

Competency Framework

Wheeled Mobility and Postural Management

Introduction

The Wheeled Mobility and Postural Management Credential recognises that therapists undertaking assessment for specialist wheeled mobility and seating, and postural management require specialist knowledge and training. This knowledge allows the therapist to provide appropriate advice and recommendations related to wheeled mobility, seating and postural management solutions.

Level 1 Credential

Level 1 Credentialed Assessors may assess 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.

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.

² The 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.

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.

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.

Level 2 Credential

Level 2 Credentialed Assessors may assess people who:

1. Cannot self-propel, or use their foot to push (punt), a standard manual wheelchair³ due to weakness, pain, fatigue or abnormal movement patterns and could be safe and able to do essential daily tasks with an ultra lightweight manual wheelchair.
2. Have unusual physical dimensions which cannot be accommodated in a standard manual or powered wheelchair.
3. Cannot safely undertake essential daily tasks, or be cared for safely in their home, without additional seating functions such as power seat elevation, tilt, recline, stand and/or leg elevate (as per point 4 Wheeled Mobility & Postural management Level 1 credential).
4. Have limited hand function or control of movement and cannot access powered mobility via a standard proportional joystick.

³ 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. Paediatric and bariatric manual wheelchairs with similar features to standard manual wheelchairs with the exception of weight limits are included but fully configurable manual wheelchairs are excluded.

5. Have fixed postural asymmetries and limitations in joint range which cannot be accommodated in readily available cushions or back supports with generalised lateral shaping.
6. Have poor sitting ability due to weakness or abnormal movement patterns/tone, **and** require specifically placed trunk and/or head supports for safety, **or** to maximise their functional body position for essential daily tasks, **or** to minimise deterioration of their posture.
7. Have a rapidly deteriorating disability (significant functional loss expected within a period of 6 months) likely to require full trunk support, dynamic seating options e.g. tilt, and/or alternative control options for power mobility.
8. Are at risk of, or have developed, pressure areas on their seated surface which would not be lessened or resolved with the implementation of pressure management strategies and the use of pressure redistribution cushions.
9. Are children who are independent and functional, active all day manual wheelchair users (or could be with appropriate equipment) indoors and in the community.
10. Require custom fabricated solutions due to their significant postural issues that cannot be accommodated in readily available backrests and/or cushions. **NB: The Assessor needs to have attained the optional endorsement for Complex Custom Fabrication under Wheeled Mobility & Postural Management Complex credential for this type of assessment.**

Requirements for Wheeled Mobility and Postural Management Credentials

Level 1 Credential	Level 2 Credential
Occupational Therapist or Physiotherapist with a current Annual Practising Certificate	Occupational Therapist or Physiotherapist with a current Annual Practising Certificate
Completed EMS Core Module	Holds a Level 1 Credential in Wheeled Mobility and Postural Management
Successful completion of a Ministry approved Wheeled Mobility and Postural Management Level 1 Learning and Development Programme (including workshop attendance)	Successful completion of a Ministry approved Wheeled Mobility and Postural Management Level 2 Learning and Development Programme (including workshop attendance)
	Successful case study review by the Wheeled Mobility Postural Management Level 2 Credentialing Panel
Optional endorsement for Wheeled Mobility and Postural Management – Lying	Optional endorsement for Wheeled Mobility and Postural Management – Complex Custom Fabrication
Successful completion of Ministry approved Lying endorsement Learning and Development Programme	Successful completion of Ministry approved complex Custom Fabrication requirements

