

Clinical Task Instruction

Delegated Task

D-MT08: Supply, train and review walking aids +/- stairs

Scope and objectives of clinical task

This CTI will enable the Allied Health Assistant to:

- safely measure and fit a prescribed walking aid.
- train the client in the use of the walking aid including safety checks, equipment safety features, maintenance requirements, limitations and risks associated with use.
- observe the client using the walking aid and make adjustments to improve fit and function.

VERSION CONTROL

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The CTI reflects best practice and agreed process for conduct of the task at the time of approval and should not be altered. Feedback, including proposed amendments to this published document, should be directed to the Office of the Chief Allied Health Officer (OCAHO) at: allied_health_advisory@health.qld.gov.au.

This CTI must be used under a delegation framework implemented at the work unit level. The framework is available at: <https://www.health.qld.gov.au/ahwac/html/ahassist>

Please check <https://www.health.qld.gov.au/ahwac/html/clintaskinstructions.asp> for the latest version of this CTI.

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- if relevant to the local service model, train the client to use the walking aid when walking up and down a threshold step and/or stairs.

Requisite training, knowledge, skills and experience

Training

- Completion of CTI D-WTS01 When to stop.
- Mandatory training requirements relevant to Queensland Health/Hospital and Health Service (HHS) clinical roles are assumed knowledge for this CTI.
- If not part of mandatory training requirements, complete patient manual handling techniques, including the use of walk belts and sit to stand transfers.
- If the use of oxygen and/or cylinders is planned for use during this task, complete site-specific training requirements.
- Completion of the following Queensland Health allied health assistant training modules (or corresponding units of competency in HLT43015 Certificate IV in Allied Health Assistance) or equivalent work-based learning:
 - Physiotherapy Learner Guide: Deliver and monitor an exercise program for mobility.
 - o Gait. p47-48
 - o Stair Practice p51-52

Access the module/s at: <https://www.health.qld.gov.au/ahwac/html/ahassist-modules>

Clinical knowledge

- The following content knowledge is required by an AHA delivering this task:
 - common health conditions that walking aids are prescribed for in the local service, including the purpose and rationale for use.
 - the basic elements of a normal walking pattern when using a walking aid on the flat and to ascend and descend stairs for full weight bearing and (if relevant) with unilateral lower limb partial and non-weight bearing restrictions.
 - commonly observed deviations from a correct walking pattern when using an aid and strategies used to improve the walking pattern and aid use for safety.
 - common walking aids available, including their indications for use, safety features and maintenance requirements.
 - methods of measurement and fit for each walking aid available within the service or that is planned for delivery by the AHA.
 - relevant facility protocols/care pathways/set criteria (e.g. hip replacement precautions, falls risk screening and mitigation strategies, on-off bed screens, programs and/or processes, equipment hire/purchase protocols, processes and schemes including Department of Veteran Affairs, Medical Aids subsidy scheme, National Disability Insurance Scheme).
- The knowledge requirements will be met by the following activities:
 - complete the training program/s (listed above)
 - reviewing the Learning resource.
 - receiving instruction from an allied health professional in the training phase.

Skills or experience

- The following skills or experience are not identified in the task procedure but support the safe and effective performance of the task and are required by an AHA delivering this task:
 - competence in measurement of clinical observations relevant to mobilising/exertion where this is relevant to the healthcare setting and client group. This may include blood pressure, heart rate, pulse oximetry, pain scales or exertion scales

Safety and quality

Client

- The AHA will apply CTI D-WTS01 When to stop at all times.
- In addition, the following potential risks and precautions have been identified for this clinical task and should be monitored carefully by the AHA during the task:
 - walking aids are commonly prescribed due to balance problems. Training in the use of a walking aid is recommended to reduce the risk of falls (de Mettelinge, Cambier, 2015). During fitting and training in the use of a walking aid the risk of falls can be high, so a minimum of standby assistance is required at all times.
 - appropriate clothing and footwear should be worn during this task. Footwear should be enclosed, well-fitting shoes with good traction. The delegation instruction will include information for clients with no footwear or a restriction affecting the ability to wear footwear e.g. use of non-slips socks or compression stockings removed prior to walking. Clothing should be appropriate for walking i.e. ensures modesty during the task, not impede the lower limb range of movement, or pose a tripping hazard.
 - if the client has restrictions or specific requirements, these will be included in the delegation instruction. These may include drips, drains and lines, hip precautions, weight bearing status, range of motion, wounds/pressure area care and handling requirements e.g. wearing a sling during transfers for hemiplegic shoulder or a range of motion brace during walking. Restrictions must be adhered to during the task. If restrictions cannot be maintained, cease the task. If instructions are unclear or do not appear to match the **client's requirements**, liaise with the delegating health professional prior to commencing the task. For example, if weight bearing restrictions have changed or the client is now on oxygen or has new attachments.
 - if the client is an inpatient and walking is occurring away from the ward, liaise with nursing staff prior to leaving the area, including the planned return time. After the task advise staff of the client's return and their location e.g. room, dining area, gym, bed, chair.

