ISWP Competency Subcommittee

February 19, 2020 Meeting Recap

The ISWP Competency Subcommittee met by conference call on Wednesday, February 19, 2020 from 10:00 a.m. to 11:00 a.m. U. S. Eastern Time. This provides a recap.

Meeting Recording Link: https://iswp.adobeconnect.com/pbjtny8atssk/

Next Meeting: https://doodle.com/poll/bgw4uu2ci5f9rz7s

Discussion:

1. **Approval of Agenda**: Agenda approved.

2. **Approval of Minutes**: Minutes from November 13, 2019 Subcommittee call were approved.

3. **ISWP Update**: As of February 14, 4,197 test attempts from 96 countries, up 279 since November 2019. Two new countries added: Dominican Republic and Niger.

   For Intermediate knowledge test, 568 test attempts, up 11 attempts from November 2019. 1 new Spanish test taker. Combined, represent 20 countries. No new countries added since November.

   For Intermediate skills test, received one additional case study. Person mailed the forms to Krithika, who scanned so it is ready to send to reviewers. No submissions yet for Spanish version.

   There is one pending case study, which Sue reviewed. Sue requested the case study be submitted in the new forms, but Krithika has not received them yet.

4. **WSP Basic Certification**: 59 providers from 20 countries, up 1 certificant since November 2019. Available in English, French and Spanish; working on Portuguese version. By spring, expect over 60 certified providers through work with Loh Medical, University of Montreal and SESOBEL, Lebanon.

5. **Basic Skills Test Study**: As part of a Paralyzed Veterans of America (PVA), developed a basic skills assessment, validated and conducted a study to determine if remote approaches were feasible. Recruited 12 participants. Participants had to pass the Basic test to participate. Remote approaches:

   a) multiple choice assessment based on three different case studies, which were fictional and described in a couple of paragraphs each. Each of the 12 participants
Two additional approaches, also conducted remotely.

b) Remote skills assessment which followed WHO assessment and prescription forms, which was conducted in person at conferences. Facilitator of test would identify a mock client, who was coached on how to respond or describe their unique needs accurately. All of the mock clients in this case were manual wheelchair users, so they were able to describe the likes and dislikes of their current equipment. They also had a mock issue which needed to be addressed.

The test taker would go through the full assessment and prescription process. A moderator of the test managed the scoring. Some items were scored on the spot based on a rubric; others, would be assessed based on the forms the test taker submitted after.

c) Online platform using Adobe Connect (n=5). The online assessment differed in that the test taker had to identify his/her own client. Moderator was on the computer on the other end, remotely, to score the sheets which were submitted online after the test.

All three approaches were evaluated based on feasibility criteria; also analyzed total scores compared to Basic knowledge test. Participants scored highest on the in-person version; closest to basic knowledge test on the quiz version. Average scores were close because it used the same format as the basic test. Also, having the moderator did help to clarify certain points. Moderator did not move them to a correct answer but did answer questions. Also think it represents more fidelity to practice. The Adobe Connect version had higher scores, too. All three test methods did meet the minimum feasibility criteria in terms of recruitment, retention and adherence to protocol. So, we believe there is potential to use these methods using moving forward. Had fewest challenges with in-person session at the conference. Easiest to recruit and no technology challenges. Could be included in certification process or another asset for future trainings, perhaps at universities or by NGOs.

Regarding cost, both the moderators and participants received modest subject reimbursements which were supported by the grants, based on a standard rate that is used in other research protocols at the university and time spent in the study. Admittedly, that could be a challenge in practice. The University of Pittsburgh Institutional Review Board deemed it to be an exempt study, and the team followed the university’s practices for data management. Elsje asked how an emergency would be handled if a future skills assessment took place at a conference. Mary explained that the IRB considered the risk; also, the conference organizers typically have protections in place. Both the participants and moderators were read a consent script prior to the
test. Test also was conducted in a room without windows, and the door was closed throughout. Elsje commented that in terms of duplicating in another country, the regulations and protocols are under a particular service provider. There probably is more flexibility in a conference setting than in a low-resourced setting.

6. **Recommendations for Intermediate Test Takers – Skills Test:** ISWP drafted four points for a candidate to have the best chance to pass the skills test, which will be listed in the website. Krithika will update the list based on the group’s comments and send for final review before posting on the website.

7. **Waiving the Moderator Requirement in the Skills Test evaluation:** Elsje and Dietlind feel it is important to have a second moderator to review case study submissions, so we will keep as is, even though it is a challenge to find sufficient volunteers. Elsje said she has heard some feedback that the volunteers feel it is too much responsibility. She suggested letting volunteers know that there is an in-service training, and the volunteer will be assigned with a more experienced advisor to learn the process thoroughly.

   It might help to promote the fact that there are two moderators reviewing case studies, which means test takers have the best chance of having their studies reviewed and will receive mentoring support if they are less experienced. They also can submit the two mock case studies first, for feedback.

8. **Additional Volunteer Evaluators for Intermediate Skills Test:** ISWP contacted the individuals who served during the mentoring interventions – Bart, Megan and Tchai. Bart and Megan would be happy to volunteer; Tchai is considering the request.

   ISWP just received a new case study. Krithika will share it with Bart and Megan to see if they can score, with Elsje, Sue or Dietlind serving as secondary moderator.

9. **Other Business:** No other business was brought before the group.

10. **Next Call:** ISWP staff to send a poll requesting Subcommittee members’ availability for a call in May 2020.
Participants *(check mark indicates participation on call)*

- Sue Fry, Motivation Africa
- Sarah Frost, Motivation UK
- Ritu Ghosh, Mobility India
- Dietlind Gretschel, Rehab Lab
- Tamsin Langford, Motivation UK
- Abdullah Munish, Motivation Africa
- Patience Mutiti, Motivation Africa
- Jamie Noon, Independent Consultant
- Elsje Scheffler, DARE Consult
- Celia Stubbs, Motivation UK
- Mr. Sudhakar and Ms. Venilla, Mobility India
- Nekram Upadhyay, Indian Spinal Injuries Centre
- Maria Toro Hernandez, University of Pittsburgh
- Megan D’Innocenzo, University of Pittsburgh
- Mary Goldberg, University of Pittsburgh
- Jon Pearlman, University of Pittsburgh
- Nancy Augustine, University of Pittsburgh
- Krithika Kandavel, University of Pittsburgh

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