckle is moved forward and back only the bone moves over the stationary skin.
- Preventing the wheelchair user from slumping or sliding in the wheelchair will reduce shear and the risk of pressure sores.

d. Section 8. Pressure relief techniques

- This section is 10 minutes long and includes both the explanation and the activity.
- Each participant should practise being both the wheelchair user and the assistant.
- Participants are likely to ask how often, and for how long, pressure relief should be done. The usual guideline is every 30 minutes, for 2 minutes, to allow blood flow to return to the area.
- The push-up technique (lifting by pushing up on both arms) is not taught in the WSTPb for the following reasons:

- the strain and potential injury to the shoulders
- few people can sustain the position for the 2 minutes needed to fully restore blood flow
- the possibility of injury to the skin if the user loses control and drops down too hard.

• When leaning to the side, lean only as far as necessary for the pelvis to tilt and free the seat bone of pressure. When teaching this technique to a wheelchair user, place your hand under the user's seat bone and give them feedback once the pressure is relieved.

A.6: Appropriate wheelchair

Errors in the WSTP materials

a. Section 3. Meeting the wheelchair user's needs

- In the table on pages 76–77 of the *Trainer's Manual* the entries for Roger, Dawid and Pinky mention a short wheelbase. This is the first time the wheelbase length is mentioned. Note that the overall length of the wheelchair will also affect the ability to turn and move in small spaces.

Key considerations for teaching this session

a. General

Tips for preparation

- If possible, have demonstration wheelchairs available to explain the features. Prepare before the session starts so that you can show how to make adjustments where appropriate to:
  - a folding frame and a rigid frame wheelchair (both 3-wheel and 4-wheel)
  - removable and fixed armrests
  - fixed footrest hangers and footrest hangers that flip up and swing away
  - short and long wheelbase wheelchairs
  - footrests set in highest and lowest, or forward and back, positions
  - backrests set in highest and lowest positions
  - rear wheels in safe and active positions.

- Set up the area so that all the participants can see the demonstration wheelchairs.

b. Section 3. Meeting the wheelchair user's needs

Section 3.2: Pushing the wheelchair

- Lightweight wheelchairs are particularly important for children; those with progressive conditions; wheelchair users with limited strength (for example a high spinal cord lesion); those who frequently push long distances; and caregivers who push the wheelchair user.

- The position of the rear wheel in relation to the seat impacts on how light the wheelchair feels. The rear wheel axle should be positioned under the wheelchair user.
- With the rear wheel in an active position, the wheelchair is easier to push and wheelie both for wheelchair users who self-propel and caregivers who push the wheelchair.
- Older wheelchair users and people with leg amputation (whose weight is distributed differently in the wheelchair) do not automatically require a 'safe' rear wheel position. Factors that will influence the rear wheel position include:
  - the user's overall function: strength, balance and transfer skills
  - how they push their wheelchair
  - activities they do in their wheelchair
  - their level of understanding and insight
  - other conditions, for example spasms or uncontrolled movements.

- You can consider providing temporary additional stability to users who may become more active. For example, you can add weight to the front of the wheelchair and gradually reduce it over time or use anti-tip bars while they learn to balance and propel.

Section 3.3. Folding the wheelchair

- Folding-frame wheelchairs are not the only option available when using transportation. Demonstrate how a lightweight 4-wheel rigid-frame wheelchair with removable wheels can be transported, by removing the rear wheels and then positioning the frame on the wheelchair user's lap, when the vehicle is full and the wheelchair user is a passenger. Only the rear wheels have to be stored elsewhere in the vehicle.

c. Section 4. Meeting the wheelchair user's environment

- Slide 23 introduces the wheelbase. The picture is of a wheelchair with a short wheelbase. When discussing this point, it is helpful to have two wheelchairs, one with a short and another with a long wheelbase.
- Remember that the length of the wheelbase is measured with the castor wheel in the rear (trail) position.
- An orthopaedic-style wheelchair is not automatically more stable than an active wheelchair. Orthopaedic-style wheelchairs generally have these features:

- short wheelbase: resulting in the front castors being heavily loaded so the wheelchair can tip forward easily
- seat is high above the rear wheel axle: resulting in instability to the side, back and front
- rear wheel is set back (behind the seat): when combined with a short wheelbase this results in the front castors being loaded and makes the wheelchair more difficult to push and turn.

• The orthopaedic-style wheelchair is not suitable for active and outdoor use on rough terrain. Remind participants how hard it was to push the orthopaedic-style wheelchair on uneven ground and how difficult it was to do a partial wheelie compared to other types of wheelchairs.

d. Section 5. Providing proper fit and postural support

• Sometimes there is only one type of wheelchair available and it is not possible to prescribe a product appropriate for the environment. Always select the most appropriate size and take steps to ensure the best fit and postural support.

A.7: Cushions

Key considerations for teaching this session

a. General

- This session links with *A.5: Pressure sores*. Refer back to A.5 if necessary, focusing on the following key points:
  – the areas of the body that are most at risk of developing pressure sores
  – the main causes of pressure sores (pressure, friction and shear).

- These key learning points will allow you to highlight and explain the well feature of the pressure relief cushion.
- The dimensions of the seat bone well will be discussed and practised during *B.8: Cushion fabrication*.

Tips for preparation

- To prepare for the session, gather locally available cushions, materials and fabrics. If available, include the following:
  – a contoured cushion (with a seat bone well)
  – a flat cushion (at least two layers, with no seat bone well and a flat base)
  – a single layer of foam
  – any other locally available cushions that are commonly used.

- Set out wheelchairs, with cushions, for the finger pressure test activity.
- If you need to make cushions for this session, further information is available in the *Cushions Annex* on page 185.

b. Section 4. Pressure relief cushions

Tips for preparation

- Slide 6: Add to the text of the second bullet in the *Trainer's Manual*: "*This will make sure the cushion* ***keeps its shape,*** *provides good support for the user and does not move when the user moves*".

Content

- Slide 5: A seat bone well can provide both pressure relief and postural support. The well reduces the pressure under the seat bones and the seat bone shelf helps to keep the pelvis more upright and prevent it from sliding forward. This reduces shear caused by sliding.
- It is important to check that the shelf is in the correct place by completing a pressure test.

Which cushion to use?

- Good pressure relief, postural support and pressure redistribution are achieved by a combination of the shape of the cushion and its material.
- When selecting the most appropriate cushion for a user, consider:
  - The shape. Is there a pre-seat bone shelf or a seat bone well to prevent sliding and help to keep the pelvis upright? Are there grooves or gutters to rest the thighs in?
  - The material. Is it sufficiently firm to provide good support and soft enough to be comfortable?
  - Pressure redistribution. Does it pass the pressure test when the user is sitting on it in their wheelchair?
  - Comfort. This is subjective. All cushions should be comfortable because they provide pressure relief and postural support. An air/fluid/gel cushion is not automatically more comfortable than foam.

- Remember, cushions vary in shape and quality:
  - Shape. A well-designed contoured (shaped) foam cushion can provide better pressure relief than a poorly designed air/fluid/gel cushion.
  - Material. A well-designed air/fluid/gel cushion may be the most appropriate solution for someone with very high risk of pressure sores, where a well-designed foam cushion does not offer adequate protection.
  - As the lifespan of a foam cushion is much shorter than the lifespan of the wheelchair, local support services must be able to replace the cushions as needed.

Cushion covers

- Additional considerations for moisture or incontinence management (on page 94 of the *Trainer's Manual*) are covered in the *Cushions Annex* (page 185).

c. Section 5. How to test if a pressure relief cushion is working

Tips for preparation

- Ensure that group participants have access to a wheelchair that fits them.

Content

Before participants practise the pressure test, highlight the following points:

- Remove jewellery from hands before starting.
- If it is difficult to get to the seat bones from behind the wheelchair:
  - Stand at the back corner of the wheelchair and place your hand underneath the seat bone (Figure 3).
  - Do not place your arm between the backrest and the user as this will push them forward. Check that the wheelchair user is sitting symmetrically and has their back against the backrest.

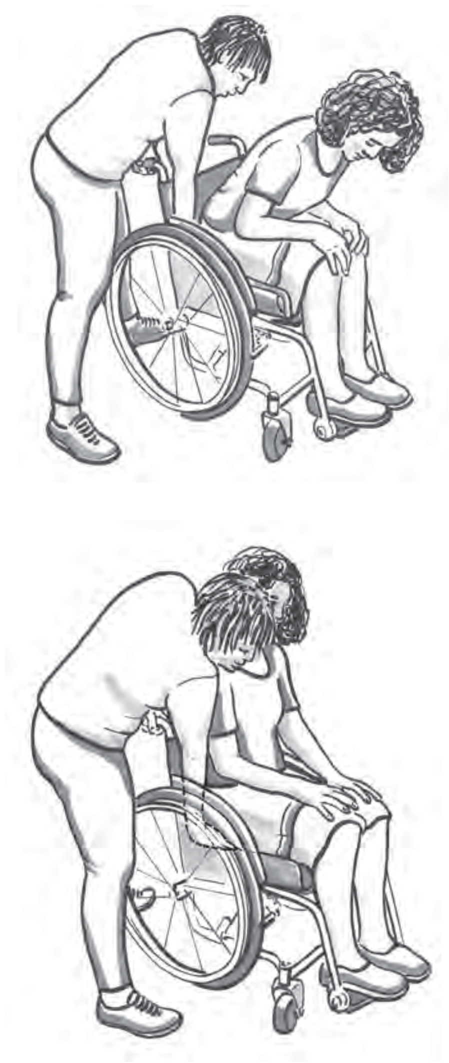


Figure 3. Checking pressure on the seat bones

- If participants have difficulty finding the seat bones:
  - Use the skeleton to remind participants how far forward and close together the seat bones are (Figure 4).
  - Demonstrate how fingers should be positioned underneath the seat bone. If you do not have a skeleton, use the bottom of your fist to represent the seat bone.
  - Ask participants to find their own seat bones when sitting; to pay attention to where they are located as well as the distance between them.