Equipment, aids and appliances

- Ensure all equipment is clean and in good working order and matched to the **client's** needs e.g. safe working load, height adjustment and brakes. **Refer to the manufacturers' guidelines for maintenance guidelines** e.g. check rubber stoppers are present and have tread, adjustment screws or pins are engaged correctly, brakes are working. If the equipment is unsafe, source an alternative. If the correct equipment cannot be sourced, liaise with the delegating health professional.
- If supplemental oxygen is required during the task, the flow rate and management of attachments, including any required assistance, will be included in the delegation instruction.

Confirm the portable cylinder has adequate supply prior to use. Adjust the oxygen flow to the required rate and confirm a steady stream is present prior to connecting the client's tubing for use. Ensure tubing does not pose a tripping hazard during the task. A small trolley may be useful to transport the cylinder during walking.

Environment

- Ensure the planned route is free of trip hazards and obstacles to reduce the risk of falls e.g. pedestrian traffic, equipment and trolleys. If a chair is required to rest, confirm the safe working load is appropriate and that its position does not pose a hazard to others.
- Ensure the stair rail is secure, step tread is intact, lighting is adequate and that any doors are accessible both to/from the stairs.
- Ensure an appropriate alert system is in place for the local environment in case a client becomes unwell or requires additional assistance during the task e.g. mobile phone, emergency buzzer, staff member/carer.

Performance of clinical task

1. Delegation instructions

- Receive the delegated task from the health professional.
- The delegating allied health professional should clearly identify parameters for delivering the clinical task to the specific client, including any variance from the usual task procedure and expected outcomes. This may include:
 - prescribed walking aid
 - weight bearing status of the upper and lower limbs
 - planned walking pattern and acceptable compensatory strategies
 - assistance required for getting in/out of bed, standing up and sitting down and when walking, including the use of a walk belt.
 - environment for walking aid fitting practice, including any additional requirements e.g. chair en-route, use of portable oxygen and trolley.
 - the planned distance to walk and/or number of stairs.
 - Client-specific requirements including clinical observations to be monitored during the task including any parameters e.g. use of supplemental oxygen, direction to turn, need to carry reliever medication (Ventolin), monitoring of pain/oxygen saturation; English as second language, use of hearing aids, etc.
 - information for mobility practice with client e.g. independent, with assistance.

2. Preparation

- collect the walking aid and perform a safety check.
- plan the route for mobilisation
- ensure the client wears any required braces/ orthoses, and has suitable clothing and footwear.

3. Introduce task and seek consent

- The AHA introduces him/herself to the client.
- The AHA checks three forms of client identification: full name, date of birth, plus one of the following: hospital unit record (UR) number, Medicare number, or address.
- The AHA describes the task to the client. For example:
 - *“I have been asked to provide you with [walking aid] and show you how to use it” or “I have been asked to practise walking up and down stairs with you while you are using your [walking aid]”.*
- The AHA seeks informed consent according to the Queensland Health Guide to Informed Decision-making in Health Care, 2nd edition (2017).

4. Positioning

- The client's **position during the task should be:**
 - lying/sitting in bed or in a chair, prior to the task. If the client is unable to achieve a standing position independently, provide assistance to stand as per the local hospital and health services manual handling protocol.
- The **AHA's** position during the task should be:
 - generally standing to one side, the affected (weaker) side if relevant, and slightly behind the client during walking and close enough to provide hands on assistance for safety, if required.
 - when ascending the stairs the AHA should stand to one side, generally the opposite side to the rail (if present) and slightly behind the client. The AHA should be close enough to provide hands on assistance for balance, if required. When descending the stairs, AHA should be in front of the client and to one side, generally on the opposite side to the rail, if present. The AHA should have their feet placed on separate steps, allowing a lunge position for balance.

