

**CPRR: Exams for 4-5 year olds**

**Gross Motor Functional Classification System (GMFCS)<sup>1</sup>:**

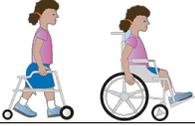
Please read the following and mark one box beside the description that **best** represents your child's movement abilities.

-  Has difficulty sitting on their own and controlling their head and body posture in most positions and has difficulty achieving any voluntary control of movement and needs a specially-adapted supportive chair to sit comfortably and has to be lifted or hoisted by another person to move

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-  Can sit on their own but does not stand or walk without significant support and adult supervision and may need extra body / trunk support to improve arm and hand function and usually needs adult assistance to get in and out of a chair and may achieve self-mobility using a powered wheelchair or is transported in the community

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-  Can walk on their own using a walking aid (such as a walker, rollator, crutches, canes, etc.) and can usually get in and out of a chair without adult assistance and may use a wheelchair when travelling long distances or outside and finds it difficult to climb stairs or walk on an uneven surface without considerable help

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-  Can walk on their own without using a walking aid, but has difficulty walking long distances or on uneven surfaces and can sit in a normal adult chair and use both hands freely and can move from the floor to standing without adult assistance and needs to hold the handrail when going up or down stairs and is not yet able to run and jump

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-  Can walk on their own without using a walking aid, including fairly long distances, outdoors and on uneven surfaces and can move from the floor or a chair to standing without using their hands for support and can go up and down stairs without needing to hold the handrail and is beginning to run and jump

photos: <https://www.cerebralpalsy.org.au/what-is-cerebral-palsy/severity-of-cerebral-palsy/gross-motor-function-classification-system/>  
 text: <http://motorgrowth.canchild.ca/en/GMFCS/familyreportquestionnaire.asp>

**Functional Mobility Scale (FMS)<sup>2</sup>:**

The FMS was developed to classify functional mobility at three specific distances. Please rate the registrant's usual means of mobility using the numbers and descriptors below. It is not uncommon to have different scores for the different distances.

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|--|----------|---|---|
|  | <b>1</b> |  | Uses wheelchair, stroller or buggy: may stand for transfers and may do some stepping supported by another person or using a walker/frame            |
| <input type="checkbox"/> <b>short</b> distances around the house (about 5 meters)                                    | <b>2</b> |  | Uses walker or walking frame without help from another person   |
|  | <b>3</b> |  | Uses two crutches without help from another person  |
| <input type="checkbox"/> <b>moderate</b> distances between rooms within a building, such as school (about 50 meters) | <b>4</b> |  | Uses one crutch or two sticks without help from another person. Uses rails for support on stairs, or furniture or walls for support.                |
|  | <b>5</b> |  | Independent on level surfaces: does not use walking aids or need help from another person. Does not use the rails when climbing stairs.             |
| <input type="checkbox"/> <b>longer</b> distances around the community (about 500 meters)                             | <b>6</b> |  | Independent on all surfaces: does not use any walking aids or need any help from another person when walking, running, climbing and climbing stairs |
|  | <b>C</b> |   | The registrant crawls for mobility at home.   |
|  | <b>N</b> |   | Does not apply. The registrant does not complete distance.  |

**Manual Ability Classification System (MACS)<sup>3</sup>:**

*The MACS was developed to classify how individuals with cerebral palsy usually use their hands when handling objects in daily activities, for example during play and leisure, eating and dressing. Please rate how the registrant uses one or both of their hands for activities, rather than assessing and classifying each hand separately. Consider the level of independence you might expect based on their age, and which situations they are independent and to what extent do they need support and adaptation?*

- Handles objects easily and successfully. At most, limitations in the ease of performing manual tasks requiring speed and accuracy. However, any limitations in manual abilities do not restrict independence in daily activities.

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- Handles most objects but with somewhat reduced quality and/or speed of achievement. Certain activities may be avoided or be achieved with some difficulty; alternative ways of performance might be used but manual abilities do not usually restrict independence in daily activities.

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- Handles objects with difficulty; needs help to prepare and/or modify activities. The performance is slow and achieved with limited success regarding quality and quantity. Activities are performed independently if they have been set up or adapted.

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- Handles a limited selection of easily managed objects in adapted situations. Performs parts of activities with effort and with limited success. Requires continuous support and assistance and/or adapted equipment, for even partial achievement of the activity.

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- Does not handle objects and has severely limited ability to perform even simple actions. Requires total assistance.

