







Transformational Culture Assistive Technology

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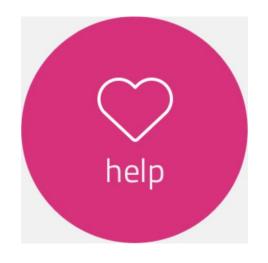






Who we are

- Umbrella organisation representing people & wide varieties of stakeholders.
- Website.
- Linked with UKABIF.
- Work closely with Headway & other charities like Neurological Alliance.
- Membership include patients & family members and carers of patients.















www.hawking.org.uk

The Theory of Everything (2014) - IMDb

www.imdb.com/title/tt2980516/

Upgraded: The talking technology that allows Professor Stephen Hawking to communicate with the outside world has been upgraded to allow for a worsening of the degenerative disease he suffers from

The world renowned physicist has for the past ten years composed his sentences one letter at a time using a twitch of his cheek to stop a cursor as it moves across an on-screen keyboard.

After he painstakingly crafts his sentences one word at a time, a computer attached to his wheelchair reads them out in the distinctive metallic voice for which he is known.

EMPOWERMENT

NO DECISION ABOUT ME WITHOUT ME

Shared Decision Making

No decision about me, without me. This process of empowerment can only be realised by involving people with disability fully in their own care, with decisions made in partnership with all concerned.

Shared Decision Making is a process in which patients, when they reach a decision crossroads in their health care, can review all the treatment options available to them and participate actively with their healthcare professional in making that decision.

With current, clinical and technological information i.e assistive technology relevant to their particular condition, about all the options available to them patients are helped to work through any questions they may have, explore the options available, and take a treatment route which best suits their needs and preferences.





TO ACHIEVE THIS, KBIF **ENCOURAGES THE DEVELOPMENT** OF NEW RELATIONSHIPS BETWEEN PATIENTS, CARERS AND CLINICIANS AND INDUSTRY WHERE THEY WORK TOGETHER, IN EQUAL PARTNERSHIP, TO MAKE DECISIONS AND AGREE A CARE PLAN AND PACKAGE.





IN ADDITION, WE WANT TO PUT SHARED DECISION MAKING NOT ONLY AT THE CARE LEVEL, BUT **ALSO AT THE STRATEGIC AND COMMISSIONING LEVEL, WITH** PATIENTS INVOLVED IN THE CO-**DESIGN, CO-COMMISSIONING** AND CO-PRODUCTION OF HEALTHCARE.





WITHOUT THESE CHANGES, WE CANNOT ACHIEVE THE REQUIRED TRANSFORMATIONAL CULTURE CHANGE TO SUPPORT SHARED DECISION MAKING





WORKING MODEL OF GOOD PRACTICE

COLLABORATION OF ACADEMICS, CLINICIANS, MANAGERS WITH INPUT FROM SERVICE USERS TO UNDERTAKE HIGH QUALITY APPLIED HEALTH RESEARCH FOCUSED ON NEEDS OF PATIENTS AND SERVICE USERS, SUPPORTING THE TRANSLATION OF RESEARCH EVIDENCE INTO PRACTICE IN HEALTH AND SOCIAL CARE.





DEVELOPMENT OF A THEORY OF RISK MANAGEMENT, A PICTURE OF RISK PRACTICE AND A NEW TOOLKIT FOR ASSESSING RISK TYPE OF RESEARCH: MIXED METHODS RESEARCH. **BACKGROUND & STRENGTH OF FVIDENCE: DESPITE EXCELLENT EFFORTS** FROM IT IS SOMETIMES AN UNSAFE SYSTEM.





PATIENT AND PUBLIC INVOLVEMENT (PPI) OPPORTUNITIES AT THE NIHR EVALUATION, TRIALS AND (NETS) STUDIES PROGRAMMES MEMBER OF THE PUBLIC TO JOIN THEIR PPI REFERENCE GROUP. THE REFERENCE GROUP WORKS COLLECTIVELY TO OPTIMISE THE INFLUENCE THAT PATIENTS, CARERS AND MEMBERS OF THE PUBLIC CAN HAVE.





Kent Brain InjuryForum

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Thank you