5. Task procedure

- Explain and demonstrate (where applicable) the task to the client.
- Check the client has understood the task and provide an opportunity to ask questions.
- The task comprises the following steps:
 1. Check the walking aid prior to use, See Safety and quality.
 2. If the task includes fitting and adjusting a newly prescribed walking aid, prepare the walking aid for adjustment. If the client has already been fitted with the walking aid proceed to Step 3.
 - a. Instruct the client to stand up, including maintaining any restrictions. Provide assistance as required. If the client requires support for balance when in standing, return the client to sitting. A second person will be required to support the client whilst adjustments are made to the walking aid for fit.
 - b. With the client in standing measure and fit the walking aid to the correct height. The client may return to sitting whilst adjustments are made to the walking aid.
 - c. Check the walking aid adjustments are secure e.g. by placing weight on the aid.
 3. Position the walking aid within easy reach of the client i.e. beside/infront. If using crutches, have both crutches positioned on the affected side.

4. Instruct the client to stand up by pushing up from the bed/chair. If using crutches the client may push up with one hand from bed/chair and the other hand through the hand rest of both crutches.
 5. With the client in standing instruct them to grasp the walking aid hand grips and position the walking aid for walking. Confirm fit and comfort of the walking aid. Adjust the aid if required.
 6. Instruct the client to commence walking by taking a 'step' using the prescribed method e.g. step to or step through pattern. If the client is unable to take a 'step' or maintain restrictions whilst stepping, cease the task by returning the client to sitting and inform the delegating health professional.
 7. Direct the client to the planned walking route, providing stand-by assistance and observing the client's posture, walking pattern and aid use.
 8. If the delegation instruction includes stairs,
 - a. access the stairs using the method described in the delegation instruction e.g. walking, wheelchair.
 - b. With the client in standing and facing the stairs, instruct the client in the prescribed stepping pattern to ascend/descend the stairs for **the client's** requirements/restrictions. Instructions should include placement of hands, feet and walking aid (if relevant).
 - c. Check the client has understood the task and provide an opportunity to ask questions.
 - d. Instruct the client to stand in front of the first step and use the prescribed method to ascend the stairs. Note: it is always preferable to assess stair ascent before stair descent, to support client confidence and safety. If the client is unable to place the foot on the step, cease the task and inform the delegating health professional.
 - e. The client should turn at the top of the stairs on a landing which has adequate space to allow the client to turn safely. The client may require a short rest break in standing or sitting on a chair before descending.
 - f. With the client in standing on the top step ready for descent, instruct the client to descend the stairs using the prescribed method.
- During the task:
 - provide feedback and correct errors in the performance of the task including:
Walking aid fit:
 - if the client has a flexed trunk (appears stooped forward), verbally cue the client to "stand tall". In standing confirm that the handle height of the walking aid is correctly measured, aligned with the wrist crease with the arm hanging by the side. Adjust if required.
 - When using the walking aid the elbow should be flexed 10-20 degrees. If during walking elbow flexion is greater or less than this adjust the walking aid handle height.
 - If shoulders appear elevated during walking, confirm height measurement. For crutches this includes having three-finger width clearance between the axilla and the top of the crutch.
 - Walking pattern with the aid:
 - if the client places the walking aid greater or less than a step length in front, provide verbal prompting to position the aid correctly, including the use of a visual marker on the floor and/or manual guidance if required.

- During stepping feet should be placed shoulder width apart and within the confines of the base of support for the walking aid. Provide verbal prompting, including the use of a visual marker for foot placement during the step cycle.