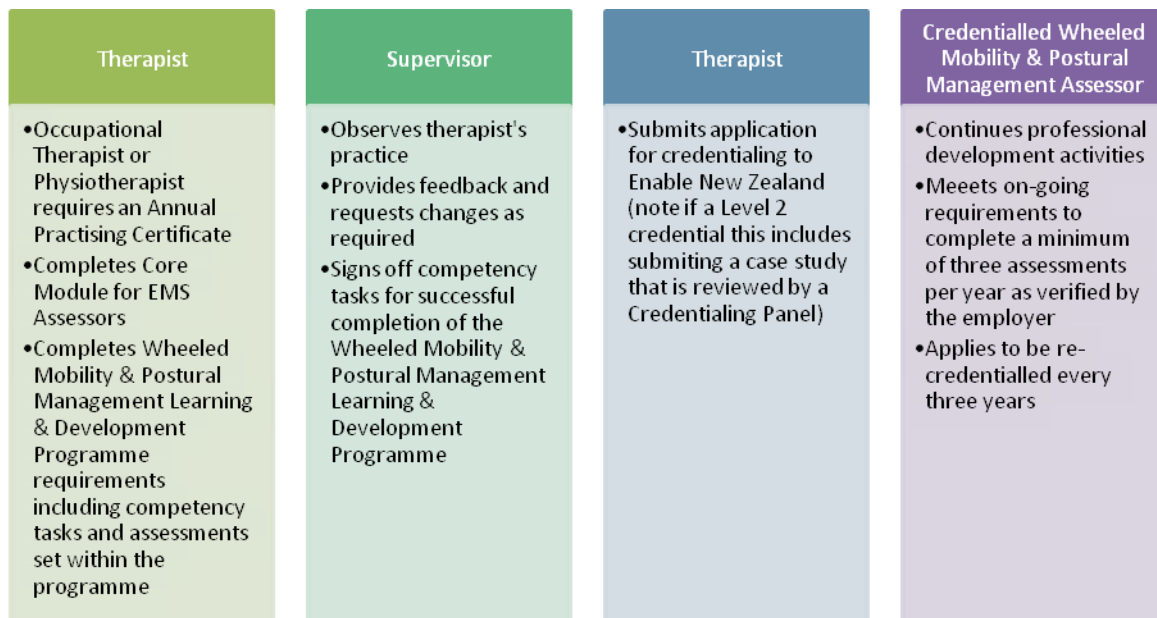
Learning and Development Programme information is available here:

- [Learning & Development Programme for Wheeled Mobility and Postural Management Level 1 Credential](#)
- [Learning & Development Programme for Wheeled Mobility and Postural Management Level 2 Credential](#)

Supervisor

Each assessor will require a Supervisor under the EMS Accreditation Framework. If your employer cannot provide a suitable Supervisor or you are self-employed please contact Enable NZ who may be able to assist in identifying a supervisor in your area

Therapists seeking to be credentialed for the first time or after a three year gap in practice will follow the process as outlined in the following diagram:



Wheeled Mobility and Postural Management Level 1 - credential competencies

Description	Competencies Required	Demonstrated by
<p>Wheeled Mobility & Postural Management Level 1 Credential enables the assessor to assess people who:</p> <ol style="list-style-type: none"> 1. Can self-propel, or use their foot to push (punt), a standard manual wheelchair⁴ and be safe and able to do essential daily tasks. 2. Require a wheelchair or buggy for transport, behavioural/medical issues & may also require seating as for 4, 5 and 6. 3. Can use a standard proportional joystick on a rear wheel drive or mid wheel drive powered wheelchair without powered seating options and be safe and able to do essential daily tasks and are not candidates for an ultra lightweight manual wheelchair for self-propelling. 4. Have pelvic positioning needs that can be met through adjustments to readily available cushions e.g. can achieve 70 degrees of hip flexion, have a flexible pelvic obliquity 5. Are at risk of, or have developed, pressure areas on their seated surface. 6. 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. 	<p>Knowledge:</p> <ul style="list-style-type: none"> • Understands the biomechanics of pelvic positioning and the effect of position on function. • Understands the principles of basic wheelchair configuration and prescription appropriate to area of practice. • Can identify contributing factors / risks for development of pressure areas. • Can identify contributing factors / risks for development of musculoskeletal deformity. • Understands indicators for powered mobility and programmable features for proportional joystick controls. • Is aware of clinical indicators for referral to an assessor for people with complex (level 2) wheeled mobility & postural management needs. <p>Skill:</p> <ul style="list-style-type: none"> • Demonstrates sound assessment processes where parameters of equipment solutions reflect the identified problems, needs and goals of the disabled person showing consideration of social, functional, environmental and developmental requirements. • Can complete a supine and 	<p>Completion of a Ministry approved Learning and Development Programme for Wheeled Mobility and Postural Management Level 1 Credential. This ensures assessors can demonstrate an ability to:</p> <ul style="list-style-type: none"> • Use knowledge gained to independently complete 3 physical assessments in supine and sitting as observed by supervising therapist or mentor. • Use knowledge of the impact of wheelchair configuration on positioning and function to adjust and prescribe a standard manual or powered wheelchair with 3 people and can demonstrate this to supervising therapist or mentor. • Present rationale for pressure management strategies for a specific person to supervising therapist or mentor. • Use knowledge gained to independently complete 3 physical assessments in supine & sitting & can describe the rationale and equipment requirements to correct or accommodate for any joint limitations as observed by supervising therapist or mentor. • Use knowledge gained to provide rationale for prescribing a powered wheelchair as discussed via client file with supervising therapist.

