



The National Registry of Rehabilitation Technology Suppliers
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NRRTS Learning Design Document – EXAMPLE

Instructor's Name: [REDACTED] Credentials: OTR/ATP

Course Title: [REDACTED]

Level: ___Beginner XIntermediate ___Advanced

Course Description:

Power seating is often prescribed to reduce the risk of pressure ulcers, a potentially serious complication for individuals who use wheelchairs. There is much evidence suggesting the use of power seat functions will reduce the risk of pressure ulcers; however, clinicians sometimes have negative perceptions about the use of certain seat functions or are unaware of the functional outcomes that powered seating can provide. The purpose of this course is to examine current available power seat functions and discuss their functional impact on an individual's health, independence, and quality of life. Special emphasis will be placed on current research in power seat function usage and efficacy. Through evidence-based holistic assessment, attendees will better understand the medical and functional implications of each seat function.

Allotted Time: 60 minutes

List Learning Outcomes	Time Allotted	Instructional Materials Used	Method used Learning styles that are accommodated	Assessment Method and Performance Criteria
1. The participant will be able to identify 3 power seat functions and list the clinical indicators for each.	25 min	Power Point	Lecture/Poll/Photos - Auditory - Visual	Post-test at end of course Passing score is 70%
2. The participant will be able to list three potential medical or functional outcomes for tilt, recline and a combination tilt/recline system.	15 min	Power Point	Lecture/Demo-Video - Auditory - Visual	Post-test at end of course Passing score is 70%

3. The participant will be able to describe the use of anterior tilt for increased independence with functional activities.	20 min	Power Point	Lecture/Demo/Discussion - Auditory - Visual	Post-test at end of course Passing score is 70%
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References (minimum of 3, *published within the last 5 years):

1. Nilsson, L., Nyberg, P., & Eklund, M. (2010). Training characteristics important for growing consciousness of joystick-use in people with profound cognitive disabilities. *International Journal of Therapy & Rehabilitation*, 17(11), 588-95.
2. Mountain, A.D., Kirby, R.L., Eskes, G.A., Smith, C., Duncan, H., MacLeod, D.A., & Thompson, K. (2010). Ability of people with stroke to learn powered wheelchair skills: a pilot study. *Archives of Physical Medicine and Rehabilitation*, 91(4), 596-601.
3. *Dicianno, B; Morgan, A; Lieberman, J; Rosen, L. (2013). RESNA Position on the Application of Wheelchair Standing Devices: 2013 Current State of the Literature.
4. *Pressure Ulcer Prevention and Treatment Following Spinal Cord Injury: A Clinical Practice Guideline for Health-Care Professionals. Consortium for Spinal Cord Medicine. Administrative and financial support provided by Paralyzed Veterans of America. © Copyright 2014, Paralyzed Veterans of America. www.pva.org
5. *Gefen, A. (2014). Tissue Changes in Patients Following Spinal Cord Injury and Implications for Wheelchair Cushions and Tissue Loading: A Literature Review. *Ostomy Wound Management*. 60(2), 34-44.

To be completed by NRRTS staff:

Pre-requisites: The participant should have an introductory knowledge of wheelchair seating and mobility

ATP preparation content: ___

SMS preparation content: ___

Core Curriculum Area addressed: ___ Ethics ___ Funding and Public Policy ___ Medical Terminology/Vocabulary, anatomy and diagnoses
 ___ Seating and Mobility ___ Business Practices

___ Approved ___ Approved with Edits

Date: 9/1/16

Reviewer: Michelle L. Lange, OTR/L, ABDA, ATP/SMS

