

6.14 Mobility

The ability to move between locations in the individual's living environment. For children, this includes home and school. Mobility includes walking, crawling, or wheeling oneself around at home or at school. For functional eligibility purposes, mobility does not include transporting oneself between buildings or moving long distances outdoors.

0-6 mos	6-12 mos	12-18 mos	18-24 mos	24-36 mos	36 mos-4 yrs	4-6 yrs	6-9 yrs	9-12 yrs	12-14 yrs	14-18 yrs	18 yrs +	
												<input checked="" type="checkbox"/> Indicates that the item on the functional screen should be checked. <input type="checkbox"/> Indicates that the item on the functional screen should NOT be checked.
												Not applicable for purposes of this screen. This option does not appear on the functional screen because young children are expected to require assistance in this category.
												Unable to maintain a sitting position when placed. <input checked="" type="checkbox"/> Pillows or props are used and the child still cannot support their own trunk <input type="checkbox"/> Pillows or props are used and the child is able to maintain a sitting position.
												Unable to move self by rolling, crawling, or creeping. <input checked="" type="checkbox"/> Cannot move self. <input type="checkbox"/> Can do one but not the others.
												Unable to pull to stand.
												Unable to sit alone. <input checked="" type="checkbox"/> Needs pillows or props to support the child in a seated position. <input type="checkbox"/> Needs parent or caregiver to place child in a seated position.
												Unable to creep or crawl. <input type="checkbox"/> Able to creep but not crawl. <input type="checkbox"/> Able to crawl but not creep.

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												<input checked="" type="checkbox"/> Indicates that the item on the functional screen should be checked. <input type="checkbox"/> Indicates that the item on the functional screen should NOT be checked.
												Requires a stander or someone to support the child's weight in a standing position. <input checked="" type="checkbox"/> Cannot stand even if they have something to hold onto. <input checked="" type="checkbox"/> Does not have the strength in their legs to support their own weight. <input type="checkbox"/> Can support their own weight, for example, cruising on furniture or using a walker.
												Uses a wheelchair or other mobility device not including a single cane. <input checked="" type="checkbox"/> Uses a mobility device that is generic or specialized equipment to compensate for a physical impairment in mobility. <input checked="" type="checkbox"/> Uses a wheelchair or walker. <input checked="" type="checkbox"/> Uses generic equipment (e.g., a stroller), <u>only</u> if it is used to compensate for the child's physical mobility impairment. <input type="checkbox"/> Uses AFOs, braces, or a single cane.
												Unable to take steps holding on to furniture. <input checked="" type="checkbox"/> Can pull to stand with the aid of furniture but then cannot take a step. <input type="checkbox"/> Can take a small number of steps. <input type="checkbox"/> Cannot pull to stand. Instead the screener would check "Requires a stander or someone to support the child's weight in a standing position."

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												<input checked="" type="checkbox"/> Indicates that the item on the functional screen should be checked. <input type="checkbox"/> Indicates that the item on the functional screen should NOT be checked.
												<p>Does not walk or needs physical help to walk.</p> <input checked="" type="checkbox"/> Needs to hold someone's hand in order to walk. <input checked="" type="checkbox"/> Requires another person to help hold the child up while they walk. <input type="checkbox"/> Can cruise holding onto furniture. <input type="checkbox"/> Walks independently with equipment such as a walker. <input type="checkbox"/> Fatigues while walking. <input type="checkbox"/> Can walk but falls down often.

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