

Indicators for Wheeled Mobility & Postural Management Level 1 Credential

Therapists working at this level may undertake assessments and consider equipment for people who:

1. Can self-propel, or use their foot to push (punt), a standard manual wheelchair¹ and be safe and able to do essential daily tasks.
2. Require an attendant propelled wheelchair or buggy to meet their essential mobility and/or postural needs.

NB: Assessment by a Wheeled Mobility & Postural Management Level 2 EMS Assessor, should be considered for children who are, or have the potential to be, full time active wheelchair users who independently self propel a manual wheelchair as their primary means of mobility².

3. Can use a standard proportional joystick on a power wheelchair and be safe and able to do essential daily tasks and is not a candidate for an ultra lightweight manual wheelchair for self-propelling.
4. Have every day essential *functional needs* such as transfers, managing fatigue, toileting, or achieving ground clearance that may be assisted with the following features:
 - o Tilt and/or recline on a manual wheelchair (or buggy) for adults and young children for management of everyday functional needs or for young children and infants who are likely to require these features due to their age and physical maturation.
 - o Power tilt on a power wheelchair for adults and children for management of everyday functional needs.

NB: The needs of children and adults who have complex seating needs to position and support their pelvis, trunk and head and an essential need for tilt or recline for *postural control* and positioning require the expertise of a Wheeled Mobility and Postural Management Level 2 EMS Assessor.

5. Have pelvic positioning needs that can be met through adjustments to readily available cushions e.g. can achieve 70 degrees of hip flexion, has a flexible pelvic obliquity.
6. Are at risk of, or have developed, pressure areas on their seated surface.
7. Are able to achieve an upright and symmetrical seated posture with some generalised trunk support and be safe and able to do essential daily tasks.

¹ Standard manual wheelchair – refers to manual wheelchairs with the following configuration capabilities - rear wheel axle and castor housing adjustments to allow changes in front and rear seat to floor heights and minimal adjustments to horizontal rear axle position. Includes paediatric and bariatric manual wheelchairs with similar features to standard manual wheelchairs with the exception of weight limits. Excludes fully configurable manual wheelchairs.

²The set up and prescription of paediatric manual wheelchairs for active, self-propelling children needs to be specific to prevent secondary complications and enhance efficiency. The dimensions of children, developmental and functional goals make this more complex than with adults and the correct configuration is more difficult to achieve in a standard manual wheelchair

AND

8. Do not have a rapidly deteriorating disability (significant functional loss expected within 6 months) likely to require full trunk support, dynamic seating options e.g. tilt and /or alternative control options for power mobility. This would require the expertise of a Wheeled Mobility & Postural Management Level 2 EMS Assessor.

This credential will also enable EMS Assessors to assess for and request static seating solutions for eligible people, including indoor high – low bases that interface with buggy seating systems, and car seats.

An optional Lying module may be completed by EMS Assessors needing to assess for and request night time positioning and lying equipment for eligible people.

See also Clinical Indicators for Wheeled Mobility and Postural Management Level 2 Credential and the complete Wheeled Mobility and Postural Management Level 1 and Level 2 Credential Competencies.