**Bimanual Fine Motor Function<sup>4</sup>**

*The BFMF is a system for grading how someone uses both of their hands. It takes into account individuals where both hands have similar abilities, as well as situations where one hand has more ability than the other. Please check the box that best describes your child's function*

	Left Hand	Right Hand
manipulates without restrictions	<input type="checkbox"/>	<input type="checkbox"/>
limitations in more advanced fine motor skills	<input type="checkbox"/>	<input type="checkbox"/>
only ability to grasp	<input type="checkbox"/>	<input type="checkbox"/>
no functional ability	<input type="checkbox"/>	<input type="checkbox"/>

**Summary (can be filled in by coordinator if you are unsure)**

- One hand** manipulates without restrictions and **the other hand** manipulates without restrictions or has limitations in more advanced fine motor skills

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- One hand** manipulates without restrictions and **the other hand** has only ability to grasp or hold

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- Both hands** have limitations in more advanced fine motor skills

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- One hand** manipulates without restrictions and **the other hand** has no functional ability

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- One hand** has limitations in more advanced fine motor skills and **the other hand** has only ability to grasp or worse

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- Both hands** have only ability to grasp

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- One hand** has only ability to grasp and **the other hand** has only ability to hold or worse

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- Both hands** have only ability to hold or worse

**Communication Functional Classification System<sup>5</sup>**

The CFCS is designed to rate everyday typical communication behaviors. Please select the response that best describes the registrant's typical ability to communicate with those that they know and those that they don't know. Being a sender means that they are talking, or sending a message; being a receiver means they are listening/hearing a message.

- Effective Sender and Receiver with unfamiliar and familiar partners.** The person independently alternates between sender and receiver roles with most people in most environments. The communication occurs easily and at a comfortable pace with both unfamiliar and familiar conversational partners. Communication misunderstandings are quickly repaired and do not interfere with the overall effectiveness of the person's communication.

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- Effective but slower paced Sender and/or Receiver with unfamiliar and/or familiar partners.** The person independently alternates between sender and receiver roles with most people in most environments, but the conversational pace is slow and may make the communication interaction more difficult. The person may need extra time to understand messages, compose messages, and/or repair misunderstandings. Communication misunderstandings are often repaired and do not interfere with the eventual effectiveness of the person's communication with both unfamiliar and familiar partners

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- Effective Sender and Receiver with familiar partners.** The person alternates between sender and receiver roles with familiar (but not unfamiliar) conversational partners in most environments. Communication is not consistently effective with most unfamiliar partners, but is usually effective with familiar partners.

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- Inconsistent Sender and/or Receiver with familiar partners.** The person does not consistently alternate sender and receiver roles. This type of inconsistency might be seen in different types of communicators including: a) an occasionally effective sender and receiver; b) an effective sender but limited receiver; c) a limited sender but effective receiver. Communication is sometimes effective with familiar partners.

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- Seldom Effective Sender and Receiver even with familiar partners.** The person is limited as both a sender and a receiver. The person's communication is difficult for most people to understand. The person appears to have limited understanding of messages from most people. Communication is seldom effective even with familiar partners.

**Eating and Drinking Ability Classification System (EDACS)<sup>6</sup>:**

Please read the following and mark only one box beside the description that **best** represents your child's eating and drinking abilities.

- Eats and drinks safely and efficiently.

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- Eats and drinks safely but with some limitations to efficiency.

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- Eats and drinks with some limitations to safety; there may be limitations to efficiency.

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- Eats and drinks with significant limitations to safety.

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- Unable to eat or drink safely – tube feeding may be considered to provide nutrition.

1. Palisano, R., Rosenbaum, P., Bartlett, D., Livingston, M. (2008). Content validity of the expanded and revised Gross Motor Function Classification System. *Developmental Medicine & Child Neurology*, 50 (10), 744-50.

2. Graham H.K., Harvey A., Rodda J., Natrass G.R., Pirpiris M. (2004). The Functional Mobility Scale (FMS). *JPO* 24(5): 514-520.

3. Eliasson AC, Krumlinde-Sundholm L, Rösblad B, Beckung E, Arner M, Öhrvall AM, Rosenbaum P. The Manual Ability Classification System (MACS) for children with cerebral palsy: scale development and evidence of validity and reliability. *Dev. Med Child Neurol* 2006. 48:549-554.

4. Himmelmann K, Beckung E, Hagberg G, Uvebrant P. Gross and fine motor function and accompanying impairments in cerebral palsy. *Dev Med Child Neurol* 2006; 48: 417-423.

5. Hidecker, M.J.C., Paneth, N., Rosenbaum, P.L., Kent, R.D., Lillie, J., Eulenberg, J.B., Chester, K., Johnson, B., Michalsen, L., Evatt, M., & Taylor, K. (2011). Developing and validating the Communication Function Classification System (CFCS) for individuals with cerebral palsy, *Dev Med Child Neurol*. 53(8), 704-710.

6. Sellers D, Mandy A, Pennington L, Hankins M and Morris C (2013). Development and reliability of a system to classify eating and drinking ability of people with cerebral palsy. *Developmental Medicine and Child Neurology*. DOI: 10.1111/dmcn12352.