Gross Motor Functional Classification System (GMFCS)[1]:

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

☐ Have difficulty sitting on my own and controlling my head and body posture in most positions and have difficulty achieving any voluntary control of movement and need a specially adapted chair to sit comfortably and be transported anywhere and have to be lifted or hoisted by another person or special equipment to move

☐ Can sit on my own but do not stand or walk without significant support and therefore always rely on wheelchair when outdoors and can achieve self-mobility using a powered wheelchair and can crawl or roll to a limited extent to move around indoors
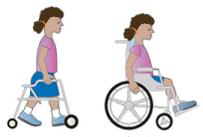
☐ Can stand on my own and only walk using a walking aid (such as a walker, rollator, crutches, canes, etc.) and find it difficult to climb stairs, or walk on uneven surfaces without support and use a variety of means to move around depending on the circumstances and prefer to use a wheelchair to travel quickly or over longer distances

☐ Can walk on my own without using walking aids, but need to hold the handrail when going up or down stairs and therefore walk in most settings and often find it difficult to walk on uneven surfaces, slopes or in crowds and may occasionally prefer to use a walking aid (such as a cane or crutch) or a wheelchair to travel quickly or over longer distances
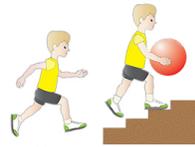
☐ Can walk on my own without using walking aids, and can go up or down stairs without needing to hold the handrail and walk wherever I want to go (including uneven surfaces, slopes or in crowds) and can run and jump although my speed, balance, and coordination may be limited

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)[2]:

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

1 Use wheelchair, stroller or buggy: may stand for transfers and may do some stepping supported by another person or using a walker/frame

☐ **short** distances around the house (about 5 meters)

2 Use walker or walking frame without help from another person

3 Use two crutches without help from another person

☐ **moderate** distances between rooms within a building, such as school (about 50 meters)

4 Use one crutch or two sticks without help from another person. Use rails for support on stairs, or furniture or walls for support.

5 Independent on level surfaces: do not use walking aids or need help from another person. Do not use the rails when climbing stairs.

☐ **longer** distances around the community (about 500 meters)

6 Independent on all surfaces: do not use any walking aids or need any help from another person when walking, running, climbing and climbing stairs

C I crawls for mobility at home.

N Does not apply. I do not complete this distance.

Manual Ability Classification System (MACS)[3]:

The MACS was developed to classify how individuals with cerebral palsy <u>usually</u> use their hands when handling objects in daily activities, for example during play and leisure, eating and dressing. Please rate how you use <u>one or both of their hands</u> for activities, rather than assessing and classifying each hand separately. Consider to what extent you 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.

☐ 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.

☐ Handles objects with difficulty; need 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.

☐ 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.

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

Bimanual Fine Motor Function[4]

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 hand function

	Left Hand	**Right Hand**
manipulates without restrictions	☐	☐
limitations in more advanced fine motor skills	☐	☐
only ability to grasp	☐	☐
no functional ability	☐	☐

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

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

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

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

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

☐ **Both hands** have only ability to grasp

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

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

Communication Functional Classification System[5]

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

☐ **Effective Sender and Receiver with unfamiliar and familiar partners.** You independently alternate 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 your communication.

☐ **Effective but slower paced Sender and/or Receiver with unfamiliar and/or familiar partners.** You independently alternate 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. You may need extra time to understand messages, compose messages, and/or repair misunderstandings. Communication misunderstanding are often repaired and do not interfere with the eventual effectiveness of your communication with both unfamiliar and familiar partners

☐ **Effective Sender and Receiver with familiar partners.** You alternate 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.

☐ **Inconsistent Sender and/or Receiver with familiar partners.** You 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.

☐ **Seldom Effective Sender and Receiver even with familiar partners.** You are limited as both a sender and a receiver. Your communication is difficult for most people to understand. You may appear to have limited understanding of messages from most people. Communication is seldom effective even with familiar partners.

Eating and Drinking Ability Classification System (EDACS)[6]:

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

☐ Eats and drinks safely and efficiently.

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

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

☐ Eats and drinks with significant limitations to safety.

☐ 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., Nattrass 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 Neur 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.