⁴ 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.

Description	Competencies Required	Demonstrated by
<p>AND</p> <ul style="list-style-type: none"> Do not have a rapidly deteriorating disability (significant functional loss expected within 6mths) likely to require full trunk support, dynamic seating options e.g. tilt-in-space and /or alternative control options for powered mobility. This would require the expertise of a Wheeled Mobility & Postural Management Level 2 credentialed assessor. <p>AND</p> <ul style="list-style-type: none"> Are not children who are independent and functional, active manual wheelchair users (or could be with appropriate equipment) indoors and in the community. This would require the expertise of a Wheeled Mobility and Postural Management Level 2 credentialed assessor. The set up & prescription of paediatric manual wheelchairs for active self-propelling children needs to be specific to prevent secondary complications & enhance efficiency. Dimensions & developmental goals make this much more difficult than with adults. <p>This credential will also enable assessors to access static seating solutions and car seats.</p> <p>See also Wheeled Mobility and Postural Management Level 2 Credential competencies.</p>	<p>sitting evaluation for people with wheeled mobility and seating needs that are not defined as complex.</p> <ul style="list-style-type: none"> Can utilise adjustable features of readily available cushions to meet positioning requirements. Can utilise simple backrests to provide generalised trunk support. Can re-configure (or advise a technician how to reconfigure) standard manual and powered wheelchairs to meet the person's mobility and positioning needs. 	<ul style="list-style-type: none"> Use knowledge gained at training to make appropriate referrals or request assistance from wheeled mobility & postural management Level 2 credentialed assessors. Facilitate initial assessment interviews using effective assessment and communication skills to collect information which reflects a holistic, client centred approach as observed by supervising therapist or mentor with 3 clients. Demonstrate ability to handle and position the client safely during a supine and sitting evaluation to correctly identify and locate key anatomical landmarks of the pelvis, record range of movement at hips and knees and record measurements as observed by supervising therapist or mentor with 3 clients. Complete a product evaluation of 6 cushions and client photographs in final solution. Complete a product evaluation with 3 backrests and client photographs in final solution. Independently adjust leg rest and armrest heights, seat rake and seat to floor heights as demonstrated to supervising therapist or mentor with 3 clients.
<p>Optional Endorsement: Lying Enables the assessor to assess people who:</p> <ol style="list-style-type: none"> Are at risk of, or have, persistent postures of asymmetry in lying. Require frequent re- 	<p>The knowledge and skill required for the Wheeled Mobility and Postural Management Level 1 Credential is a pre-requisite for the Lying endorsement.</p> <p>In addition, the following competencies are required:</p>	<p>Completion of the Wheeled Mobility and Postural Management Level 1 Credential.</p> <p>Completion of Ministry approved Wheeled Mobility and Postural Management</p>

