CANDDID

IMPROVING ACCESS TO HEALTHCARE FOR INDIVIDUALS WITH INTELLECTUAL DISABILITY USING VIRTUAL REALITY FOR BETTER ACCESS

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Helping people to be

HOW DID IT ALL START?

Autistic person with intellectual disability with high levels of anxiety

Struggle in attending healthcare appointments

Interest in technology

Nursing initiative to look for solutions using technology

Is it possible to use virtual reality for high fidelity simulation of a healthcare appointment?

WHAT IS THE PROBLEM THAT WE WERE TRYING TO ADDRESS?

People with an intellectual disability and health inequalities

Inequalities in accessing and receiving healthcare

Significant variation in the uptake of annual health checks

Difficulties experienced in attending healthcare appointments

CURRENT APPROACHES

1

Reasonable adjustment checklists and hospital passports 2

De-sensitisation methods significantly improve access to healthcare 3

Approaches such as social stories using pictures show positive outcomes

4

However, these approaches have their limitations e.g. creating unique high-fidelity simulation

COULD VIRTUAL REALITY
BASED APPROACHES BE
USED TO IMPROVE
ACCESS TO HEALTHCARE
FOR PEOPLE WITH
INTELLECTUAL
DISABILITY?



THE DEVELOPMENT OF VR





HOW TO UTILIZE VR FOR OUR CLIENT GROUP

Challenges:

Trial and error

New skills new technology

Creating immersive experiences – initial time to complete.

Tailor to individual needs

Improving access for all

VR TOUR DEVELOPMENT

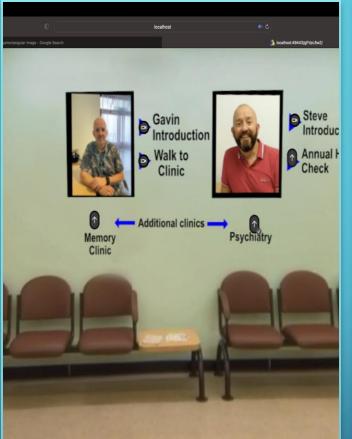
- 360 IMAGES OF ENVIRONMENTS CORRECT LIGHTING
- POSITIONING OF THE CAMERA
- STITCHING IMAGES CREATING 360 BALANCING HORIZON
- EDITING IMAGES REMOVING ITEMS ADDING TEXT + MENUS
- MERGING IMAGES COLOUR CORRECTION
- IMAGE FORMATS DIRECTIONS PHOTO/VIDEO BOARDS
- TOUR BUILDING CONECTING THE IMAGES INTERACTION MENUS
- VIDEO PRODUCTION + EDITING BACKGROUND SOUND





360 VIDEO CAPTURE







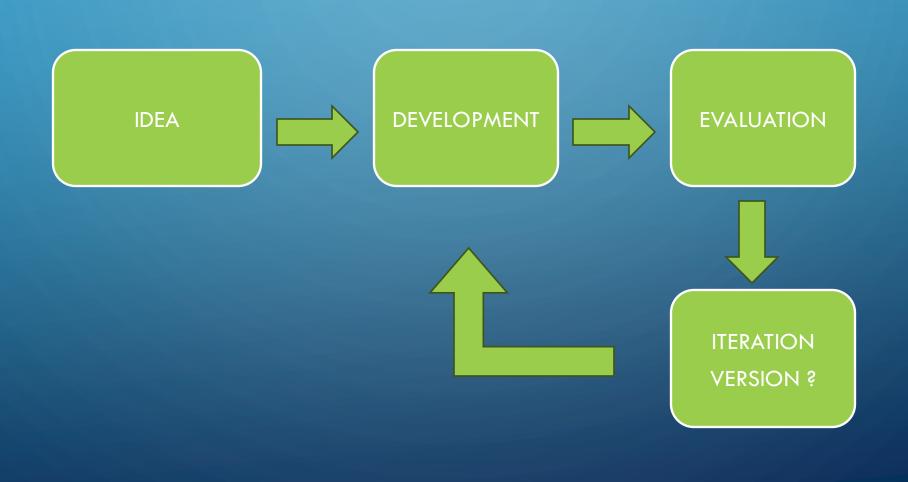
360 VITUAL TOUR CAPTURE

3 THINGS ABOUT YOU

THE BEST TOOL WE HAVE CREATED



STUDY PROCESS



INVOLVING PEOPLE WITH LIVED EXPERIENCE

• 11 people with intellectual disability, 2 parent carers & 4 formal carers.

WP 1 Involvement

- Provided an opportunity to share thoughts and ideas.
- Understand the barriers and enablers.
- Facilitated by ID nurses

WP 2 Coproduction working groups

- Developing accessible materials
- Defining/selecting healthcare environments
- Discussions about the challnges of accessing healthcare.
- A lack of reasonable adjustments.

WP 3
Development of he VR intervention

- Liaising with healthcare practitioners/managers
- Creating immersive videos testing and re-testing.
- Obtaining agreement on content, interactabilty & engagement.
- Move to pilot VR intervention

NEXT STEPS

- On-going development technology refining products for ease of use and for higher fidelity
- Research and evaluation feasibility for a RCT or a real-world pragmatic research approach
- Consider other possible applications such as: psychosocial dementia interventions, anxiety and sensory based interventions, desensitisation.

