D-MT05: Timed Up and Go (TUG) Test

Scope and objectives of clinical task

This CTI will enable the Allied Health Assistant (AHA) to:

- safely and effectively administer the Timed Up and Go (TUG) test and record the results.

**VERSION CONTROL**

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<th>Version: 1.1</th>
<th>Approved (document custodian): Chief Allied Health Officer, Allied Health Professions’ Office of Queensland, Clinical Excellence Division.</th>
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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 AHPOQ: allied_health_advisory@health.qld.gov.au.

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


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Requisite training, knowledge, skills and experience

Training

- Completion of CTI D-WTS01 When to stop
- Mandatory training requirements relevant to Queensland Health / HHS clinical roles are assumed knowledge for this CTI.
- 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:
  - Assist with physiotherapy treatments and interventions.

Clinical knowledge

The following content knowledge is required by an AHA delivering this task:

- understand the purpose of the TUG test and when it is used,
- describe the basic elements of walking and common abnormalities with specific focus on those relevant to the client population in the local service e.g. limping, shuffling, lack of full knee extension, freezing, etc.

The knowledge requirements will be met by the following activities:

- completing the training program/s (listed above)
- reviewing of 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:

- experience and confidence in facilitating client movement and positioning.
- competent use of medical equipment to measure clinical observation relevant to the clinical area in which the task is being performed e.g. blood pressure, heart rate, oxygen saturation, pain scale etc.
- competence in the use of walking aids relevant to the clinical area in which the task is being performed e.g. 4 wheeled walker, hopper frame etc.

Safety & 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:
  - as this test is routinely used to provide a clinical indication of a client’s risk of falls, close supervision of the client is required at all times,
– appropriate footwear should be worn during this task, i.e. enclosed, well-fitting shoes with good traction.

**Equipment, aids and appliances**

- The safe working limit of the chair used in the task must be suitable for the client.
- If the client has had a total hip replacement in the past 3 months and/or has not been cleared by doctors to sit on standard chairs, the chair used in the task needs to adhere to any hip precautions e.g. not greater than 90 degrees of flexion at the hip.

**Environment**

- Ensure the test area is free of trip hazards and obstacles with minimal distractions to facilitate concentration during task e.g. environment free of pedestrian traffic and ward demands.

**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:
  - mobility deficits or restrictions e.g. additional supervision requirements, weight bearing restrictions (partial, non-weight bear etc.), weaknesses, proprioception or vision issues, vestibular problems etc.,
  - mobility equipment requirements e.g. walking aid (crutches, hopper frame etc.), orthotics, oxygen etc.,
  - medical observations that require monitoring and expected limits for the client e.g. blood pressure, oxygen saturation, respiratory rate, pain, etc.,
  - communication and cognitive deficits e.g. ability to follow instructions, English as a second language, impulsivity, etc.

2. **Preparation**

- For repeat TUG tests the AHA should review the testing conditions of the previous test and discuss any documented adjustment with the delegating professional before proceeding. These may include: non-standard chair use e.g. due to a total hip replacement, safe working load or equipment availability etc.; timing of test to coincide with medication regimes e.g. pain, nebuliser, Parkinson’s etc.; use of equipment e.g. walking aid, oxygen, orthotics etc.
  - Ensure all required equipment is available and appropriately prepared prior to commencing the assessment:
    - appropriate chair with arms and suitable height and safe working load for the client. If a standard chair cannot be used/sourced ensure the details are recorded (e.g. seat height, arm rest height, safe working load etc.). The same chair should be used for subsequent TUG tests.
    - a stopwatch,
floor marker (tape, cone),
- a tape measure.

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 UR number, Medicare number, or address
- The AHA describes the task to the client. For example:
  - “I have been asked by (delegating health professional) to complete a mobility assessment task with you today called the Timed Up and Go Test. This task will assess your ability to stand up from a chair, walk 3 meters to the marker, turn around and walk back to sit in the chair”.

4. **Positioning**
The client’s position during the task should be:
- sitting comfortably in a standard chair with their back resting on the back of the chair, their feet flat on the floor and their arms on the chair’s arm rests.
The AHA’s position during the task should be:
- consistent with advice from the delegating health professional e.g. standing to one side and slightly behind the client. The AHA should be close enough to provide hands on assistance for balance if required. Note: if hands-on assistance is required the assessment will be ceased.

