

Bedside Mobility Assessment Tool- Competency Checklist

Competency Statement: After participating in this training, the clinician will be able to properly perform BMAT assessment and interpret results appropriately. If the performance criteria are not met, additional training will be provided. If the caregiver has any questions always consult your RN Manager or Mobility Educator. This is an assessment intended for use by an RN, PT, or OT or other clinical licensed professional as organization assigns and per regulatory limitations. Not intended for use by un-licensed caregivers.

Directions: Check the appropriate box for each performance criteria. If RD, clinician must return demonstrate, if VC, clinician must verbalize competency, if RD or VC, either method of verification is acceptable, if both listed, clinician must complete both aspects of task RD and VC. If unable to complete task, schedule retraining as indicated.

DIRECTIONS	Return Demonstrate	Verbal Competency	Needs Review
1. Verifies activity order and determines appropriateness to proceed with assessment [RD or VC]			
2. Assess patient orientation and ability to follow directions [RD]			
3. Assesses for any contraindication to performing the BMAT (i.e. strict bed rest, bilateral NWB orders, hemodynamic instability, ect) [VC]			
4. Places bed in semi-reclined position, explains to patient the steps and intention of the assessment. [RD]			
5. Asks patient to come to a seated position at edge of bed, does not offer significant manual support.[RD] Determines patients ability to sit unsupported and come to sitting position independently. [VC]			
6. Asks patient to reach across midline and shake hands. [RD] Assesses for patients ability to maintain balance while crossing midline. [VC]			
7. Determines whether patient passes level one and verbalizes the equipment needed for Level 1 Fail- Mobility Level 1 [VC]			
8. Asks patient to stretch and point each leg [RD] Verbalizes situations in which only one leg will be assessed [VC]			
9. Determines whether patient has enough quad strength to attempt to stand and criteria for failing assessment level 2. Discusses appropriate equipment for Mobility Level 2 Patient [VC]			
10. Obtains any assistive device needed. Asks patient to stand unassisted at edge of bed for a count of 5 seconds. [RD]			
11. Discusses pass and fail criteria, standing stability and discusses rationale for Mobility Level 3 with assistive equipment. Discusses Mobility Level 3 SPHM Equipment. [VC]			
12. Asks patient to march in place, ensuring feet clear the floor [RD]			
13. Asks patient to step forward, shifting weight and then return weight shift to back leg, ask patient to switch legs and perform action again. [RD]			
14. Discuss pass and fail criteria, discuss any precautions and safety measures for the Mobility Level 4 patient. Discusses fail=Mobility Level 3 [VC]			
15. Performs patient teach-back, explaining level of mobility and any assistive devices needed [RD]			

Completed on: _____ 20____ Competency Verified/Declined by: _____ Title: _____

Employee Name: _____ Title: _____ Emp #: _____

Employee Signature: _____ Date: _____