Stairs and walking aids:

- Clients may become anxious due to a fear of falling on the stairs, particularly while turning and on descent. Provide reassurance and hands-on steadying for safety, if required. Encourage the client to focus attention on the next step tread/landing.
- Observe foot sequencing for ascending or descending the steps e.g. alternate stepping pattern, stronger leg ascending first and the weaker/painful leg descending first. Use feedback, verbal prompting as required.
- Ensure appropriate use of the rail e.g. rail on the side, not facing the rail or pulling with both hands, adherence to any weight bearing restrictions for the upper limb. Use verbal prompting or manual guidance as required.
- correct errors in use of walking aid during the task e.g. crutch or walking stick moves with the affected leg/foot in the correct sequence to maximise support, adherence to weight bearing restrictions.
- monitor for adverse reactions and implement appropriate mitigation strategies as outlined in the Safety and quality section above including CTI D-WTS01 When to stop.
- At the conclusion of the task:
 - encourage feedback from the client on the task.
 - provide summary feedback to client, emphasising positive aspects of performance and areas to work on.
 - provide instructions for practice of the task (including reinforcing safety considerations) if this was requested by the delegating health professional. For example, to only use the walking aid with assistance (nursing, carer).
 - ensure the client is comfortable and safe.

6. Document

- Document the outcomes of the task in the clinical record, consistent with relevant documentation standards and local procedures. Include observation of client performance, expected outcomes that were and were not achieved, and difficulties encountered or symptoms reported by the client during the task.
- For this task, the following specific information should be presented:
 - walking aid type and any adjustments required for fit and function
 - details of walking aid practice and training including:
 - walking aid (4WW, crutches) and walking pattern used e.g. step to/ step thru
 - location e.g. ward, outside
 - distance/duration
 - assistance required and
 - client specific requirements e.g. restrictions to weight bearing, brace insitu, oxygen, etc.
 - details of stair walking aid practice and training including:
 - walking aid and walking pattern, including use and side of rail
 - location of stairs, number of stairs ascended/descended, height of step/s used if relevant

- number of steps/flights completed
- assistance required and
- client-specific requirements e.g. restrictions to weight bearing, brace insitu, oxygen, etc.

7. Report to the delegating health professional

- Provide comprehensive feedback to the health professional who delegated the task.

References and supporting documents

- Roman de Mettelinge, T., Cambier D (2015). Understanding the relationship between walking aids and falls in older adults: A prospective cohort study, *Journal of Geriatric Physical Therapy*, 38(3), 127-132. DOI: [10.1519/JPT.0000000000000031](https://doi.org/10.1519/JPT.0000000000000031)
- Queensland Health (2015). Clinical Task Instruction D-WTS01 When to stop V2.2. Available at: <https://www.health.qld.gov.au/ahwac/html/clintaskinstructions.asp>
- Queensland Health (2017). Guide to Informed Decision-making in Health Care (2nd edition). Available at: https://www.health.qld.gov.au/_data/assets/pdf_file/0019/143074/ic-guide.pdf

Assessment: performance criteria checklist

D-MT08: Supply, train and review walking aids +/- stairs

Name:

Position:

Work Unit:

Performance criteria	Knowledge acquired	Supervised task practice	Competency assessment
	<i>Date and initials of supervising AHP</i>	<i>Date and initials of supervising AHP</i>	<i>Date and initials of supervising AHP</i>
Demonstrates knowledge of fundamental concepts required to undertake the task.			
Obtains all required information from the delegating health professional, and seeks clarification if required, prior to accepting and proceeding with the delegated task.			
Completes preparation for the task including collecting the walking aid and other client equipment, performs safety checks and plans the route for mobilisation.			
Introduces self to the client and checks client identification.			
Describes the purpose of the delegated task and seeks informed consent.			
Positions self and client appropriately to complete the task and ensure safety.			
<p>Delivers the task effectively and safely as per delegated instructions and CTI procedure.</p> <p>a) Clearly explains the task, checking the client's understanding.</p> <p>b) If fitting and adjusting a newly prescribed aid, prepares the walking aid for adjustment. Instructs the client to stand and measures and fits the walking aid to the correct height. Checks the adjustments are secure.</p> <p>c) Positions the walking aid within reach of the client. Instructs the client to stand up.</p> <p>d) Instructs the client to walk with the aid using the prescribed walking pattern.</p> <p>e) If the delegation instruction includes stairs, instructs the client to ascend/ descend stairs using the prescribed walking pattern and correct use of the walking aid and/or rail.</p> <p>f) During the task, maintains a safe clinical environment and manages risks appropriately.</p> <p>g) Provides feedback to the client on performance during and at completion of the task.</p>			

Documents the outcomes of the task in the clinical record, consistent with relevant documentation standards and local procedures.			
Provides accurate and comprehensive feedback to the delegating health professional.			