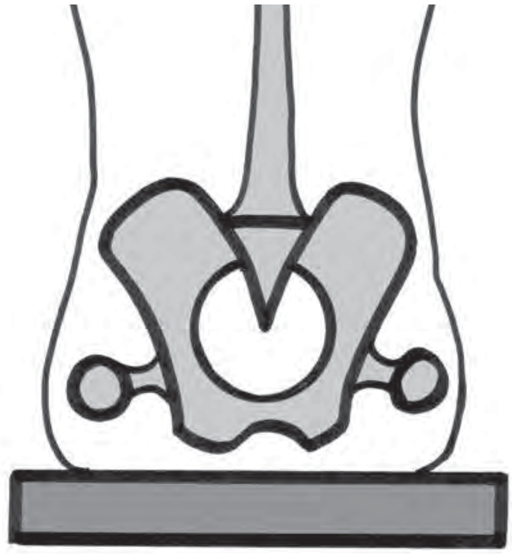


Figure 4. Diagram of seat bones

- If the wheelchair user's pressure is grade 3 (unsafe), do not force your fingers out from underneath their seat bones; ask them to lean forward or to the side so that you can slide your fingers out.
- The seat bones could have different pressure going through them. Assess each side separately.
- If questioned on the research and validity of the pressure test, emphasize that its purpose is to ensure the safety of individual wheelchair users. Our hands are an accurate way to measure the pressure between a person's body and the wheelchair. Our hands are very sensitive and by practising this test frequently, we will continue to develop further sensitivity to evaluate pressure.

d. Section 6. What action can be taken to reduce pressure?

- See Figure 5 and highlight the following points about the lift:
  - It must be a U-shape. Do not use a lift under the thighs only as this will change the angle of the seat.
  - The thickness of the lift should be approximately 20 mm.
  - Dimensions of the seat bone well are covered in session *B.8: Cushion fabrication*.

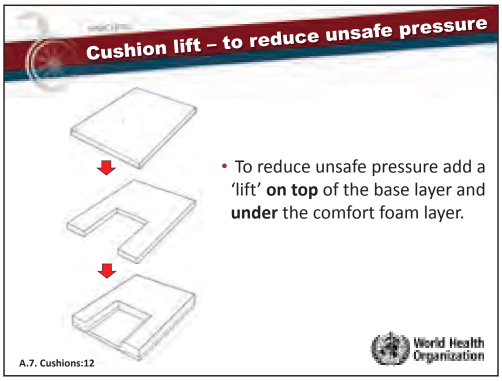


Figure 5. Reducing unsafe pressure

- The aim of the lift is to move weight off the seat bones and on to the upper and distal parts of the thigh.
- A layered cushion allows the lift to be positioned between the layers. With a one-piece moulded cushion, the lift is positioned underneath.
- There are some other ways to improve the pressure relief qualities of a foam cushion that are not described in the *Trainer's Manual*:
  - if the top layer is very soft or thin, increase its firmness and thickness
  - if the base layer is soft, and does not maintain its shape or contours when the wheelchair user is on it, replace the base layer with a firmer material.

A.8: Transfers

Errors in the WSTP materials

a. Section 4. Three ways to get in and out of a wheelchair and individual feedback

- In the video clip: Independent transfer through sitting (wheelchair to bed): note that the wheelchair user pushes down on the back upholstery during the transfer. This is not recommended.

Key considerations for teaching this session

a. General

Tips for preparation

- Set out the equipment for the practical activity. For sideways transfers, do not use wheelchairs with fixed, full depth armrests.
- Decide what the lead trainer and each of the support trainers will be responsible for before the session. Ensure the training team is consistent in its approach to carrying out and teaching the transfers.

b. Section 4. Three ways to get in and out of a wheelchair and individual feedback

Participants may suggest alternative ways to do these transfers – they may have learnt different techniques or developed alternative methods. Acknowledge suggestions by participants but remind them that the video demonstrates basic, safe techniques.

- Participants should follow these techniques during the WSTPb. Some variations are acceptable to accommodate individual body shape, such as height, weight and strength.
- Techniques that require rotation (twisting) of the assistant's back, or where the wheelchair user holds on to the assistant's shoulders or neck are not acceptable as they pose a risk of injury to the assistant.
- To increase the stability of the wheelchair for transfers, position the castor wheel forward.
- **Highlight** the key points during the video by reading them from the screen.

1. Independent transfer through sitting (wheelchair to bed)

- Explain why the wheelchair user needs to move to the front of the wheelchair. This is to ensure that they don't make contact with or bump the rear wheel during the transfer as this might damage their skin and lead to a pressure sore.

2. Assisted transfer through sitting with a transfer board (wheelchair to bed)

- **Pause** when the following subtitle disappears: *3. Place transfer board under buttocks across the wheelchair and bed.*
- **Emphasize** that the wheelchair user must be assisted to lean sideways and to place the transfer board.
- One end of the board is placed under one side of the wheelchair user's buttocks. The board is placed at an angle between the wheelchair seat and the bed so that it misses the arch of the rear wheel.
- **Continue** the video.

- **Pause** at the next subtitle: *4. Assistant stands behind the user.*
- **Emphasize** the assistant's position behind the wheelchair user during this transfer. In this position the assistant does not block the forward movement of the wheelchair user's head and trunk. The assistant also has good control of any forward sliding during the transfer. If the wheelchair user is worried about falling forward, a second helper can stand in front of them.
- **Emphasize** the assistant's position. The assistant kneels with one knee on the bed. The other leg is placed between the bed and wheelchair.
- **Continue** the video.

- **Pause** at the next subtitle just before the user lifts: *5. User lifts as much as they are able.*
- **Explain** how the assistant grips around the wheelchair user's pelvis to assist with the sideways movement to the bed (the assistant should not grip the top of the user's trousers or belt).
- **Emphasize:** The user's hands are placed on top of the transfer board and his/her fingers should not curl around the edge of the board as this may lead to injury when transfer commences and weight is placed on the board.
- **Emphasize** the text: *5. User lifts as much as they are able.* Add that the user can do the transfer using multiple small lifts.
- **Repeat** the key points on page 104 of the *Trainer's Manual* after the video.
- **Ask** the participants if they would like you to play the video again before they practise.

3. Assisted standing transfer (bed to wheelchair)

- **Pause** at the subtitle: *4. Assist user to move forward on the bed, place user's feet on the floor.*
- **Explain:** The assistant uses his/her legs to support the user's knees from the side (do not block the user's knees from the front).
- **Explain:** The user rests their hands either on the assistant's shoulders (hand resting on the shoulders, not gripping around the neck) or the assistant's hips/pelvis.
- **Continue** the video.

- **Pause** at the next subtitle: *For taller and heavier clients, support may be given higher (shoulder blades).*
- **Explain:** the assistant can support the wheelchair user at the pelvis or on the trunk just below the shoulder blades. The assistant should take care to allow the user enough space to bring their head and shoulders forward over their feet.
- **Continue** the video.

- **Pause** at the next subtitle: *5. Twist the user toward the wheelchair and help her sit down gently.*
- **Explain:** Ensure the wheelchair user comes to a fully upright standing position. Only then twist to the side of the bed and allow the user to sit down again.
- **Continue** the video.

- **Repeat** the key points on page 104 of the *Trainer's Manual* after the video.
- **Ask** the participants if they would like you to play the video again before they practise.

ToT trainer demonstrations/explanations

a. Section 5. Independent transfer from floor to wheelchair

- Some wheelchair users may not have the strength or balance to transfer from the floor to their wheelchair seat. Users can transfer in two stages:
  - From the floor to a step. For example, the step could be the frame of a three-wheel wheelchair, a wooden box, a stack of newspapers, or a low stool.
  - From the step to their wheelchair seat.

- Note that the step/wheelchair must be stable and positioned safely.
- Instead of the seat, wheelchair users may be able to place one hand on the top of the footrest hanger or other part of the frame for transfers.
- Wheelchair users who are at a high risk of developing pressure sores need to take care not to bump any wheelchair parts.
- Emphasize that developing the correct technique and being able to perform this transfer independently may require a lot of practice under supervision. It is important to problem solve with the wheelchair user and their family to develop a safe transfer method.
- If someone in the group is able to demonstrate the transfer, ask them to do it at the end.

B.1: Referral and appointment

Key considerations for teaching this session

a. General

Tips for preparation

- Ask participants to bring a copy of the wheelchair referral form used by their service, if one is used, to share during the session. This will make it more interactive.

b. Section 2. Referral

- Encourage participants to share experiences about their service settings, including:
  - existing referral systems (if wheelchair-specific referral systems are not in place, discuss other referral systems)
  - whether their referral systems are working
  - how the systems could be improved
  - how referrals are made (for example: by telephone, referral letter, email) and what information is included in a referral
  - wheelchair service referral forms brought by participants or the sample wheelchair referral form in the WSTP *Additional Resources* manual.

- If no referral systems exist in the participants' workplaces, share experiences from your own work as an example. This may include how your referral system was established and how the wheelchair service has benefited or changed.
- Encourage participants to take this issue up with their service managers and to assist in:
  - putting together information needed to guide referral sources
  - developing a referral letter
  - identifying and contacting referral sources
  - holding a wheelchair service open day and other initiatives to raise awareness about the service
  - building up referrals in line with the capacity of the service.

B.2: Assessment

Key considerations for teaching this session

a. General

- This is a short session designed to introduce participants to the WSTPb assessment process.
- Park questions about the assessment interview and the physical assessment in the Car Park as these are covered in the following two sessions.

b. Section 2. Who needs a wheelchair?

- Emphasize that using a wheelchair will not make a person ‘lazy’ or cause the person to stop walking. Walking with a mobility impairment uses more energy than walking without a mobility impairment. That is why using a combination of wheelchair and walking aids is often best.
- Wheelchairs enable:
  - community participation and integration
  - individuals to cover longer distances
  - access to rougher terrain
  - a faster pace than walking would allow
  - a person who uses crutches to stand and balance can do more when sitting down in a wheelchair with their hands free.

c. Section 3. Why do you need an assessment?

- The WSTPb assessment form only covers the essential information needed for a basic level wheelchair assessment.
- Service providers may need to collect additional information for other types of services they offer. This will not be covered during the WSTPb.

d. Section 4. Where to carry out assessment

- Encourage participants to be creative when carrying out assessments in the community or at the wheelchair user’s home. For example: measurements can be taken with the person sitting on a bench or sideways on a chair; bricks can be used to build a foot support to ensure that the wheelchair user’s feet are supported.

B.3: Assessment interview

Key considerations for teaching this session

a. General

Tips for preparation

- Many participants may not have seen or used a wheelchair assessment form before. Encourage participants to follow the session using the form on page 42 of the *Reference Manual for Participants*.

b. Section 2. Information about the wheelchair user

- While participants are learning, they may prefer to rely on the form. As they become more comfortable, encourage them to approach the assessment as a discussion.
- Encourage participants to think about how the information being gathered relates back to decisions about the wheelchair.

c. Section 3. Physical condition

- Draw input and ideas from the experiences of participants to make this section more interactive.
- Look at this statement on page 121 of the *Trainer's Manual*: "It is helpful (although not always necessary) to know which condition a wheelchair user has". Discuss this with the whole group. Emphasize that knowing the medical diagnosis is helpful but not essential for a wheelchair assessment. A thorough assessment interview and physical assessment are the essential elements of a good wheelchair prescription.

d. Section 6. Assessment interview practice

- Trainers should monitor participants to ensure they are discussing the assessment and not just ticking the list of questions.

