## Clinician Tip Sheet: Maximizing Use of a Standard Power Wheelchair Joystick

While a standard joystick is the most commonly used way to operate a power wheelchair, successful use of a joystick to drive may be impacted by multiple factors. So how might clinicians support clients with limited or declining function to maintain use of a standard joystick? Possible suggestions outlined below are presented in a base up approach to support clinicians to strategically investigate and resolve a variety of issues. These suggestions may be a starting point, however, clinicians are encouraged to reach out to other resources such as local vendors and seating teams for support and expertise as needed.

Power Wheelchair Base	
Goal	Questions to Ask
Ensure the power wheelchair base is working efficiently.	<ul> <li>On a smooth, flat surface, does the wheelchair travel on a straight path without requiring many extra joystick corrections? Or does the wheelchair drift or pull to one side?</li> </ul>
0 ,	Possible Interventions
	<ul> <li>Ensure both wheelchair motors are in good repair and working in unison, not pulling the wheelchair off course.</li> </ul>
	<ul> <li>Ensure wheelchair tires and bearings are in good repair, not pulling the wheelchair off course.</li> </ul>
	<ul> <li>If the power wheelchair has tracking technology/steer correction, ensure it is activated. See appendix for information on tracking technology.</li> </ul>

Positioning	
<b>Goal #1:</b> Ensure the client is positioned with a strong base of support to ensure consistent joystick access.	<ul> <li>Questions to Ask</li> <li>Does the client feel secure when driving? (i.e., not leaning/sliding onto or away from joystick, not getting jostled on uneven terrain)</li> <li>Is the client's visual field maximized for driving? (i.e., able to see ahead, scan, and shoulder check)</li> <li>Are the client's hands free for accessing the joystick? (i.e., not trying to maintain balance by arm or elbow "propping" or "airplane" grip on armrests)</li> <li>Does the client feel supported in both upright and tilted positions? Or does tilting the client shift him onto or away from the joystick?</li> <li>Is the client's tone controlled or does tone activate with the exertion of driving, negatively impacting access to the joystick?</li> <li>Ensure the client's pelvis is stable (via frame set up, cushion, pelvic belts).</li> <li>Ensure the client's tone is managed (via frame set up and/or seating, positioning joystick and display where tone is not activated).</li> </ul>





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Positioning	
<b>Goal #2:</b> Ensure the client's arm, wrist, and hand are positioned to ensure consistent joystick access.	<ul> <li>Questions to Ask</li> <li>Are the client's arm, wrist, or hand position causing them to push into the joystick or reach for it?</li> <li>Does increased tone with exertion, uneven terrain, or repositioning in tilt push the client's arm, wrist, or hand into or away from the joystick?</li> <li>Possible Interventions <ul> <li>Ensure the joystick is placed where the client's arm, wrist, and hand are in a supported and relaxed position for driving (not too far, close, high, low).</li> <li>Consider adjustment of armrest height, a full or half tray, or medial or lateral blocks to support the arm, wrist, or hand in a neutral position.</li> <li>Consider a midline (centre) or offset (left or right) joystick position to improve access.</li> </ul> </li> </ul>
<b>Goal #3:</b> Maximize the client's hand and finger function for joystick use.	<ul> <li>Questions to Ask</li> <li>Is the client able to maintain hold on the joystick gimbal without slipping off when accessing all directions? Has this also been tried in tilt?</li> <li>Is the client able to release hold on the joystick gimbal at will? Or do they get "stuck?"</li> <li>Possible Interventions</li> <li>Ensure the client's hand and finger range of motion and strength are matched to the appropriate joystick gimbal end.</li> <li>Consider a ball, knob or goal post end, rather than a standard gimbal end to improve access. See appendix for information on gimbal ends.</li> </ul>

Programming (See appendix for information on programming)		
Goal: Ensure power wheelchair programming set up is matched to client's abilities and environments.	<ul> <li>Questions to Ask</li> <li>Does the wheelchair move forward smoothly or "jerky"?</li> <li>Does the wheelchair turn with control or "whip" the client around?</li> <li>Does the wheelchair stop in a timely manner or "pitch" the client forward?</li> <li>Does the client feel in control or that the wheelchair is "getting away from them?"</li> <li>Is the client able to effectively access 360 degrees of movement?</li> <li>Is force and distance required to active the joystick matched to the client's strength and range of motion?</li> </ul>	
	<ul> <li>Possible Interventions</li> <li>Ensure programming parameters have been reviewed to match the client's abilities.</li> <li>Review all basic parameters are set to the client (min and max speeds as well as accelerations and deceleration in forward, turns, reverse; power).</li> <li>Review joystick sensitivity (turn sensitivity, tremor dampening, centre deadband, joystick throw, axis direction). See appendix for information on these programming parameters.</li> </ul>	







