

Gait or balance disturbances should be assessed following a positive answer to any of the 3 key questions or a score of 4 or more on the Staying Independent Checklist, if the older adult **DID NOT** sustain a severe fall in the past 12 months.

If the older adult demonstrates or reports difficulties with their gait, strength, or balance, provide individualized interventions for a person at **Intermediate Risk** for falls. (See Falls Risk Screening and Interventions Checklist)



GAIT SPEED TEST (4-METRE)

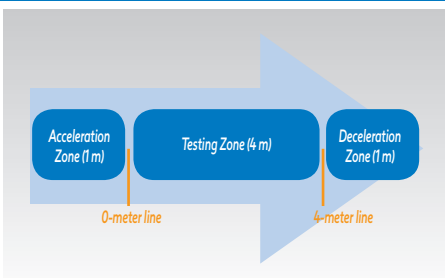
(RECOMMENDED TEST)

Purpose:

Predicting falls risk

Equipment:

- A measuring tape
- A stopwatch



Directions:

Identify with masking tape or another marker, the 3 zones along a level surface as indicated. Ask the patient to walk down a specified direction through a 1-metre zone for acceleration, a central 4-metre “testing” zone, and a 1-metre zone for deceleration.

Start the timer with the first footfall after the 0-metre line and stop the timer with the first footfall after the 4-metre line.

Note: Patients may use an assistive device, if needed.

Instruct the patient to:

1. Walk at their normal/natural pace.
2. The patient should not start to slow down before the 4-metre mark

Observations:

An older adult who takes longer than 5 seconds to walk 4 metres (<0.8 m/s) suggests an increased risk of falling.

Did you know?

- Approximately 8 hospital admissions occur each day in New Brunswick due to fall-related injuries in older adults.
- Women are two times more likely to be admitted to hospital due to fall.
- The average length of stay in hospital due to a fall is 23 days.

For more information visit:



www.NBTrauma.ca



www.FindingBalanceNB.ca



www.nbms.nb.ca

MOBILITY SCREENING GUIDELINES

Evaluating Gait, Strength and Balance in Older Adults



Trauma NB

TIMED UP AND GO (TUG)

(ALTERNATIVE TEST)

Purpose:

To assess mobility

Equipment:

- A standard chair with a straight back and arm rests
- A measuring tape
- A stopwatch

Directions:

Patients should wear their regular footwear and can use a walking aid, if needed. Begin by having the patient sit back in a standard chair and identify with masking tape or another marker, a line on the floor 3 meters or 10 feet away.

On the word “Go,” begin timing and stop timing after the patient sits back down.

Note: Always stay by the patient for safety

Instruct the patient to:

1. Stand up from the chair when hearing the word “Go”.
2. Walk to the line on the floor at a normal pace.
3. Turn around in order to face the chair.
4. Walk back to the chair at a normal pace.
5. Sit down again.

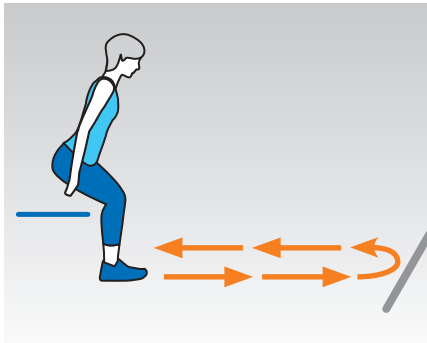
Observations:

Observe the patient’s postural stability, gait, stride length, and sway.

Note all that apply:

- Slow tentative pace
- Loss of balance
- Short strides
- Little or no arm swing
- Steadying self on walls
- Shuffling feet
- Turning “en bloc”
- Not using assistive device properly

An older adult who takes ≥ 12 seconds to complete the Timed Up And Go is at increased risk for falling.



4-STAGE BALANCE TEST

(ALTERNATIVE TEST)

Purpose:

To assess static balance

Equipment:

- A standard chair with a straight back and arm rests
- A stopwatch

Directions:

Describe and demonstrate each of the four progressively more challenging standing positions to the patient.

1. Parallel Stance
2. Semi-Tandem Stance
3. Tandem Stance
4. One-Legged Stance

Patient should not use an assistive device (cane or walker). However, they must keep their eyes open during the test. Patients may hold their arms out, or move their body to help keep their balance, but without moving their feet.

When the patient is steady, instruct them to let go of the chair and time how long they can maintain each position. On the word “Go,” begin timing. After 10 seconds, say “Stop”. If the patient can hold a position for 10 seconds without moving their feet or needing support, go to the next position. If not, stop the test.

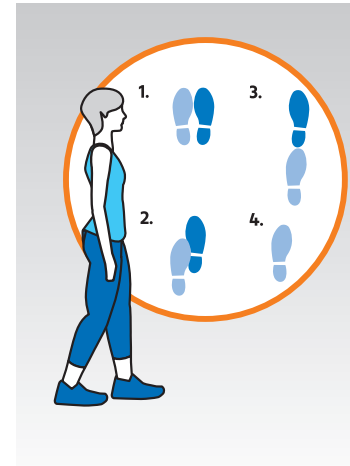
Note: Stand next to the patient to help them assume the correct position and to remain ready to assist, in case they lose their balance.

Instruct the patient to:

1. Place their feet in the correct way for each of the four standing positions
2. Hold onto the chair until they feel balanced
3. Let go of the chair when they hear the word “Go”
4. Try to stand in the same position without holding on or taking a step until hearing the word “Stop”

Observations:

Observe the patient’s postural stability and the amount of sway. An older adult who cannot hold the tandem stance for at least 10 seconds is at increased risk of falling.



30-SECOND CHAIR STAND TEST

(ALTERNATIVE TEST)

Purpose:

To assess leg strength and endurance

Equipment:

- A standard chair with a straight back without arm rests
- A stopwatch

Directions:

It is recommended to place the chair against a wall to prevent it from moving during the test. Begin by having the patient sit back in a chair without arm rests.

On the word “Go,” begin timing. Count and record the number of times the patient comes to a full standing position in 30 seconds. Do not continue if you feel the patient may fall during the test.

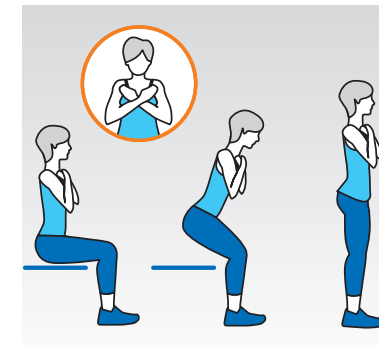
Note: Always stay by the patient for safety

Instruct the patient to:

1. Sit in the middle of the chair.
2. Place their hands on the opposite shoulder crossed, at the wrists.
3. Keep their feet flat on the floor.
4. Keep their back straight, and to keep their arms against their chest.
5. Rise to a full standing position, and then sit back down again once they hear the word “Go”.
6. Repeat this for 30 seconds

Observations:

Observe the patient’s ability to get up from a seated position. If the patient is over halfway to a standing position when 30 seconds have elapsed, count it as a stand. If the patient must use his/her arms to stand, stop the test. Record the number “0” for their score. An older adult with a below average score for their age and sex indicates an increased risk for falls.



SCORING TABLE

AGE	MEN	WOMEN
60-64	< 14	< 12
65-69	< 12	< 11
70-74	< 12	< 10
75-79	< 11	< 10
80-84	< 10	< 9
85-89	< 8	< 8
90-94	< 7	< 4