B.4: Physical assessment

Errors in the WSTP materials

a. Section 6. How to take body measurements

- This heading in the *Trainer's Manual* is confusing. This section covers how body measurements relate to wheelchair measurements. Change the heading to *How body measurements relate to wheelchair measurements.*
- Add the following to the list of resources on pg. 131: A copy of the amended *Basic wheelchair assessment form* for each participant.
- An amended version of the assessment form is included in the annexes of this manual and can be downloaded from the WSTP Pen Drive.
- There are some errors in the *Measurement Table* in the assessment form in the column *Change body measurement to ideal wheelchair size* for measurements C, D and E.
- The following slides in the *Trainer's Manual* and *PPT* need correcting with the information in the amended *Measurement Table* (Table 1) below:
  – Slide 10: page 138
  – Slide 12: page 140
  – Slide 19: page 143.

- Ask participants to make the same correction on page 48 of the *Reference Manual for Participants* and on pages 18 and 19 of the *Participant's Workbook*.

Table 1. Body measurements for wheelchair conversion

	Body Measurement		Measurement (mm)	Change body measurement to ideal wheelchair size	Wheelchair measurement
A	Hip width			Hip width = seat width	
B	Seat depth	L		B less 30–50 mm = seat depth (if length is different, use shorter one)	
		R			
C	Calf length	L		**(C less cushion height*)** **C less cushion height* = seat to top of footplate or seat to floor, depending on user's needs**	
		R			
D	Bottom of rib cage			**(D or E [depending on user's needs] + cushion height*)** **D or E (depending on user's needs) + cushion height* = seat to top of backrest**	
E	Bottom of shoulder blade				

L: left; R: right.

**Check the height of the wheelchair user's cushion.*

Key considerations for teaching this session

a. Section 3. Presence, risk of, or history of, pressure sores

- Link this section to *A.5: Pressure sores*. Briefly review risk factors and remind participants when a pressure relief cushion is indicated.

b. Section 4. Method of pushing

Tips for preparation

- Identify the practical area beforehand and set out wheelchairs with footrests that move out of the way.

Content

Pushing with feet activity on page 136 of the *Trainer's Manual*

- Three-wheel wheelchairs are generally not suitable, as the beam will interfere with foot propelling.
- Advise wheelchair users to avoid pushing/propelling backwards as they are unable to see where they are going. It can also result in poor sitting posture. However, pushing backwards is easier when going uphill or over soft terrain or small obstacles. Encourage participants to experience the difference of pushing backwards up a slope.
  - For most people, the standard seat height of a wheelchair is too high to effectively foot propel forwards.
  - It will be difficult for the user to maintain good posture and propel forwards if the seat is not low enough.
  - The user's heel should comfortably reach the floor and remain firmly on the floor as they apply force to propel.

- Wheelchairs with lower seats are not widely available so modifications must be made to allow the user to reach the floor with ease, for instance:
  - Reduce the overall height of the cushion.
  - Attach a solid seat lower than the original seat. Suspend the board from the seat rail on hooks so that it can be removed for folding if necessary (Figure 6). On folding-frame wheelchairs, cut reliefs for the top of the cross brace. The board will also rest on the cross brace.

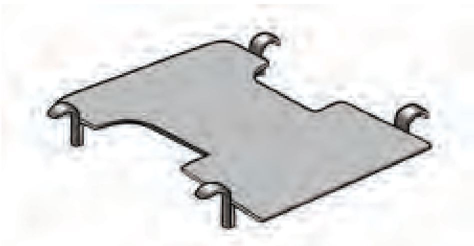


Figure 6. Seat board with hooks

- Modify the seat and cushion
- Combinations of the above are often required and are described in the *Cushions Annex* on page 185.

c. Section 5. Taking measurements

Tips for preparation

- Set out the equipment needed for the measurement activity for each group of three participants, including: tape measure, two clipboards and one set of foot blocks.
- With a support trainer, prepare to demonstrate finding the lower ribs and bottom of the shoulder blade during the video: measurement demonstration: back height.

Content

- Use the video as described below to emphasize key learning points.
- Read all the subtitles.
- **Prepare**
  - **Pause** where the assessor calls the helper at the subtitle: *Make sure the wheelchair user is sitting upright.*
  - **Explain:** If the wheelchair user is unable to sit upright without assistance, a helper is needed.
  - **Continue** the video.

  - **Pause** where the helper is sitting next to the wheelchair user and the assessor starts to check the posture.
  - **Explain:** The assessor guides the helper and then checks the posture. The pelvis, trunk, head and neck should be upright and in line.
  - **Continue** the video.
  - **Explain** as the video continues: The hips, knees and ankles are flexed to 90 degrees.

Take measurements

  - **Pause** at the subtitle: Hip width: hips or widest part of thighs.
  - **Emphasize:** Ensure that the clipboards are parallel and upright.
  - **Continue** the video.

- **Pause** at the subtitle: *Bend down to read the tape measure.*
- **Emphasize** the following:
  - measure the inside distance between the two clipboards
  - bend down to read the tape measure otherwise readings will be inaccurate.
- **Continue** the video.

- **Pause** at the subtitle: *Seat depth: back of pelvis to back of knee.*

- **Emphasize** the following:
  - keep the clipboard upright and level with the front of the bed
  - measure from the front of the clipboard to the back of the knee
  - measure both sides.
- **Continue** the video.

- **Pause** at the subtitle: *Seat depth: Calf length: back of knee to base of heel.*
- **Emphasize** the following:
  - For best accuracy, measure from the heel to the back of the knee. This is different from the text on page 140 of the *Trainer's Manual*
  - Bend down to read the tape measure.
- **Continue** the video.

- **Pause** at the subtitle: *Back height: seat to bottom of rib cage.*
- **Demonstrate:** There are two ways to locate the lower ribs.
  - Place the hands on the sides of the ribs and gently squeeze them together as you slide down the rib cage until you find the soft area and the bottom of the rib cage.
  - Alternatively, place hands on top of the pelvis and gently squeeze in to find the soft area. Gradually move up and in towards the centre until you feel the ribs.
- **Continue** the video.

- **Pause** where the measurement is taken.
- **Emphasize** the following:
  - measure from the seat to the bottom of the rib cage
  - bend down to read the tape measure
- **Continue** the video.

- **Emphasize** the next subtitle: *For a higher backrest, measure from seat to bottom of shoulder blades.* As this is a frozen frame, there is no need to pause the video.
- **Explain:** To help locate the shoulder blades ask the person being measured to shrug their shoulders.
- **Repeat** the video without pausing.
- **Ask** whether there are any questions.

d. Section 6. How to take body measurements (Corrected session title: How body measurements relate to wheelchair measurements)

- This section sometimes causes confusion, particularly measuring the backrest and footplate height.
- When we take measurements on the bed the reference point is the bed surface, which represents the seat of the wheelchair.
- Because wheelchairs should always be prescribed with a cushion, when we convert the body measurement to the wheelchair measurement we must adjust for the cushion (Figure 7).

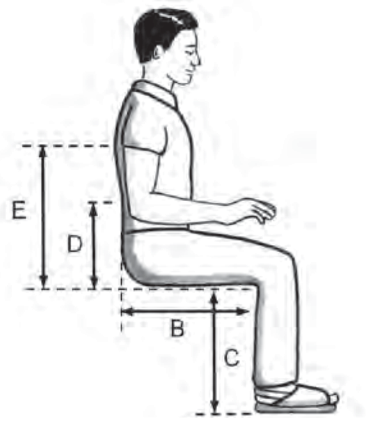


Figure 7. Body measurements are taken from the top of the assessment bed

Footrest

- The body measurement C equals the wheelchair measurement from the top of the seat cushion to top of the footplate or floor (Figure 8).
- To calculate the footplate height: wheelchair seat to top of the footplate: Body measurement C less cushion height.

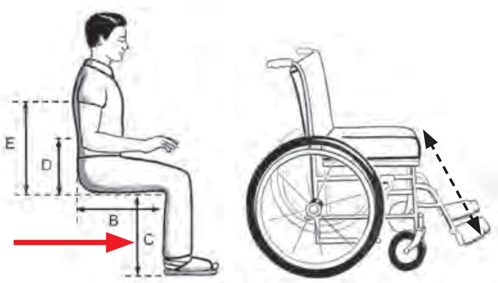


Figure 8. Body measurement C: wheelchair measurements: seat cushion to top of footplate or seat cushion to floor

For foot propellers

- The cushion raises the user up and away from the seat.
- To be able to foot propel, the user's foot should reach the floor when sitting on the cushion.
- To calculate the seat height: Body measurement C less cushion height.
- The wheelchair measurement for foot propelling is always shorter than the body measurement.

Backrest

- The body measurements D and E = measurement from the top of seat cushion to top of backrest.
- The measurement you will use depends on a user's needs.
- Because a person should always sit on a cushion, a calculation must be made to include the cushion.
- To calculate the wheelchair measurement (seat to top of backrest) the cushion height must be added to the body measurement (D or E).
- Wheelchair measurement (seat to top of backrest) = Body measurement D or E + cushion height.
- Sometimes cushions are quite thick but made from soft foam. In this situation, it may be more accurate to halve the height of the cushion for calculations, as it will compress approximately this much when a person sits on it.

