

ELDERLY MOBILITY SCALE

1. Purpose

This scale provides physiotherapists with a standardised validated scale for assessment of mobility in more frail elderly patients. The scale has good validity and inter-rater reliability.

2. Content

The scale assesses 7 dimensions of functional performance. These include locomotion, balance and key position changes, all of which are intrinsic skills that permit the performance of complex activities of daily living. Total score is from a maximum of 20, higher scores indicating better performance.

3. Assessment

ELDERLY MOBILITY SCALE	
Lying to sitting 2 Independent 1 Needs help of 1 person 0 Needs help of 2+ people	Gait 3 Independent (incl. use of sticks) 2 Independent with frame 1 Mobile with walking aid but erratic/unsafe turning 0 Requires physical assistance or constant supervision
Sitting to lying 2 Independent 1 Needs help of 1 person 0 Needs help of 2+ people	Timed walk 3 Under 15 seconds 2 16-30 seconds 1 over 30 seconds
Sit to stand 3 Independent in under 3 seconds 2 Independent in over 3 seconds 1 Needs help of 1 person (verbal or physical) 0 Needs help of 2+ people	Functional Reach 4 Over 20 cm 2 10-20 cm 0 Under 10 cm
Standing 3 Stands without support & reaches within arms length 2 Stands without support but needs help to reach 1 Stands, but requires support 0 Stands, only with physical support (1 person) <i>Support = uses upper limbs to steady self</i>	
Total	
Interpretation of scores*	
14 – 20	Manoeuvres alone and safely. Independent in basic ADLs. These patients are generally safe to go home but may need home help
10 – 13	Borderline in terms of safe mobility and independence in ADLs. These patients will require some help with mobility manoeuvres.
< 10	Dependent in mobility manoeuvres & requiring help with basic ADLs (transfers, toileting, dressing etc.). May require Home Care Package/Long Term Care depending on patients' wishes and circumstances.
<i>*Please note that these are general interpretations. They do not take into account cognition, safety awareness and other factors that may impact on mobility, e.g., postural hypotension.</i>	

References

- Proser L et al (1997) Further validation of EMS for measurement of mobility of hospitalized elderly people
Clinical Rehabilitation 11, 4, 338-343
- Smith R (1994) Validation and Reliability of the Elderly Mobility Scale Physiotherapy 80, 744-747
- Smith R (1994a) Correction. 80(12):879
- Splig, E.G., B. J. Martin, et al. (2001). A comparison of mobility assessments in a geriatric day hospital. Clinical Rehabilitation 15(3): 296-300
- Mabel S. W. Yu (2007) Usefulness of the Elderly Mobility Scale for classifying residential placements. Clinical Rehabilitation, Vol. 21, No. 12, 1114-1120