

## Wheelchair Skills Training Program: Training Log

### Powered Wheelchairs

Name of wheelchair user: \_\_\_\_\_

Caregiver assisting (if any): \_\_\_\_\_

Date of session #1: \_\_\_\_\_

#	Skills*	Sessions** (Explanation and Comments on page 2)									
		1	2	3	4	5	6	7	8	9	10
	Date (dd/mm):										
1	Positions and operates controller										
2	Operates body positioning options										
3	Rolls forward short distance (10 m)										
4	Rolls backward short distance (5 m)										
5	Stops on command										
6	Turns in place										
7	Turns while moving forward										
8	Turns while moving backward										
9	Maneuvers sideways										
10	Picks objects from floor										
11	Relieves weight from buttocks										
12	Performs level transfers										
13	Gets through hinged door										
14	Rolls longer distance (50 m)										
15	Ascends slight incline (5°)										
16	Descends slight incline (5°)										
17	Ascends steep incline (10°)										
18	Descends steep incline (10°)										
19	Rolls across side-slope (5°)										
20	Rolls on soft surface										
21	Gets over obstacle (5 cm)										
22	Gets over gap (15 cm)										
23	Ascends low curb (5 cm)										
24	Descends low curb (5 cm)										
25	Performs wheelchair-ground transfers										
34	Other:										
35	Other:										
	Trainer's initials (signatures on page 2):										
	Session duration (minutes):										

\* Skills 1-25 in column 2 correspond to the WST skills (<https://wheelchairskillsprogram.ca/en/skills-manual-forms/>).

\*\* Place a capacity score (0-3 below), "X" or tick mark to indicate which skills were worked on during a session and/or the skill level achieved. Add "c" to a session number if a caregiver participated.