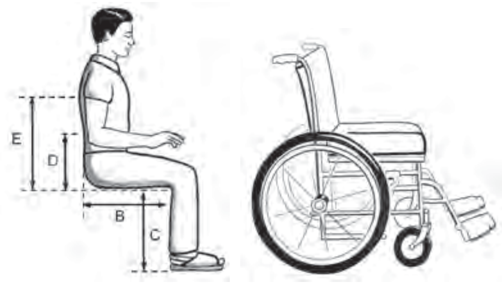


Figure 9. Body measurement D/E: wheelchair measurement: seat cushion to top of backrest

B.5: Prescription (selection)

Errors in the WSTP materials

a. Section 5. Selecting the right wheelchair size

- In the table on pages 153–154 of the *Trainer's Manual*, correct the information in the column *Change body measurement to ideal wheelchair size* in line with Table 1 in B.4: *Physical assessment* on page 145 of this *Trainer's Manual.*

Key considerations for teaching this session

a. General

Tips for preparation

- Place a demonstration wheelchair in the theory area, raise it on a table or box if this gives a better view.
- Organize photocopies of the completed *Wheelchair summary forms* and the *Wheelchair prescription forms*, ready to hand out to participants. These are also an important reference for after the training programme.
- Keep in mind that participants often think of prescription as determining the size of the wheelchair only. Remind participants of the key elements in the definition of an appropriate wheelchair; environment, function (daily activities and lifestyle), fit (size) and posture support needs. First determine the wheelchair features that match these needs. Second, makes and models of wheelchairs that have these features and are the right size can be identified.
- Try to give each group a set of hand tools as this will be quicker than if they have to share.

b. Section 3. Locally available wheelchairs and cushions

- If possible, have one technical participant in each group. Technical participants may be more familiar with the various features of the wheelchair.
- Wheelchair back height dimensions are measured from the wheelchair seat to the top of the backrest without a cushion.
- Participants are often unsure about how to use the wheelchair summary sheet in service delivery. Explain that it is a good tool for comparing existing and new

products against the same criteria. It can also help with prescription choices particularly for users who need more complex wheelchair adjustments.

c. Section 5. Selecting the right wheelchair size

- The activity on page 152 of the *Trainer's Manual* requires a clear understanding of the cushion calculations covered in *B.4 Physical assessment*.
- Participants may decide that none of the available wheelchairs are the correct size for the two case studies in the *Participant's Workbook*. This issue will be addressed in *B.10: Problem solving*. Acknowledge the observation and park it in the Car Park.

d. Section 6. Recording the prescription (selection)

- Ask participants to follow on page 51 of the *Reference Manual for Participants* when showing the slides of the *Wheelchair prescription form*. Participants can make notes on the form during the presentation and discussion.
- Highlight the importance of wheelchair user involvement in the prescription process.

B.6: Funding and ordering

Key considerations for teaching this session

a. General

Tips for preparation

- The content of this session is influenced by the wheelchair funding and ordering process in each country/context.
- To prepare for the session, find out what funding options are available and which, if any, ordering processes are followed.
- Context-specific information and discussions will make this session more relevant to participants.
- The trainers can also share examples of models from their own experiences.

Content

- Keep in mind that many less-resourced settings rely solely on donations, with no formal funding and ordering processes.
- The most appropriate wheelchair is selected from what is available. Where possible, give wheelchair users a choice between the most appropriate wheelchairs. Discuss the challenges of using this system, and how to manage them, with participants.
- Recommend that participants establish a database of wheelchair users. This will enable them to engage with potential donors or funders regarding the needs of wheelchair users at their service. A database can also make the ordering process easier as the wheelchair specifications for each user are recorded.
  - When setting up a database, service providers will need to consider the privacy and security of users' personal information. This must include guidelines about what is shared, when it is shared, and who it can be shared with.
- Advise that participants may use the wheelchair summary form as a guide when ordering an appropriate wheelchair for each user. This will save time and is particularly useful for makes and models that offer multiple options.

B.7: Product (wheelchair) preparation

Key considerations for teaching this session

a. General

Tips for preparation

- Laminating the *Wheelchair safe and ready checklist* will allow participants to reuse it.
- Go through the prescription forms before the session. Highlight which groups might need more complex technical adjustments and modifications and have materials and extra tools ready for those groups.
- Arrange for additional technical staff to support the session if many or complex adjustments and modifications will be needed. Consider whether the technical staff need briefing or training prior to the session.

b. Section 2. Preparing the wheelchair

Tips for preparation

- Find out if all participants are familiar with handling the tools and the basic precautions to take in the workshop. For any participants who are not, discuss any questions/concerns at the beginning of the session and review the following basic workshop safety points:
  - wear covered shoes when working with tools
  - keep the work area neat and clean
  - never cut towards yourself or others
  - ask for help if you are not familiar with power tools
  - use safety glasses when using power tools or sharp tools
  - secure your work piece when cutting or drilling.

- Introduce the tools that are going to be used at the beginning of the session.
- The only available wheelchairs may have very different dimensions (such as too wide, or footrests too low) to those prescribed by participants. In this case, extra technical staff will be needed to support the session and to ensure the participants complete the activity in the allocated time. Technical staff can make more substantial modifications after the session, but these need to be completed before *Practical Two: Fitting and user training*.

- In settings where wheelchairs require multiple adjustments, either allocate more time to the session or ensure that technical staff are available to make certain adjustments (such as to the rear wheel position, or advanced technical adjustments).
- Where wheelchair users are not able to attend over two days, this session will take place before the user prescriptions have been done. In this case, exclude the activity on page 165 of the *Trainer's Manual* under *Section 2. Preparing the wheelchair.* Only do this on the day the wheelchair users attend, as part of the practical.

Content

- The PPT describes a clear step-by- step process for product preparation. Reinforce this process during the activity on page 165 of the *Trainer's Manual.*
- Ensure that groups are working safely and able to finish in the allocated time.

c. Section 3. Wheelchair safe and ready checklist

Tips for preparation

- Where wheelchair users are not able to attend over two days, this session will take place before the user prescriptions are done. In this case, trainers can prepare one wheelchair with minor problems for each group of participants. This could include placing the cushion upside down/back-to-front in the cover and on the wheelchair; loosening a few bolts; lowering one foot plate; and/or deflating a tyre.

Content

- Before showing the video, provide each participant with a copy of the checklist to follow while watching.

B.8: Cushion fabrication

Key considerations for teaching this session

a. General

Tips for preparation

- Have one pressure relief cushion (top layer and base) with a lift available, to be passed around during the presentation.
- Preparation for this session will vary depending on the context. If materials for the cushion base need to be fabricated, start at least two days in advance. More details are covered in the *Cushions Annex* on page 185.
- This session reviews information covered in *A.7: Cushions*. Use the presentation as an opportunity to evaluate participants' understanding by asking them to explain the principles summarized in the slides.

b. Section 2. Cushion features and dimensions

- The seat bone-well dimensions shown on page 173 of the *Trainer's Manual* need to be clearly explained, using the correct terminology and reference points, as this is often a new concept to participants.
- Remind participants they must check that the seat bones fit correctly into the well during the fitting process, using the pressure test. The well should be adjusted if necessary.

c. Section 4. How to make a cushion base – practice

- If no locally made cushions are available, this session can be used to make a cushion for the wheelchair users assessed in *Practical One*. Ask participants to work in the same groups as for Practical One and to use the dimensions calculated during the prescription session.
- If choosing to glue the top and base layers together, take care to mould the top layer to the contours created by the base layer (if it is pulled tight over the contours, the pressure relief qualities of the cushion will be lost).
- Where possible, include a technical trainer for this session and allocate one technical participant to each group to guide fellow participants during the activity.
- Encourage participants to double check the cushion measurements once they have finished drawing the dimensions on to their piece of foam.

- Allow 10 to 12 minutes for marking and drawing.
- Participants who finish quickly and neatly can support the slower groups.

d. Section 6. Frequently asked questions about foam pressure relief cushions

- "Does this cushion work for all users?" No cushion works for all users.
- "Do all wheelchair users need a pressure relief cushion?" Remind participants of the following:
  - A wheelchair user with altered or no sensation, must be provided with a pressure relief cushion.
  - Wheelchair users with sensation, and who have three or more risk factors, also require a pressure relief cushion.
  - Wheelchair users who do not have any pressure-sore risk factors require either a comfort cushion or a postural support cushion. A pressure relief cushion can be used to provide postural support, as the pre-seat bone shelf (front of the well) prevents the wheelchair user from slumping/sliding and improves posture.

B.9: Fitting

Key considerations for teaching this session

a. General

Tips for preparation

- Place a wheelchair in the theory area if you plan to demonstrate any of the fitting check activities during the presentation. Ensure that the wheelchair is visible to all participants.

Considerations for gender/culture

- When dividing the groups, consider whether participants should be grouped according to gender.

b. Section 2. Good practice in fitting

- After showing the video on the fitting sequence (page 183 of the *Trainer's Manual*), highlight how important it is to follow the sequence in the *Wheelchair fitting checklist*.

c. Section 3. Fitting practice

Tips for preparation

- Ensure group participants have access to a wheelchair that fits them.

Content

- Checking seat width: the thigh can make contact with the side/armrest of the wheelchair. The seat width is adequate if the assessor can slide their fingers in between the thigh and the wheelchair smoothly. Pressure between the thigh and the armrest/side should be avoided.
- Checking seat depth: there may be contact between the cushion and the back of the calf, but there should be no pressure.
- Footrest height: about 5 cm clearance is required between the footrest and the ground, which means there is a limit to the length adjustment of the footrest.
- Foot propelling: if the seat is too high and the wheelchair user cannot put their foot flat on the ground, make the modifications (to the cushion or the wheelchair) as described in the *Technical Annex*.

B.10: Problem solving

Errors in the WSTP materials

- Section 1. Introduction: In slide 2 modify the last bullet to be a level one bullet (the same as the first bullet point).
- Section 2. Seat depth too short or too long. This section is incorrectly marked as Section 1.

Key considerations for teaching this session

a. General

Tips for preparation

- It would help to have a technical co-trainer for this session.
- Prepare materials to use in the five problem-solving sessions:
  - Select appropriate wheelchairs and have some fabric and straps ready to demonstrate how to lengthen the seat.
  - Pre-cut a wood board to fit one of the sample wheelchairs, and demonstrate how to attach it to the seat rails on the wheelchair.

- As well as presenting the session, use your facilitation skills to encourage participants to find solutions. For example, ask them which materials they would use to resolve a problem, and how and where they would attach it to the wheelchair. Highlight that solutions must not interfere with functions such as transfers, or folding the wheelchair.
- If the participants are experienced, consider dividing them into groups with a wheelchair each and giving them a few problems to brainstorm.

b. Section 2. Seat depth too short or too long

Problem: Seat depth too short

- The solution should not interfere with the folding mechanism of the wheelchair.
- When lengthening the seat, using wood or other solid material, suspend the board from the seat rail on hooks so that it can be removed for folding if necessary (Figure 10).
- On folding-frame wheelchairs, cut reliefs for the top of the cross brace. The board will also rest on the cross brace. If fixing the seat to the top of the seat rails, keep in mind that it will effectively raise the seat and may affect reach to the back wheel, foot support and back support.