Notes on the walking aids and weight bearing status of the Allied Health Assistant

The allied health assistant has been trained and assessed as competent to deliver this task for the following walking aids:

- Single point walking stick
- Crutches Axillary Canadian
- Hopper Frame / Pick Up Frame
- Four wheeled walker (4WW)
- Other

The allied health assistant has been trained and assessed as competent to deliver this task for the following weight bearing status:

- Full Weight Bearing (FWB)
- Weight Bearing as Tolerated (WBAT)
- Partial Weight Bearing (PWB)
- Non-Weight Bearing (NWB)

If weight bearing status is limited to a specific walking aid, this should also be noted.

The allied health assistant has been trained and assessed as competent to deliver this task for stairs. Notes should be made for +/- rail use, type of walking aid, stepping pattern and weight bearing status.

Comments:

Record of assessment competence:

Assessor name:		Assessor position:		Competence achieved:	/ /
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Scheduled review:

Review date:	/ /	
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Supply, train and review walking aids +/- stairs: Learning resource

Required reading

- Physiopedia (2021).
 - Gait. Available at: <https://www.physio-pedia.com/Gait>
 - Walking aids. Available at: https://www.physio-pedia.com/Walking_Aids

Queensland Health staff only

- Queensland Health: Mobility and weight bearing terminology (2021). Available at: https://qheps.health.qld.gov.au/_data/assets/pdf_file/0032/2603939/dopsq-mob-wb-term.pdf

Required viewing

Walking aids

- Adaptive Equipment Corner (2015). Available at: <https://www.youtube.com/channel/UCCAFgzfT2lvumifGYr1Mp9g/videos>

Walking sticks

- How to use a cane. Available at: <https://www.youtube.com/watch?v=sNxSvhsYP1Y>
- The best way to use a cane on the stairs. Available at: <https://www.youtube.com/watch?v=Tp3CeZI8KRY>

Crutches

- How to adjust crutches. Available at: <https://www.youtube.com/watch?v=nKffM1HqJ08>
- How to sit, stand and walk with crutches. Available at: <https://www.youtube.com/watch?v=xz0eGJF6kh4>
- How to use crutches on the stairs. Available at: <https://www.youtube.com/watch?v=CMLWKML4YZY>

Walking Frames

- Most common types of walkers. Available at: <https://www.youtube.com/watch?v=GL6wIPFIh4c>
- Specifics on standard walker. Available at: <https://www.youtube.com/watch?v=Rd5y-EECAeQ>
- How to adjust a 2 wheel or front wheel or standard walker Available at: <https://www.youtube.com/watch?v=luZrbvv95tE>
- How to use a standard walker. Available at: https://www.youtube.com/watch?v=VtL5S_lvEfU
- Specifics on rollator walker. Available at: <https://www.youtube.com/watch?v=nOZ3zSfCA6s>
- How to adjust a rollator walker. Available at: <https://www.youtube.com/watch?v=NL43g-pVUIc>
- How to use a rollator walker. Available at: <https://www.youtube.com/watch?v=Z8zFk5U1xmY>

- Lovelace UNM Rehabilitation Hospital (2022). Curb step up & step down with a 4-wheeled walker. Available at: <https://www.youtube.com/watch?v=RBaokfxzei8>
- Rose Orthopaedic and Spine Centre (2016).
 - Using a walker on a curb step. Available at: <https://www.youtube.com/watch?v=hpvtaboByJg>
 - Using a walker on a curb step when leg is not weightbearing. Available at: <https://www.youtube.com/watch?v=Lklnjg-nG7Y>

Optional viewing

- Life Tec Australia (2014). LifeTec Great Gadgets Series – Mobility Options 2014. (View 0-3:09)
Available at: [LifeTec Great Gadgets Series - Mobility Options - 2014 - YouTube](#)

Crutches

- Active Rehabilitation Physiotherapy South Brisbane (2015). Safe use of crutches. Available at: <https://www.youtube.com/watch?v=NZHoBx3Bhnc>

Stairs

- Active Rehabilitation Physiotherapy South Brisbane. Using crutches on stairs. Available at: <https://www.youtube.com/watch?app=desktop&v=X7kWp2zq12w>