Description	Competencies Required	Demonstrated by
<p>positioning through the night due to discomfort from unsupported positions or other issues.</p> <p>3. Require a supported lying position through the day to achieve functional positioning for everyday activities.</p>	<p>Knowledge:</p> <ul style="list-style-type: none"> • Understands the rationale of a 24 hour approach to postural management. • Can refer to evidence based practice to identify people who would benefit from night-time positioning and a 24 hour approach to postural management. • Is aware of, and knows how to manage, risks when introducing night-time positioning. • Can identify the parameters of lying equipment required to minimize the development of musculoskeletal deformities and/or to support a functional lying position. • Has an in-depth knowledge of sleep systems and other lying equipment options available. <p>Skill:</p> <ul style="list-style-type: none"> • Can complete a lying assessment and utilize additional assessment tools as needed. E.g. Chailey Assessment of Lying Ability, sleep diary. • Can configure equipment to support people in lying to correct or accommodate postural asymmetry. • Can work in partnership with the person and all those involved in their care to ensure an integrated approach to postural management is facilitated. 	<p>(Lying) Learning and Development Programme. This ensures assessors can demonstrate an ability to:</p> <ul style="list-style-type: none"> • Use knowledge gained to provide information about the importance of positioning in lying to clients and those involved in their care. • Provide appropriate intervention for clients. • Utilise a Postural Care Summary as provided by the Ministry contracted provider. • Provide positioning solutions in lying that meet the positioning and/or functional needs of the person. • Utilise lying options to provide a cost-effective solution to meet the positioning and/or functional needs of the person in lying. • Complete a lying assessment that identifies any loss of range of movement and includes information of unsupported lying position and how it could be improved. • Describe rationale for equipment parameters to supervising therapist or mentor. • Provide evidence of communication with relevant others during the assessment process. <p>The Lying endorsement does not require completion of competency tasks other than attendance at the 2 day Learning and Development Programme for Lying. It is recommended that Supervising Therapists use case discussions and review of client files to ensure assessors demonstrate competence in their work.</p>

Wheeled Mobility and Postural Management - Level 2 credential competencies

Description	Competencies Required	Demonstrated by
<p>Wheeled Mobility & Postural Management Level 2 credential enables the assessor to assess people who:</p> <ol style="list-style-type: none"> Cannot self-propel, or use their foot to push (punt), a standard manual wheelchair due to weakness, pain, fatigue or abnormal movement patterns however could be safe and able to do essential daily tasks with an ultra lightweight manual wheelchair. Have unusual physical dimensions which cannot be accommodated in a standard manual or powered wheelchair. Cannot safely undertake essential daily tasks, or be cared for safely in their home, without additional seating functions such as seat elevation, tilt-in-space, recline and powered elevating leg rests. NB: Young children and infants under 2 years of age who require a buggy with tilt-in-space and/or recline due to their age and physical maturation, and don't have seating needs as described in 5 & 6, may be assessed by a Wheeled Mobility & Postural Management Level 1 Credentialed Assessor. Have limited hand function or control of movement and cannot access powered mobility via a standard proportional joystick. Have fixed postural asymmetries and limitations in joint range which cannot be accommodated in readily available cushions or backrests with generalised 	<p>Knowledge:</p> <ul style="list-style-type: none"> Understands the influence of the musculoskeletal / neuromuscular systems on sitting posture and function. Understands the impact of posture and positioning on the development of sitting ability, the management of abnormal movement patterns and the development of musculoskeletal deformities. Can identify fixed versus flexible postural anomalies and provide appropriate interventions for the person. This may involve compromising ideal posture in order to position for function in some instances. Rationale needs to be clear. Has an in-depth knowledge of a range of clinical conditions and the implications for wheeled mobility and seating, and uses this knowledge to anticipate future needs of the person and/or their caregivers (includes injury prevention). Has an in-depth knowledge of wheeled mobility and seating options which includes an understanding of the adjustable features (including specialty control options for powered mobility), their application and cost-effectiveness to meet an identified need, and actively keeps up to date with changing product. <p>Skill:</p> <ul style="list-style-type: none"> Demonstrates a robust assessment process where the pathway from the initial assessment which identified the problems, needs and 	<p>Completion of a Ministry approved Learning and Development Programme for Wheeled Mobility and Postural Management Level 2 Credential. This ensures assessors can demonstrate an ability to:</p> <ul style="list-style-type: none"> 1, 2 & 3. Use knowledge gained to independently complete 5 physical evaluations and describe the rationale for equipment parameters required to meet needs to supervising/mentoring therapist. Identify how future needs have been anticipated during prescription of three wheeled mobility and seating systems to supervising/mentoring therapist. Complete hands-on product evaluation of complex seating, ultra-lightweight manual wheelchairs/buggies and powered wheelchairs with power seating. Use knowledge gained at specialised manual wheelchairs and powered mobility training to complete wheeled mobility and seating prescriptions and set up for three different clients and can demonstrate this to supervising/mentoring therapist. Successfully complete one case study for evaluation by a credentialing panel as per the case study requirements included in the Seating To Go Learning and Development Programme. Use additional assessment tools as appropriate and as evidenced in the case study for credential application. Complete product