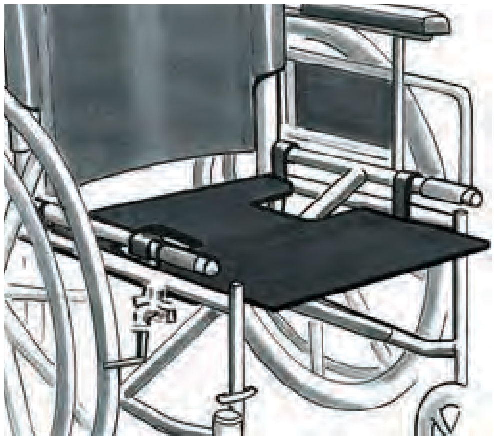


Figure 10. Lengthening seat depth

- An alternative option is to use a thin board, such as hardboard, cut to fit between the seat rails and extending over the edge of the seat. If light, it can also be attached to the bottom of the extended wheelchair cushion.
- If extending the existing cushion, do so at the front. Do not extend from the back of the cushion because any ridges from the glue will increase the user's risk of developing pressure sores. Demonstrate how to extend seat rails and attach new upholstery to help participants see how this would be done.

Problem: Seat depth too long

- Shortening an upholstery seat: there is usually a metal strip that reinforces the sides of the seat. The strip will also have to be shortened when the upholstery is cut and re-stitched. Alternatively, a slot can be left in the front of the upholstery to allow the metal strip to be reattached. This allows the metal strips to remain intact when the upholstery needs to be lengthened (for example with growing children).
- Another way to shorten the seat, but to allow for a child's growth, is to cut a small slot in the sleeve that the metal strip fits into on the top side of the upholstery. The metal strip is pushed through this slot and the upholstery folded over at that level. The folded part can be glued together, or stabilized with a few overhand stitches. A reinforcement strap is added to the front of the seat (in between the folded part of the seat) before it is reattached. The reinforcement

strap must be attached directly to the seat rails or looped around the seat rails and attached back to itself.

- Adding a cushion to the backrest is not a solution because:
  - it limits access to the rear wheel for self-propelling
  - the wheelchair user's weight is shifted forwards, loading the front castors and increasing the risk of the wheelchair tipping forwards.

c. Section 3. Footrests height too low or too high

Tips for preparation

Problem: Footrests' height is too low

- Cut a foam block to fit one of the flip-up footplates on the sample wheelchairs. Make the block thick enough, so that the footplate does not flip-up properly. Make another sample with a channel cut out to remove the interference with the frame tube.

Problem: Footrests' height is too high

- Cut a piece of firm foam to fit an existing wheelchair seat. If possible, demonstrate how it fits inside the cushion cover.

Content

Problem: Footrests' height is too low

- Rubber/EVA/wood or similar solid materials work well if the footrest needs building up. The build-up can be glued on to the footrest. If it is not possible to glue on to the footplate, then use a wood cut-out, bolt the wood to the footplate, and glue the foam to the wood.
- Modifications should not interfere with the flip-up or swing-away mechanism of the footrest. Use the two pre-made samples discussed in the *Tips for preparation* section, to demonstrate this point, and how to solve it.

Problem: Footrests' height is too high

- There must be at least 5 cm clearance between the bottom of the footrest and the ground.
- Raising the height of the cushion is provided as a solution to a high footrest problem in the session plan. Highlight the effect of raising the cushion on:

backrest height, armrest height and access to the rear wheel. In practice, participants need to consider all three and then decide if raising the cushion is a functional solution for each individual wheelchair user.

d. Section 4. Legs tend to roll inwards or outwards

Tips for preparation

- Cut firm foam wedges to fit one of the sample wheelchair cushions.

Content

- Demonstrate how wedges are glued on to the base of the cushion and are then covered by the top layer of the cushion. Reinforce this point, when showing slide 12 on page 191 of the *Trainer's Manual*, as participants sometimes think that the illustrations are showing the wedges glued on to the top layer of the cushion.
- If a wheelchair cushion does not have a removable top layer of foam, show participants how the cushion can be cut on the side and the wedges placed and glued in.
- Wedges should not interfere with transfers.
- Discuss size and types of material that can be used for wedges (usually the same material as the base of the cushion).

- If the seat sags in the middle and the design makes it difficult to tighten the seat tension, a sling-filler pad can also be used to stop the legs rolling inwards (Figure 11).

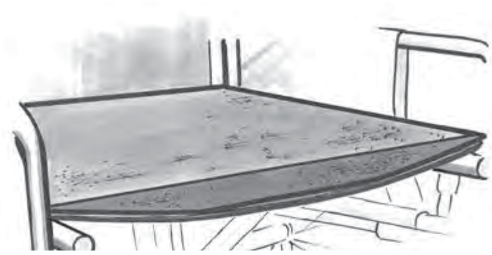


Figure 11. Sling-filler pad

e. Section 5. Feet tend to slide off the footrests

- Discuss different positions/attachments for a calf/ankle strap.
- Straps should not interfere with the mechanism of the footrests (for example their swing-away action) and therefore may need to be detachable.

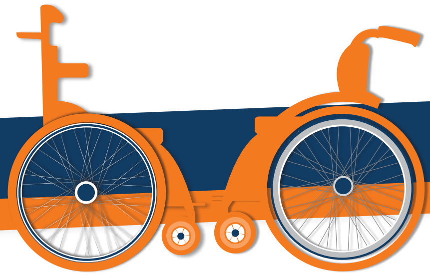
f. Section 6. Wheelchair is too wide

Tips for preparation

- Cut samples from EVA or other firm foam and have some ‘outer layer’ materials to show how the foam can be covered with fabric, leather or EVA foam.

Content

- Discuss which materials the pad could be made from (EVA/rubber/chip foam, with a cover).
- Discuss how and where the pad should be attached (on the wheelchair or the cushion; removable or fixed). Discuss advantages and disadvantages of the various solutions and how these might interfere with functions such as the folding mechanism of the wheelchair or transfers.
- The cushion should remain the same size as the wheelchair seat. Pads are placed above or on top of the cushion.



B.11: User training

Key considerations for teaching this session

a. General

- Park questions about wheelchair maintenance in the Car Park. These will be covered in *B12: Maintenance and repairs*.
- User training skills included in the checklist are covered in sessions *A.3: Wheelchair mobility*, *A.5: Pressure sores*, and *A.8: Transfers*.
- As trainers or service providers, it is important to be confident in all the wheelchair skills yourself before teaching them.
- Organize the session to ensure that there is sufficient time for user training.
- Emphasize that user training is an essential step in wheelchair service provision and time must always be allowed for it in the training programme. A user could have an appropriate and well-fitting wheelchair but not be able to leave their home because they lack confidence in transfer and mobility skills.

b. Section 2. What are helpful skills for wheelchair users?

- Not all six skills need to be taught to every wheelchair user. Participants need to identify which skills are relevant to the user, based on the information gathered during the wheelchair assessment.

c. Section 3. Wheelchair user training practice

- Encourage participants to follow the three steps of good teaching: explain, demonstrate, practise.
- Explain why everyone involved with the wheelchair user (family member, caregiver) needs to learn the skills too.
- Highlight the benefits of peer training. Talking with other wheelchair users and learning from them can be very helpful, especially for new users. Based on their first-hand experience and understanding of particular situations, existing wheelchair users are best placed to demonstrate and teach skills to their peers.

B.12: Maintenance and repairs

Key considerations for teaching this session

a. General

Tips for preparation

- Before the session starts, find out which lubricants are available locally and which components need to be lubricated on local wheelchairs. Put together one home maintenance tool kit per group (or ask groups to share items). The kit should include: a spanner, allen keys, screwdriver, tyre pump, puncture repair kit, lubricating oil, bucket, soap, cloth and sandpaper.
- If possible, allocate one participant with technical experience to assist and guide each group.

Content

- Check that participants understand the difference between maintenance and repair:
  - maintenance refers to regular care that helps to prevent of damage and breakdowns
  - repairs refer to components that are broken and need to be repaired or replaced.

b. Section 2. Prevent repairs: home maintenance

Tips for preparation

- Identify an area that is suitable for washing wheelchairs with soap and water. This is for the maintenance activity on page 205 of the *Trainer's Manual.*

Content

- Be clear on the maintenance requirements of local wheelchairs. For example, some may have sealed bearings that do not need any lubrication. Give participants a guide on appropriate lubricating oils. Recommend a light oil such as sewing machine oil; heavy oils, such as engine oil, are not suitable. Organic natural oils, (coconut or olive oil), can be used if there is no alternative but tend to attract unwanted attention from insects. Synthetic oils are more effective and will last longer.

- Video clip. In the section on *Oil moving parts*, there are two points that often cause confusion:
  - The sealed bearing in the castor barrel does not require lubrication. However, the island climate featured in the video is one of high humidity and salt, so a small amount of oil is used on top of the castor barrel to help reduce rust.
  - The nut on the front castor axle is not a moving part and does not need to be oiled. Again, due to the example of an island climate, a small amount of oil can be used to reduce rust.

- If one or two isolated spokes come loose, these should be tightened as a home maintenance activity using a spoke key. Take care not to over-tighten the spoke. You can check this by seeing how much force is needed on the spoke nipples next to it (located at the wheel rim), and use the same force on the loose spoke. If the spokes are very loose or fall out, take the wheel to a bicycle repair shop.

c. Section 3. Common wheelchair and cushion repairs

- For the activity on page 206 of the *Trainer's Manual*, participants must identify the repairs that their wheelchair needs and decide where these repairs will be done. They do not need to carry out the repairs themselves.
- If there are no used wheelchairs with problems available, create some problems in the wheelchairs that you do have. For example, loosen the axle, brake or castor fork bolts and nuts; deflate a tyre; loosen the upholstery bolts and nuts. Remember to fix these problems again at the end of the session – use the *Wheelchair safe and ready checklist.*
- Repairs also include re-aligning (bending back into the correct shape) or replacement of bent components.

B.13: Follow up

Key considerations for teaching this session

a. Section 2. What is follow up and how does it happen?

- When discussing how often follow up should happen, on page 214 of the *Trainer's Manual*, the following points can be used for guidance:
  - A wheelchair user should be followed up four to eight weeks after receiving their first wheelchair.
  - Children and wheelchair users with progressive illnesses should be followed up every four to six months as their needs may change very quickly.
  - Wheelchair users who have a stable condition and have been using a wheelchair for a long time can be followed up annually.
  - Look at an individual's needs when setting a follow-up date.

b. Section 5. Key point summary

- Emphasize that follow up should be more than simply completing a checklist.
- Encourage participants to think critically about each question and how wheelchair user responses will influence the actions that need to be taken.
- The wheelchair user's feedback at follow up provides insight into their lived experience and gives invaluable feedback to service providers.

B.14a: Practicals one to four

Key considerations for teaching this session

a. General

Tips for preparation

Training area and set up

- Set up the practical area so that each group has enough space to carry out their interview and physical assessments privately.

Group allocations

- Consider grouping participants from the same service together and/or to mixing clinical and technical participants. Group more confident/talkative participants and quieter/less sure participants so they can work with others at a similar pace.

