



Final report after IO4 Validation Sessions

Output: IO4

e-Training Platform

Contract No. 2019-1-RO-01-KA204-063947













1. Organisation of the session/s

The validation sessions included full implementation of the project methodology with the support of IO4 "e-Training Platform" in order to validate IO2 "Training Materials" and IO3 "Designed Practical Training Methodology". They were implemented between February and April 2022. They were conducted in all the countries of the consortium, resulting in 6 validation sessions. A total number of 130 EPRMs and caregivers participated in these sessions, most of them face-to-face. The participants were as follows:

SPAIN (GESMED) – 27 participants:

- 5 EPRMs
- 5 Informal caregivers
- 17 Formal caregivers

GERMANY (IAT) – 16 participants:

- 6 EPRMs
- 5 Informal caregivers
- 4 Formal caregivers

CROATIA (HURT) – 24 participants:

- 11 EPRMS
- 8 Informal caregivers
- 5 Professionals

GREECE (AUTH) – 21 participants:

- 9 EPRMs
- 5 Informal caregivers
- 7 Formal caregivers

SLOVENIA (IZRIIS) – 21 participants:

- 10 EPRMs
- 5 Informal caregivers
- 6 Formal caregivers

ROMANIA (CITST+ADIV) – 21 participants:

- 10 EPRMs
- 4 Informal caregivers
- 7 Formal caregivers

The validation sessions contained an introduction to the ERMAT project, a short presentation of the consortium, a presentation of the platform and its functionalities, and presentations of each DPTA. During the validation sessions, at least one group dynamic or practical activity was implemented in each country. The participants were encouraged to interact with each other through activities, and ask questions when they do not understand or want to find out more information about ATs.







2. Evaluation of the session/s

In order to evaluate the sessions, the materials, the ERMAT platform and to see if the 5 indicators of "Quality of the Project's Results" have been reached, several questionnaires have been applied to the participants. They were as follows:

- Initial Questionnaire for Seniors/Caregivers
- Questionnaire for DPTA 1
- Questionnaire for DPTA 2
- Questionnaire for DPTA 3
- Questionnaire for DPTA 4
- Questionnaire for DPTA 5
- Questionnaire for DPTA 6
- Final Questionnaire for Seniors/Caregivers

For these questionnaires there were used several established questionnaires, for example the SUS (System Usability Scale). However, there were also developed specific questions for the subject of the project.

The Initial Questionnaire had a sociodemographic part (3 items), a digital skills assessment (14 items), a competency for daily living assessment (only for EPRMs - 11 items), and a technology acceptance (6 items) and usage (11 items) assessment.

The DPTA questionnaires were similar to each other, the only difference being the subject presented. They contained a training assessment (5 items) and the short version of the User Experience Questionnaire (UEQ-S), with 7 items.

The final questionnaires comprised a training and platform assessment (11 items) and the System Usability Scale – SUS (10 items). The results are presented in the next section.

1.1. Evaluation of training, the materials and the platform

Participants, seniors and caregivers alike, highlighted the usability of the materials and platform. They also considered the materials interesting and averagely clear to very clear. The ATs and advice presented were considered quite applicable in a real-life scenario of a senior with reduced mobility. Training sessions were marked as well organised and structured.

The duration of the sessions was mostly considered good, with a few EPRMs saying that they would have liked it more compact. However, some professionals expressed their concerns about having to learn a lot of things, that they should have more sessions and that the training should be more intensive, in order for older adults and their caregivers to get familiarised with the techniques and the tools and to incorporate them in their daily routines.

Both caregivers and EPRMs marked the quality of the training as good or very good. Participants appreciated the group dynamic and practical activities implemented by the trainers, being most active when they interacted with each other. Games were highly praised.

The ERMAT e-Training Platform was perceived by the seniors and caregivers rather positively, with a good part of them considering that it is easy to use and they would like to use it frequently. Unfortunately, a lot of seniors had very low digital skills with technology and they needed support in







order to be able to properly use the platform. Besides this, there were several functionalities of the platform that were hard to use by the elderly, mostly because of visibility issues. We managed to pinpoint them with the help of the participants and fix everything there was to be fixed.

1.2. Awareness and motivation (indicator 1 from the proposal)

Most participants agreed or strongly agreed that the training improved their awareness and understanding regrading several concepts and ATs which can enhance their quality of life. Moreover, from the sessions, the older adults expressed their willingness to use some of the assistive technologies after the presentation was made and explained in detail.

The sessions established a much broader understanding of the different aspects to mobility. This was true especially for informal caregivers with no prior experience with assistive technologies, but also for seniors, who learned that there is a lot seniors can do for themselves to stay fit and autonomously. Therefore, there has been a much clearer picture after the sessions what can be done also with the help of ATs to support EPRMs' mobility and autonomy.

Percentage of EPRMs, Informal Caregivers and Professionals who are aware and motivated about the importance and possibilities of using ATs for improving the Quality of Life of EPRM, increasing their autonomy and community participation: Target indicator 70 %; Achieved 74%

Given the information presented above, it can be said that the 1st indicator of "Quality of the Project's Results" has been reached.