Description	Competencies Required	Demonstrated by
<p>lateral shaping</p> <p>6. Have poor sitting ability due to weakness or abnormal movement patterns/tone, and require specifically placed trunk and/or head supports for safety, or to maximise their functional body position for essential daily tasks, or to minimise deterioration of their posture.</p> <p>7. Have a rapidly deteriorating disability (significant functional loss expected within a period of 6 months) likely to require full trunk support, dynamic seating options e.g. tilt in space, and/or alternative control options for powered mobility</p> <p>8. Are children who are independent and functional, active manual wheelchair users (or could be with appropriate equipment) indoors and in the community.</p>	<p>goals of the person, to the final equipment solution is clear.</p> <ul style="list-style-type: none"> • Can complete a supine and sitting evaluation for people with complex wheeled mobility and seating needs and utilise additional assessment tools as needed e.g. Chailey Levels of Ability assessment, Powered Mobility Programme. • Utilises adjustable features of modular seating systems, accessories and specialised wheelchairs to meet positioning and functional needs. • Can identify and utilise control methods for powered mobility that are appropriate to the cognitive and physical abilities of the person. 	<p>evaluations and client photographs in final solution for three people</p> <ul style="list-style-type: none"> • Uses knowledge gained at powered mobility workshop and training on specialty control options to prescribe a powered wheelchair with power seating as discussed via client file with supervising/mentoring therapist.
<p>Optional Endorsement: Complex Custom Fabrication Enables the assessor to assess people who:</p> <p>1. Require a custom fabricated⁵ seating product that is highly individualised and most commonly used for those people with Level 1 Chailey Sitting Ability, or those with significant orthopaedic deformity of the spine or pelvis.</p> <p>2. Require a unique and unusual custom modified wheeled mobility base.</p>	<p>Knowledge:</p> <ul style="list-style-type: none"> • Can explain and analyse clinical assessment findings and translate these to the requirements of the seating or mobility base to be fabricated. <p>Skill:</p> <ul style="list-style-type: none"> • Problem solves positioning and mobility issues and prescribes unique and unusual solutions for people who have significant fixed deformity that cannot be managed in readily available equipment and who may require custom fabricated seating / wheeled mobility options. • Can anticipate difficulties that may arise in relation to 	<p>An ability to:</p> <ul style="list-style-type: none"> • Successfully complete one case study for evaluation by the credentialing panel for a person who requires a custom fabricated solution as per the case study requirements. • 1 & 2. Facilitate the provision of three complex custom fabrication solutions for three different people under the supervision of a supervising / mentoring therapist. This includes completing the assessment and taking a lead role in the problem solving and decision making during the fabrication process. <p>Assessors must hold, or be</p>

⁵ Custom fabricated seating product refers to equipment that requires specialist assistance from outside the assessment service to fabricate seating solutions that are highly individualised and are unable to be re-issued via equipment stores.

Description	Competencies Required	Demonstrated by
	pressure management, transfers and personal cares, and any functional or environmental impact that might occur during the introduction of custom fabricated solutions.	applying for, the Wheeled Mobility and Postural Management Level 2 Credential prior to, or at the time of applying for the Complex Custom Fabrication endorsement.