Supervision

- Allocate a supervising trainer to each group. The lead trainer should supervise fewer groups as they need enough time to check in with the support trainers and keep the session on track.

Wheelchair users

- Identify a link person from the host organization to liaise between the service and the training programme. Their role will include: receiving wheelchair users; following up on latecomers; and coordinating user follow up after the training programme.
- Have a back-up wheelchair user available in case someone is no longer able to attend.
- Temporary wheelchairs and cushions should be available for those wheelchair users who do not have their own wheelchairs when they arrive.
- Ensure that food and drinks are available for wheelchair users.

Taking photographs

- Check that wheelchair users and participants have agreed to be photographed and have signed the consent forms.
- Any modifications made to the cushion should be photographed before the cover is put on.
- During the practical sessions take before and after images, as well as close-ups of modifications; this will make the participant presentations in *B.14 Putting it all together* more useful as a learning exercise.
- Allocate one trainer to take photographs. This allows participants to focus on the practical and makes it easier to download and organize photos afterwards.

b. Practical One: Assessment and prescription (selection)

- Before starting, participants need to decide who will be responsible for which part (interview, physical assessment, measurement, fitting and training). Participants should not interrupt each other but wait for a colleague to finish before adding a comment and moving on to the next part.
- Ask participants to complete the assessment interview in 20 to 25 minutes.
- Closely monitor the physical assessment and correct any errors (for example, incorrect measuring technique) that would influence the prescription.
- Body measurements need to be converted to wheelchair measurements before preparing the wheelchair prescription.
- The wheelchair user should be an active participant during the prescription process. Ensure that participants have discussed wheelchair options and features with the wheelchair user before the final prescription is made. If demonstration wheelchairs are available, these can be used to explain specific wheelchair features to the user and to answer any questions.
- Ask each group of participants to explain the clinical reasoning for the prescription they have chosen.

c. Practical Two: Fitting and user training

- Trainers should supervise the same groups as for Practical One.
- Participants should do an initial check of the seat width and depth, and the footrest height with the user in the wheelchair. Then ask the wheelchair user to propel (with arms or feet) over relevant surfaces while another participant watches closely. This helps determine if any major adjustments need to be done, for instance moving the position of the rear wheel or increasing backrest height.

Participants can then complete the *Wheelchair fitting checklist* and prepare to finalize all adjustments.

- Check all adjustments and modifications before participants glue/fix them in place.
- Review the final fitting check before participants begin user training.
- Before wheelchair users depart, give them the name and contact details of someone to help if they have any problems or questions about the wheelchair. Organize a follow-up appointment for the wheelchair user at a service that is easily accessible.
- If applicable and time allows, finish with a short feedback session.

d. Practical Three: Follow up

Tips for preparation

- In some situations, there is a lot of pressure to complete all repairs and adjustments. However, follow up is the focus of the training and these additional requests often cannot be accommodated at the same time. It is important that wheelchair users are fully informed so their expectations are realistic.

Content

- Allocate participants to new groups.
- Monitor the groups and ask questions to see whether participants understand the information they are getting and can take appropriate action.
- Any modifications or changes that are needed should be documented and discussed with the trainers. They can only be done if they are simple and fit into the allotted time.

e. Practical Four: Assessment, prescription (selection), product (wheelchair) preparation, fitting and user training

- Allocate participants to new groups. During the introduction, explain how much time is allocated for each step (listed on page 224 of the *Trainer's Manual*). Write this information on the board to help participants keep to time. Participants can tick as they complete each step and indicate how much time it took.
- Depending on the experience and availability of technical staff, consider allocating one of them to each group as this will speed things up.

- If any groups do not have time to complete all the steps, organize an appointment for the work to be completed at a service accessible to the wheelchair user.
- Explain to participants that they should allocate tasks within their group. For example, during product preparation one person can adjust the footplate; another cuts the cushion well and a third cuts pads to narrow the wheelchair. Explain that good task allocation will ensure that all steps are completed within the allocated time.

B.14: Putting it all together

Errors in the WSTP materials

a. Section 2. Participants' questions

- The time section in the activity on page 225 of the *Trainer's Manual* should say 'Allow 5 minutes in total' instead of 10 minutes.

Key considerations for teaching this session

a. Section 3. Participants' preparation

Tips for preparation

- Allocate a trainer to download and organize the before and after photographs needed to illustrate each presentation. This task should be done during a break.
- Display before and after photographs side by side as an effective way of showing the impact and outcome of the fitting.

Content

- Allocate support trainers to help the groups prepare.
- Tell participants that you will give them 5 and 1 minute warnings to ensure that each presentation is limited to 10 minutes.

b. Section 4. Participants' presentations

- Facilitate the presentations to ensure that they remain focused and that participants explain key learning points clearly.
- During the presentation and facilitation, link how the wheelchair and cushion features meet the user's environmental, functional and postural support and fitting needs.
- Where wheelchair options and choices are limited, highlight where compromises have been made. Emphasize that any compromise needs to be discussed and agreed with the wheelchair user.

c. Section 5. Question-and-answer session

- Encourage participants to set up a support network for continuing professional development and generally to keep supporting and learning from each other.
- This could be done in-person or online using a social media platform.
- A support network may include a forum to post and discuss clinical questions; to share information and latest research; or more formal meetings to present and discuss case studies.
- Confidential information about service users should never be shared without written permission.

d. Section 6. Key points

- Encourage participants to practise and apply all the skills and knowledge they have gained during the programme (practice makes perfect!).

Logistics and preparation

Notes for ToT trainers:
• *This session is not for presentation or discussion. It is included in the ToT Handbook as background information for trainees. Trainees will be exposed to logistics and preparation issues during co-training experiences where they can raise questions with trainers.*

The *Trainer's Manual* includes a comprehensive list of facilities, printed resources, materials and equipment needed to successfully organize a WSTPb training programme. The trainer coordinating the training programme will usually liaise with the local host to decide who takes responsibility for each aspect of the logistics and preparation.

The trainees will gain experience and skills in handling logistics and preparation tasks during their co-training. The trainer coordinator will divide up these activities among trainees and then monitor and support them.

Facilities and services

A facilities checklist is included on page 14 of the *Trainer's Manual*.

Translation services may be needed if the WSTPb trainers do not speak the same language as participants. These services are usually in high demand and should be booked well in advance. Costs will need to be added to the training budget.

Printed resources

Materials must all be printed locally. A full list of the printed resources needed for the WSTPb can be found on pages 14 – 16 of the *Trainer's Manual*. Use the checklist in the *Trainer's Manual* to ensure that you have printed the correct number of materials.

Materials and equipment

A list of materials and equipment needed for the WSTPb can be found on pages 17–18 of the WSTPb *Trainer's Manual*.

Wheelchairs

The last row on page 17 of the *Trainer's Manual* refers to locally available wheelchairs and cushions. If there are many different wheelchairs available, select the models that are used most often ensuring that the following wheelchairs/ features are included:

- rigid frame 3-wheel wheelchair
- rigid frame 4-wheel wheelchair
- folding-frame wheelchair with adjustment options
- basic folding-frame (orthopaedic-style) wheelchair
- short-wheelbase wheelchair (4-wheel wheelchair)
- long-wheelbase (3- and 4-wheel wheelchairs).

In less-resourced settings where there are no long-wheelbase four-wheel or three-wheel wheelchairs available, consider introducing examples to participants. The benefits of long-wheelbase wheelchairs in less-resourced settings have been well documented and they are often the most appropriate design for active wheelchair users. Funds to purchase these samples should be included in the training budget.

Do not include motorized wheelchairs or wheelchairs that have supportive seating/additional postural support devices as these are not covered in the WSTPb.

Ensure that all wheelchairs are in good working order (tyres pumped up and bolts tightened) and have a cushion.

There should be a wheelchair and cushion – or materials to make a cushion – for each wheelchair user who attends the practical sessions, as well as basic items like ankle and calf straps.

Consumables

Page 18 of the *Trainer's Manual* lists the foam needed for the cushion fabrication practical. Additional foam, glue, upholstery, nuts/bolts and other components and spares may be needed to make basic modifications to wheelchairs. These should be added to the *Materials* table at the top of page 17 in the *Trainer's Manual*. The complete list of resources needed will depend on the context. Depending on the resources available, technical assistance may be arranged for modifications (for example shortening/extending seats or footrest hangers).

Technical work area

A technical work area with a variety of tools and materials needed for modifications should be made available or created. This may have budget implications for the training.

Power supply

Where there is unreliable electricity, a generator with an in-line uninterruptible power supply should be arranged for back-up. This also needs to be added to the equipment list on page 17 of the *Trainer's Manual.*

Planning for training

The most important activities and approximate timelines for planning a WSTPb training programme are listed here.

8 to 12 months in advance

- Develop a budget for the training programme.
- When multiple partners are involved, agree on the responsibilities of different partners.
- Identify dates, a venue, trainers, participant profiles and information on the local context such as: general policies and procedures that guide local wheelchair practice and services; types of wheelchairs, cushions and other materials available; information on local culture and diversity of the participants; and organizations involved.
- To work out how many days are required for the training, confirm start and finish times for each day and whether translation will be required.

4 to 6 months in advance

- Send invitation letters to each participant with details of the training programme (dates, venue, logistical information) to complete and return.
- Gather information on the professional background and skills of participants so that you can adapt session plans accordingly.
- Book training equipment.
- Source demonstration equipment and other resources needed for the practical sessions, such as treatment beds, foot supports, and transfer boards.
- Source consumables.
- Source equipment for users (if user equipment is dependent on donor funds and/or part of the training budget, sourcing equipment may need to start earlier).

- Brief trainers on the context and participants, and agree on the division of sessions and roles.
- Book catering services.
- Arrange for translators and translation facilities if needed.

4 to 6 weeks in advance

- Arrange for local printing of all necessary materials.
- Screen and invite wheelchair users.
- Finalize registration details: for example, arrange for name tags and registers; and liaise with whoever will carry out the registration.
- Send final written confirmation/pre-course information to participants, wheelchair users and trainers.
- Confirm caterers, venue and other logistics.

1 to 2 weeks in advance

- Confirm that any ordered items have been delivered.
- Check toilets, water and electricity supply at venue.
- Confirm cleaning schedules.

If the training team is not local, it is best to arrive a few days before the programme begins to check the equipment and the venue; meet with wheelchair users supporting the training programme; and to buy any remaining materials required.

Regular communication will be needed between the coordinating trainer and other trainers, the host organization and other organizations involved.