1.3. Improvement of competences for caregivers to enhance the quality of life of EPRM (indicator 2 from the proposal)

The majority of caregivers, be they informal or formal, agreed that their skills in selecting and using ATs have improved as a result of the training session. They showed a strong feeling of increasing their competencies as a result of the training. Of course, it is true that some caregivers, especially the professionals, did not consider that the training boosted their competences when it came to ATs, saying that they already knew a lot of the presented information.

Informal Caregivers and Professionals who improved their competences in facilitating that EPRM know and can use ATs improving their Quality of Life: Target indicator 70%; Achieved 78%.

Given the information presented above, it can be said that the 2nd indicator of "Quality of the Project's Results" has been reached.

1.4. Assistive Technologies for EPRM (indicator 3 from the proposal)

Participants knew about a lot of ATs, mostly because they use them, or because they have seen them used by their family / friends / acquaintances. Mobility ATs were the most boring ones, as the majority of seniors and caregivers already knew what they are and what they are used for. However, this was not true for mechanised walking ATs or for less known ATs, such as shower bars, reacher-grabbers and adapted utensils for caring for personal appearance and hygiene (button hooks, adapted nail clippers and stocking dressing aids were the most popular).







EPRMs were happy to hear about new ATs and seemed to be interested in purchasing some of them. They asked about the places from where they could buy them and about their prices.

Regarding the ICT tools and applications, participants admitted that they are useful and they were impressed by the number and the kind of different types of existing tools, but especially older adults noted that they need further training and repetition in order to use them.

EPRMs who have identified and matched at least one AT that can address their main daily life routines (feeding, hygiene and clothing, mobility at home and outside, prevention): Target indicator 90%; Achieved 100%.

Given the information presented above, it can be said that the 3rd indicator of "Quality of the Project's Results" has been reached.

1.5. Digital and technological skills (indicator 4 from the proposal)

The majority of seniors had very basic digital skills, owning a basic phone or smartphone, but being unable or requesting assistance in order to access the Internet. They also had low confidence in their own skills. Caregivers were more open to technology and the advantages it could bring, a good part of them being able to properly use a smartphone or a laptop.

The EPRM found the training very useful and increased their confidence in searching for more ICT tools that can help them. However, the majority of EPRMs agreed that they do not feel competent to use the E-Platform and would personally not use it, but they would recommend it to their caregivers. Also, they expressed that now they are more interested in actually purchasing and using some of these technologies.

The results from the questionnaires concerning the professionals and informal caregivers showed that they feel more confident in their digital skills as a result of the training received. They believed that the training will help them use technology in the future.

EPRM, Informal Caregivers and Professionals who showed acquisition of digital and technological skills through the use of e-Training Platform and ATs, like Apps, ICTs etc. that facilitate their self-care and autonomy: Target indicator 50%; Achieved 55%.

Given the information presented above, it can be said that the 4th indicator of "Quality of the Project's Results" has been reached.











1.6. Improvement of peer support for EPRM (indicator 5 from the proposal)

Participation on the validation session has facilitated participants to make connections and share their experiences. Having a peer while developing skills showed to be beneficial as they could share frustration when things were hard, but also a success when things were good.

Many elderlies felt some sort of empowerment in helping their peers out. This also seemed to be a great deal because it displayed a way of gaining more autonomy from caregivers who don't always have time to be there when needed. The sessions were fruitful, because the experience worked as a bonding exercise and EPRMs realized that they are not alone. They were more sensitive to their peers' problems as session progressed and seemed willing to help each other and produce solutions.

In at least 3 out of the 6 countries of the consortium, trainers observed EPRMs visibly exchanging contact information, such as phone numbers or social media accounts, when the validation sessions ended.

EPRM showing acquisition of skills for the development of Peer Support activities with other EPRM, or at least agreeing that it is important to help their peers: Target indicator 90%; Achieved 100%.

Trainees from the validation sessions who showed an achievement level above the minimum established in the Training Program. Target 70%; Achieved 85%.

Given the information presented above, it can be said that the 5th indicator of "Quality of the Project's Results" has been reached.

1.7. Modifications for the e-Training platform

According to O4–A7, the feedback obtained from the first 3 validation sessions in O4-A5 had to be used to improve the ERMAT platform. The improved platform had to be tested in next 3 validation sessions. The first 3 validation sessions were organised by GESMED, IAT and AUTH, from the middle of February until late March. There were several necessary modifications when it came to the platform: adding the possibility of downloading (and printing) the materials, adding a setting for font size, giving the trainers the possibility of adding new topics on the forum, improving visibility in the contact form and replacing the existing pictograms for materials with bigger, more visible ones. All these changes were done by the middle of April, when the last 3 validation sessions began.











Annex 1 – Pictures taken during the validation sessions (multiple countries)

















































Imprint

Project: Development of a training program for the improvement of quality of life of elder persons with reduced mobility through the exploitation of assistive technologies – ERMAT.

Coordinator: IT Centre for Science and Technology (CITST)

References:

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ERMAT - Consortium

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