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Environmental and Occupational Fit		
Goal: Ensure a good "fit" or match between the client, environment, and occupation to maximize drive access	<ul> <li>Questions to Ask</li> <li>Are other areas of health, vision, perception, cognition or behavior the actual issues impacting the client's ability to drive?</li> <li>Does the client's physical environment make driving a power wheelchair challenging?</li> <li>Has the client had adequate training on the use of a power wheelchair?</li> <li>Have the client's caregivers had adequate training on how to set up the power wheelchair?</li> </ul>	
	<ul> <li>Possible Interventions</li> <li>Ensure assessment and intervention of other client related factors to decrease impact on driving (i.e., vision testing and getting new glasses).</li> <li>Consider environmental adaption and modification, if needed.</li> <li>Provide client and caregiver further training, if needed.</li> </ul>	

Appendix	
Tracking technology/steer correction	<ul> <li>Tracking technology uses either gyroscopes or voltage meters to assist correcting the client's direction of travel without requiring them to make compensatory adjustments themselves.</li> <li>It may help over difficult terrain or on different inclines where the chair would normally stray from its intended path.</li> <li>It may reduce the number of joystick movements as well as overall time for the client to get from point A to point B; this may have benefits related to decreasing motor effort, fatigue, and user frustration.</li> <li>It does not come standard on all power wheelchairs and requires clinical justification for funding through AADL, so how can a clinician tell if a power wheelchair has this feature?</li> <li>Sometimes the technology name will be marked on the wheelchair serial number, they should be able to see if the feature was included in the original order.</li> </ul>
Joystick gimbal ends	<ul> <li>Joystick gimbal ends come in all sorts of shapes, sizes, and textures to support functional control of a joystick. Gimbal ends allow adaptation based on the client's hand/finger range of motion, strength, and tactile preferences.</li> <li>If the weight of a gimbal end is too heavy, it can pull the joystick off axis causing the chair to "error" or "fault" particularly when the wheelchair is in a tilted position.</li> <li>The opening in the gimbal end is often specific to the wheelchair brand, so gimbal ends may not always be transferable between wheelchair brands.</li> <li>Joystick gimbal ends can be obtained from local vendors or manufacturer websites.</li> </ul>
Power wheelchair programming	Programming involves adjusting parameters in a power wheelchair's electronics     (software) to improve how the chair drives and responds to the client's input commands     in light of the client's abilities and their environments of use.



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Appendix		
	<ul> <li>Power wheelchairs come from the factory with pre-set programming or trial chairs may have been programmed differently for other clients, so it is important that programming is reviewed for the current client at the outset.</li> <li>Programming requires access to manufacturer specific hand held programmers or computer programs. Although some sites choose to purchase their own, programming takes knowledge and practice, so contacting a vendor or manufacturer representative for support is recommended.</li> <li>To ensure safety, it is recommended that the client and/or caregivers try the chair with clinician supervision after programming changes have been made to check that the chair performs as expected.</li> </ul>	
Adjusting programming parameters specific to joysticks	<ul> <li>A standard joystick provides the client with proportional drive access. This means the client has 360 degree directional control and graduated or variable speed control of the wheelchair. Like a gas pedal, the further (deflection) and harder (force) the joystick is pushed the faster the wheelchair will go and vice versa.</li> <li>Reviewing basic programming parameters is always recommended.</li> <li>For clients with high tone, tremors, decreased hand/finger strength or range of motion, other parameters involved in proportional control such as tremor dampening, centre deadband, joystick throw, and axis direction may also be reviewed.</li> <li>What do these terms mean?</li> <li>Sensitivity/tremor dampening: defines the amount of movement necessary to activate the drive control.</li> <li>Centre deadband: defines how far the joystick must be moved from centre for a command to be recognized; the value corresponds to the diameter of a circle around the joystick throw: defines how far the joystick must be moved in each direction to generate a full speed command.</li> <li>Axis direction/assign direction: alters the directional commands of the joystick (i.e., pulling backward on the joystick makes the chair go forward).</li> </ul>	

# This resource is not meant to be prescriptive. Rather, it is meant as a general resource for clinicians to use with clinical reasoning skills to determine optimal solutions for clients.

References:

Canadian Seating and Mobility Conference-Power Wheelchair Function and Performance, Amy Bjornson, 2006 Clinical Corner Sunrise Medical-Specialty Controls for Power Wheelchairs, Sheilagh Sherman, 2013 Mobility Management-Drive Controls and Programming a Power Chair, Jay Doherty, 2012 Quantum Technical Institute 2013





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