

Statement on COVID-19 Vaccination for People Working with and Using Assistive Technology

December 14, 2020

In many countries, the COVID-19 pandemic has disrupted services for assistive technology¹ (prosthetics, orthotics, wheelchairs, etc.), adversely affecting vulnerable persons with disabilities and/or limited mobility, and the need was immense already. Over 1 billion people need at least one form of assistive technology now and this is expected to rise to 2 billion by 2050. Meanwhile, over 90% do not have access to the assistive technology they require.

Vaccination campaigns are starting and the first elderly people are due to be vaccinated this month. However, national vaccination plans may not yet include all people using and supporting the provision of assistive products and services as a priority group, thereby putting healthcare providers and recipients at risk.

In most countries, assistive technology services are provided by a mix of public and private sectors. Since the first phase of vaccinations typically focuses on “front-line healthcare workers”, there is a risk of missing professionals in prosthetics, orthotics, wheelchairs, therapy, etc. who are not employed in public hospitals. Governments should include these healthcare professionals for early vaccination since assistive technology services are intimate, requiring close physical contact to properly provide an appropriate device.

Germany is providing a good example of a strategy that strengthens the role of assistive technology service providers. A federal law was recently passed to improve health and nursing care (GPVG), beginning in January 2021. This law underlines the considerable significance of assistive technology provision for maintaining public health and ensuring quality of life despite restrictions due to a disability, even during the COVID-19 pandemic. The law also includes reimbursement of protective equipment for extra hygiene measures by the statutory health insurance (removing a financial barrier for many elderly care and small facilities).

Previously, in 2016, Germany passed a federal uniform regulation to define critical infrastructure. In healthcare, this involves immediate life-sustaining medical products (commodity manufacturing and delivery); however, assistive technology providers were not specifically mentioned, leaving room for interpretation. Since further regulations are under the responsibility of the 16 federated states, it was these states that supported assistive technology providers during the pandemic with financial assistance and exemption regulations for relevant infrastructure. The new law will redeem this ambiguous situation.

¹ Assistive technology (AT) is an umbrella term covering systems and services that deliver assistive products. Assistive products' primary purpose is to maintain or improve an individual's functioning and independence and to facilitate participation, including devices, equipment, instruments, and software; especially designed and produced or generally available (e.g., wheelchairs, eyeglasses, hearing aids, prostheses, assistive digital devices, software).

INTERNATIONAL SOCIETY FOR PROSTHETICS AND ORTHOTICS



By the end of the year, the German statutory standing vaccine commission (STIKO) will provide recommendations on how to prioritize vulnerable groups and beneficiaries in the roll out of COVID-19 vaccine programs. Based on this groundwork, assistive technology providers and service users should be considered as an integral part of public health care providers.

Globally, the important role of all people involved with assistive technology services needs to be recognized and should lead to these healthcare professionals, whether in the public or private sector, and people who receive their services to be included in early national vaccination plans. Early vaccination will not only enhance professional and patient safety, but also allow facilities to return to pre-COVID-19 treatment levels, thereby starting to meet the global service backlog that is affecting mobility, health, and quality of life.

Please email comments to ISPO at headoffice@ispoint.org