5. **Task procedure**
- Explain and demonstrate (where applicable) the task to the client.
- Check client has understood the task and provide an opportunity to ask questions.
- The task comprises the following steps:
  1. begin the test with the client sitting correctly in the chair,
  2. timing of the assessment starts on the command “GO”,
  3. the timer is stopped when the client is seated with their back against the back of the chair.

Notes on the performance of the TUG test:
- the client should use their normal walking aid,
- the client should wear their regular footwear, if safe to do so,
- the client should have one practice run of the assessment task prior to the formal assessment,
- there is no time limit – the client may stop and rest (but not sit down) if required,
- if physical assistance is needed at any time during the assessment such as assisting the client to stand up from the chair, stabilise the client in standing or when walking, the assessment should be ceased and the test is scored as zero.
- During the task:
– provide feedback and correct errors in the performance of the task including of the assessment during the practice run, however feedback should not be provided during the formal assessment,
– observe the client’s gait noting abnormalities including loss of balance, shuffling, freezing etc.,
– monitor for adverse reactions and implement appropriate mitigation strategies as outlined in “Safety and quality” section above including CTI WTS01 When to Stop.

• At the conclusion of the task:
  – encourage feedback from the client on the task.
  – ensure 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. Including:
  – observations of the client’s performance, expected outcomes that were and were not achieved, and difficulties encountered or symptoms reported by the client during the task,
  – the standard test conditions including use of alternate seating, mobility aid, medication regime etc.,
  – specifically note:
    o any physical assistance required when walking or when moving from sit to stand (with a corresponding score of zero for the test).

7. Report to delegating health professional
• Provide comprehensive feedback to the health professional who delegated the task.

References and supporting documents
### Assessment: Performance Criteria Checklist

#### D-MT05: Timed Up and Go (TUG) Test

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<th>Performance Criteria</th>
<th>Knowledge acquired</th>
<th>Supervised task practice</th>
<th>Competency assessment</th>
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1. **Demonstrates knowledge of fundamental concepts required to undertake the task.**
2. **Obtains all required information from delegating health professional, and seeks clarification if required, prior to accepting and proceeding with the delegated task.**
3. **Completes preparation for task including ensuring the environment and required equipment are appropriately prepared and positioned for completion of the assessment task.**
4. **Introduces self to client and checks client identification.**
5. **Describes purpose of delegated task and seeks informed consent.**
6. **Positions self and client appropriately to complete task and ensure safety.**
7. **Delivers task effectively and safely as per delegated instructions and CTI procedure.**
   - **a)** Clearly explains task, checking client’s understanding.
   - **b)** Ensures the client is positioned correctly in an appropriate chair and has all required equipment e.g. footwear, mobility aid etc.
   - **c)** Provides instruction to the client, and demonstration if required/indicated.
   - **d)** Allows a practice attempt prior to the assessed test. Corrects any misunderstandings or errors during the practice.
   - **e)** Times the client completing the task.
   - **f)** Documents results appropriately, including any non-standardised testing conditions, gait abnormalities.
   - **g)** During the task, maintains a safe clinical environment and manages risks appropriately.
   - **h)** Provides feedback to the client on performance during the practice test and at completion of the task.
8. **Documents the outcomes of the task in the clinical record, consistent with relevant documentation standards and local procedures.**
9. **Provides accurate and comprehensive feedback to the delegating health professional.**
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D-MT05: Timed Up and Go (TUG) Test: Learning Resource

Relevant training program:
Assist with physiotherapy treatments and interventions

Required reading:
The Timed Up and Go test is an assessment of balance commonly used to assess functional mobility in community dwelling, older adults (70-84 years old). It can also be used as a screening tool to assist clinicians to assess clients falls risk in either inpatient or community client populations. The TUG is a measure of both gait and balance and correlation has been identified between the time to complete the TUG and a client’s independence in transfer tasks involved in activities of daily living, balance as measured with the Berg Balance Scale and speed of mobility as required for safe community ambulation.


Optional reading:

Required viewing:
- Timed up and go test https://www.youtube.com/watch?v=BA7Y_oLEIGY

Note: Additional reading/training may be required if the AHA is working in a specific client area with gait abnormalities or equipment needs that are not included in the resources listed above.