Wheelchair users

During the WSTPb, there are four practical sessions in which three groups of wheelchair users participate. The first group attends on two different days. Before the training programme, trainers need to identify and invite wheelchair users who are willing and able to attend the practical sessions. There is a checklist on page 11 of the *Trainer's Manual* that helps to identify wheelchair users.

Liaise with the host organization and training organizers regarding budgets and facilities available for wheelchair users. Find out if transport will be provided for wheelchair users or whether they will be reimbursed for costs.

If wheelchair users are only able to attend on one day, the programme can be rearranged to accommodate *Practical One* and *Practical Two* for user group one on the same day. When adjusting the timetable, make sure service steps 2–7 have been covered before *Practical Three*.

Where possible, trainers should screen wheelchair users in person. If trainers are not based locally, a local service provider can be asked to identify potential wheelchair users and send photos and information in advance for trainers to confirm their suitability for the training level.

Invitations to wheelchair users

When drafting invitations to wheelchair users think about the following issues (a template is available on the WSTP Pen Drive):

- A description of what will happen when they attend the session.
- The time, date and the duration of the session.
- Can they bring someone with them?
- Will they receive a wheelchair at the session? What happens if they need follow up or have any problems with the wheelchair?
- Where will they receive follow-up services after the training?
- How will they get to the venue? Will their transportation costs be reimbursed?
- Do they have to bring refreshments and lunch?
- Will they receive payment for attending?

Each wheelchair user should receive an invitation letter with this information in writing. They should also sign a consent form to indicate their willingness to take part and to be photographed. The photographs are used when the small groups present back to the rest of the group.

Despite careful planning, a wheelchair user may arrive with a pressure sore or fall ill on the day of the session. Discuss this possibility in advance with the host organization so that they are ready to manage the situation if it arises, and can arrange for a back-up wheelchair user to attend.

If a wheelchair user has a bladder or bowel accident during the session, have supplies ready to clean the user and the equipment. Also, a small first aid kit should be available in case of bumps and scrapes to both participants and wheelchair users.

Annexes

Annex 1: Timetable for WSTPtot core sessions

	Day One	Day Two
8:30	ToT.1 Introduction to the WSTPtot (75)	ToT.7 Presenting and Facilitating (60)
8:45		
9:00		
9:15		
9:30		ToT.8 Communication skills (90)
9:45	ToT.2 Wheelchair Service Training Packages (90)	
10:00		
10:15		
10:30		
10:45		
11:00 – 11.15 Morning break (adjust time to suit local context and session plan)		
11:15	ToT.2 Wheelchair Service Training Packages	ToT.9 Guiding documents (75)
11:30	ToT.3 Practice deliveries (60)	
11:45		
12:00		
12:15 – 1.15 Lunch (adjust time to suit local context and session plan)		
1:15	ToT.3 Practice deliveries	ToT.9 Guiding documents
1:30	ToT.4 Preparing for diversity (60)	ToT.10 Audio-visual tools and equipment (45)
1:45		
2:00		
2:15		ToT.11 Feedback (45)
2:30	ToT.5 Adult learning (80)	
2:45 – 3.00 Break (adjust time to suit local context and session plan)		
3:00	ToT.5 Adult learning	ToT.11 Feedback
3:15		ToT.12 Managing group dynamics (45)
3:30		
3:45		
4:00	ToT.6 Preparation time (15)	Preparation (60)
4:15	Preparation (45)	
4:30		
4:45		

Annex 2: WSTPtot Basic Level Timetable

	Day one	Day two	Day three
8:30	Introduction 30	A.6 Appropriate wheelchairs *Part 2 (78)*	B.4 Physical assessment 85
8:45			
9:00	A.1: Wheelchair users 25		
9:15			
9:30	A.1: Feedback 10		
9:45	A.3 Wheelchair mobility 90		
10:00	*Part 1 (37)*	A.6 Feedback 5+5	B.4 Feedback 5+5
10:15	**Morning break**	**Morning break**	**Morning break**
10:30	A.3 Wheelchair mobility (43)	A.7 Cushions 75	B.5 Prescription 120
10:45			
11:00			
11:15	*A.3 Partial wheelie 10*		
11:30	A.3 Feedback 20		
11:45	A.4 Sitting upright 45	A.7 Feedback 5+5	
12:00		A.8 Transfers 65	
12:15			
12:30	A.4 Feedback 10	**Lunch break**	B.5 Feedback 5+5+5
12:45	**Lunch break**		**Lunch break**
1:00			
1:15			
1:30		A.8 Transfers	
1:45	A.5 pressure sores 60		B.7 Product preparation 40
2:00			
2:15		A.8 Feedback 5+5+5	
2:30		A.8 *Floor to chair* 10	B.7 Feedback 5

<table>
<tr><td>2:45</td><td>A.5 Feedback 10</td><td rowspan="3">B.3 Assessment interview 90
Part 1 (47)</td><td rowspan="3">B.9 Fitting 60</td></tr>
<tr><td>3:00</td><td>**Afternoon break**</td></tr>
<tr><td>3:15</td><td rowspan="2">A.6 Appropriate wheelchairs 120
Part 1 (42)</td></tr>
<tr><td>3:30</td><td>**Afternoon break**</td><td>B.9 Feedback 5+5</td></tr>
<tr><td>3:45</td><td>A.6 Feedback 5</td><td rowspan="2">B.3 Assessment interview
Part 2 (43)</td><td>**Afternoon break**</td></tr>
<tr><td>4:00</td><td>Car park 15</td><td rowspan="2">B.13 Follow-up 35</td></tr>
<tr><td>4:15</td><td rowspan="4">Session preparation
ToT Trainer individual feedback</td><td>B.3 Feedback 5+5</td></tr>
<tr><td>4:30</td><td rowspan="4">Session preparation
ToT Trainer individual feedback</td><td>B.13 Follow-up 5</td></tr>
<tr><td>4:45</td><td>Car park 15</td></tr>
<tr><td>5:00</td><td>Evaluation 15</td></tr>
<tr><td>5:15</td><td></td><td>Closing ceremony 15</td></tr>
</table>

Annex 3: Feedback sheet for WSPTtot practice delivery sessions

Trainee: ______________________ ToT trainer: ______________________

Session name/number: ________________ Sections: ______________________

Date: __________ Allocated time: ___________ Actual time taken: ___________

Finished all sections? ☐ Yes ☐ No

This feedback sheet is a tool to help to develop the confidence and training skills of WSTPtot trainees. This sheet can be used by:

- trainees, to reflect on their training skills
- ToT trainers, to give feedback to trainees.

Instructions to ToT trainers: After each practice delivery, write in the two columns below, using the *WSTPtot trainee skills* list below for guidance. At the end of the WSTPtot, complete the **recommendation and summary** at the end of page 2.

WSTPtot trainee skills:

- preparation
- time management
- delivery of WSTP materials
- presenting
- facilitating
- communication
- managing group work
- giving feedback.

First practice delivery	
What was good	**What can be improved**

Trainee: ______________________ ToT trainer: ______________________

Session name/number: ________________ Sections: ____________________

Date: __________ Allocated time: __________ Actual time taken: __________

Finished all sections? ☐ Yes ☐ No

Second practice delivery	
What was good	**What can be improved**

Trainee: ______________________ ToT trainer: ______________________

Session name/number: ________________ Sections: ____________________

Date: __________ Allocated time: __________ Actual time taken: __________

Finished all sections? ☐ Yes ☐ No

Second practice delivery	
What was good	**What can be improved**

Instructions to ToT Trainers: At the end of the WSTPtot, select your recommendation below and write a brief summary of the trainee's strengths and areas for improvement.

Recommendation and summary
ToT trainer recommendation: ☐ Continue to co-training ☐ Develop knowledge and/or skills before continuing to co-training (details below) **Summary**

Annex 4: Cushions Annex

Preparations

The resources available for sessions A.7: Cushions and B.8: Cushion Fabrication will vary depending on the context of the training course. Aim to use materials and fabric that will be accessible and affordable for participants after the training.

In some contexts ready-made cushions may be available. If not, source or buy appropriate materials and make sample cushions before the training starts.

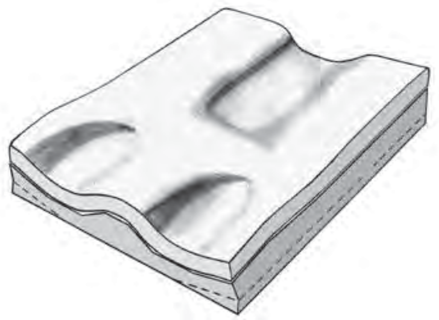


Figure 1. Pressure relief cushion

When using glue, ensure that you leave enough time for it to dry. This is particularly important if you are glueing several layers together to create the required thickness.

Fabricating cushions and cushion covers

Look in the local market and visit foam, shoe, mattress and furniture factories to find locally-available foam.

Ensure that you have the correct firmness of foam:

- The base layer materials must be firm enough to maintain their shape under the weight of the user. Suitable materials for the cushion base are often hard to source. Where resources are scarce, alternatives can include layered ethyl vinyl acetate (EVA), chip foam or rubber (such as a yoga mat).
- The top layer should be soft enough to allow the seat bones to sink into it, but should not be so soft that the seat bones can sink all to the bottom to rest on the solid base of the wheelchair seat.

See the *Technical Annex* for more information about how to test foam firmness.

Aim to have different thicknesses of foam available (30–50 mm) for demonstration and provision to wheelchair users.

For the cushion cover:

- Choose a fabric with two-way stretch that follows the shape of the cushion, such as T-shirt material or lycra.
- If stretchy fabric is not available, ensure there is enough room in the cover to fit into the contours of the cushion. Pleats in the cushion cover may also allow it to fit the shape of the cushion better (especially in the well area).
- Avoid thick folds that mark the skin. The fabric should be thin enough to avoid causing ridge marks when sitting on a fold.

Samples for participants

Have examples of suitable and unsuitable materials (foams, rubbers, fabrics) for the base layer, the top layer and cushion cover.

Samples of materials should be a minimum of a 50 x 50 mm and fabric 100 x 100 mm.

This will help participants to understand which materials are acceptable and which are not. If possible, put together a small sample kit of good examples for each participant to take home.

Moisture and incontinence management

Water-resistant or waterproof cushion covers for users who are incontinent can be difficult to source. Options include:

- Providing two cushions so that one can be used, while the other is being washed and dried.
- Covering the cushion with a thin plastic bag.

When covering a cushion with a very thin plastic bag:

- Ensure it is loose enough to allow the wheelchair user to sink into the soft top layer of the cushion. This will ensure the user continues to benefit from posture support and pressure relief aspects of the cushion.

If providing a cushion with more than one layer, consider only covering the base layer with a plastic bag.

- The top layer can then be removed and replaced as necessary.
- Providing more than one layer to the user will help them to wash and dry the top layers each time they get wet or soiled.

Covering the cushion with a plastic bag may create heat and cause sweating/ moisture for the user, which are risk factors for pressure sores.

- Talk with users about the increased risk of developing a pressure sore.
- Encourage them to check their skin regularly.

Remember that wheelchair users should never sit directly on the plastic; the cushion should always be used with a cover.

Tools for cushion fabrication

For some participants, it may be their first experience of making a cushion. Give them some practical tips on the tools and materials they will be using, for example:

Apply masking tape to one end of the hacksaw blade to create a grip, to make cutting easier and more effective (Figure 2). The tooth edge of the saw blade should be ground down for foam cutting.

For more details on preparing a hacksaw blade for cutting, refer to the WSTPm additional resources.

Figure 2. Hacksaw blade

Create a guide when fabricating a cushion

A visual guide can be made out of cardboard or wood.

A guide is helpful for marking up a cushion before cutting, for example when removing a small bevel from the edges of the well (Figure 3).

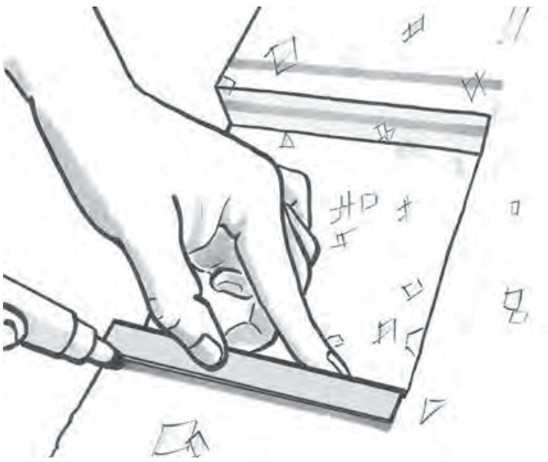


Figure 3. Using a guide when cutting

A guide can also be useful when cutting a consistent shape or straight line (Figure 4).

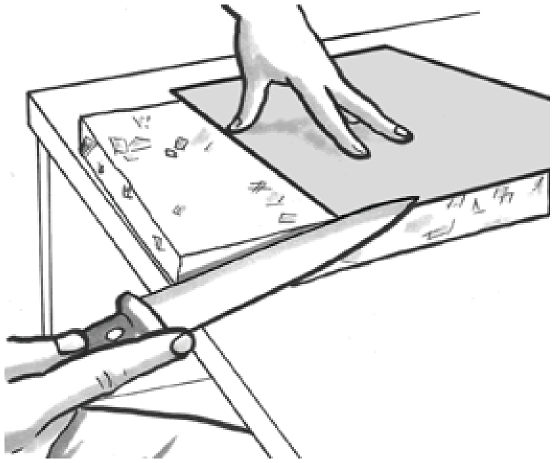


Figure 4. Cutting a straight line

Seat and cushion modifications to enable foot propelling

When modifying a wheelchair to allow the user's foot to comfortably reach the floor (session B.4: Physical assessment) consider the following options.

Reduce the overall height of the cushion

- Use a thinner base layer or top layer of foam on the cushion.
- If the user is at risk for pressure sores, use the finger pressure test to ensure that the cushion provides enough pressure relief.

Lower the seat of folding-frame wheelchairs by attaching a solid seat

- Suspend the seat board from the seat rail on hooks, then it can be removed easily (Figure 5).
- Cut reliefs for the top of the cross brace.

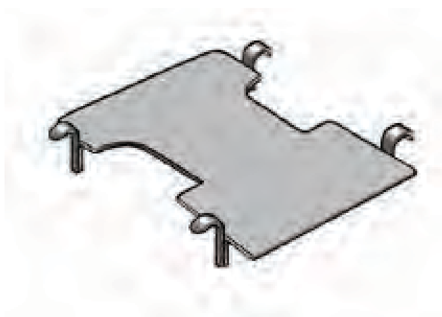
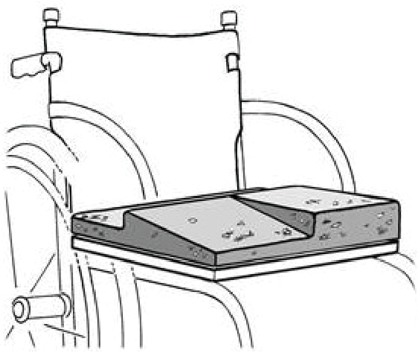
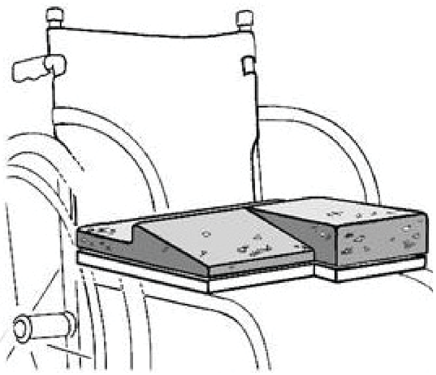


Figure 5. Solid seat with hooks

Modify the cushion by adding a *lowered seat front*	
Add a *lowered seat front* to the cushion on the side of the leg that needs to reach the floor (Figure 6). • The length of the lowered seat front starts from the shelf and extends down to the front edge of the cushion. • The width of the lowered seat front is half of the overall width of the cushion. • There should be even contact under the user's seat bones and thighs.	 **Figure 6. Lowered seat front**
Modify both the seat and cushion	
Shorten the seat and cushion on the side of the propelling leg (Figure 7). • Solid seat: Shorten the seat and the cushion to the required length on the side which needs to reach the floor. This should be combined with a *lowered seat front*. • Fabric slung seat: Shorten the entire seat to the desired length. Add a board the same shape as the cushion, extending over the edge of the seat. It may be necessary to replace the fabric seat with a lowered solid seat.	 **Figure 7. Shortened seat and cushion**

Annex 5: Updated Wheelchair Assessment Form

For assessment of wheelchair users who can sit upright easily. Wheelchair users who cannot sit upright easily may need assessment by a person with 'intermediate' level training. Keep this form in the wheelchair user's file.

Assessor's name:		Date of assessment:	

1: Interview Assessment

Information about the wheelchair user

Name:			Number:	
Age:			Male ☐ Female ☐	
Phone no.:		Address:		
Goals:				

Physical condition

Cerebral palsy ☐ Polio ☐ Spinal cord injury ☐ Stroke ☐

Frail ☐ Spasms or uncontrolled movements ☐

Amputation: R above knee ☐ R below knee ☐ L above knee ☐ L below knee

Bladder problems ☐ Bowel problems ☐

If the wheelchair user has bladder or bowel problems, is this managed? Yes ☐ No ☐

Others: ______________________________

Lifestyle and environment

Describe where the wheelchair user will use their wheelchair:

____

Distance travelled per day: Up to 1 km ☐ 1– 5 km ☐ More than 5 km ☐

Hours per day using wheelchair? Less than 1 ☐ 1-3 ☐ 3-5 ☐ 5-8 ☐
more than 8 hours ☐

When out of the wheelchair, where does the user sit or lie down and how (posture and the surface?

____

Transfer: Independent ☐ Assisted ☐ Standing ☐ Non-Standing ☐ Lifted ☐
Other ☐

Type of toilet (if transferring to a toilet): Squat ☐ Western ☐ Adapted ☐

Does the wheelchair user often use public/private transport? Yes ☐ No ☐

If yes, then what kind: Car ☐ Taxi ☐ Bus ☐ Other ______________________

Existing wheelchair (if a person already has a wheelchair)

Does the wheelchair meet the user's needs? Yes ☐ No ☐

Does the wheelchair meet the user's environmental conditions? Yes ☐ No ☐

Does the wheelchair provide proper fit and postural support? Yes ☐ No ☐

Is the wheelchair safe and durable? (Consider whether there is a cushion)
Yes ☐ No ☐

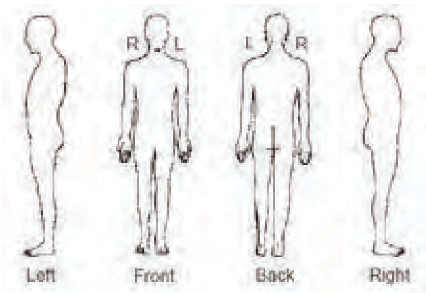
Does the cushion provide proper pressure relief (if user has pressure sore risk)?
Yes ☐ No ☐

Comments: ____

If yes to all questions, the user may not need a new wheelchair. If no to any of these questions, the user needs a different wheelchair or cushion; or the existing wheelchair or cushion needs repair or modifications.

2: Physical Assessment

Presence, risk of or history of pressure sores

<table>
<tr><td rowspan="5">/// = does not feel
O = previous pressure sore
● = existing pressure sore

</td><td>Can feel normally?</td><td>Yes</td><td>☐</td><td>No</td><td>☐</td></tr>
<tr><td>Previous pressure sore?</td><td>Yes</td><td>☐</td><td>No</td><td>☐</td></tr>
<tr><td>Current pressure sore?</td><td>Yes</td><td>☐</td><td>No</td><td>☐</td></tr>
<tr><td>If yes, is it an open sore (stage 1– 4)?</td><td>Yes</td><td>☐</td><td>No</td><td>☐</td></tr>
<tr><td colspan="5">Duration and cause: ______________________________
____</td></tr>
<tr><td colspan="2">Is this person at risk* of a pressure sore? *A person who cannot feel or has 3 or more risk factors is at risk. Risk factors: cannot move, moisture, poor posture, previous / current pressure sore, poor diet, ageing, under or over weight.</td><td>Yes</td><td>☐</td><td>No</td><td>☐</td></tr>
</table>

Method of pushing

How will the wheelchair user push their wheelchair? Both arms ☐ Left arm ☐ Right arm ☐ Both legs ☐ Left leg ☐ Right leg ☐ Pushed by a helper ☐

Comment: ____

Measurements

	Body Measurement		Measurement (mm)	Change body measurement to ideal wheelchair size	Wheelchair measurement
A	Hip width			Hip width = seat width	
B	Seat depth	L		B less 30 – 50 mm = seat depth (if length is different, use shorter one)	
		R			
C	Calf length	L		(C less cushion height*) C less cushion height* = seat to top of footplate or seat to floor depending on user's needs	
		R			
D	Bottom of rib cage			(D or E [depending on user's needs] + cushion height*) D or E (depending on user's needs) + cushion height* = seat to top of backrest	
E	Bottom of shoulder blade				

**check the height of the cushion that the wheelchair user will use.*

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