

# Assessment of a Mobility Visual Impairment or Blindness

The assessment of a Mobility Visual Impairment or Blindness (MVI/B) combines information from the clinical eye report with observable walking outcomes to assist professionals in recognizing the mobility tool needs of learners in their care.

An MVI/B designation is a vision impairment that causes imbalanced, unprotected, uninformed travel. In practical terms, MVI/B designation signals that a mobility tool is a medical and educational necessity.

## 1. Clinical Description of Impairment

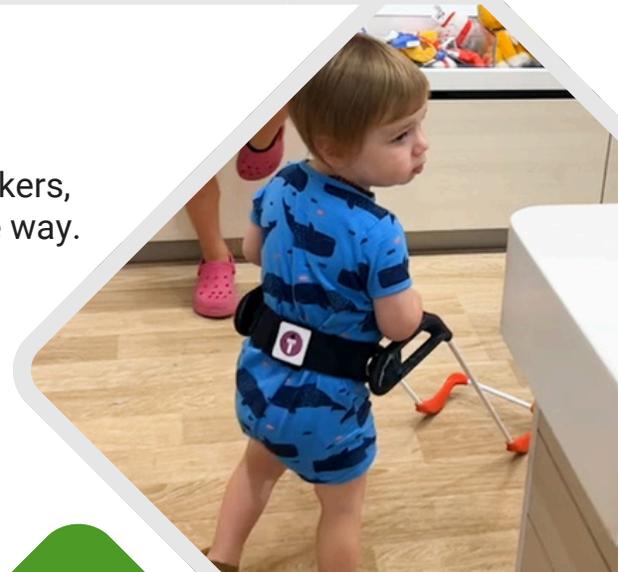
If any of the clinical terms/definitions describe the visual impairment in the child's better eye, the child has an MVI/B.

Description	Defintion	Present
Blind	No light perception to light projection	●
20/500 and above	Measureable Visual Acuity (VA)	●
Object form perception	No Measurable VA, sees shapes	●
Restricted field	Lower Field Impairment	●
Tunnel vision	20-degree field or worse	●
CVI	Unreliable visual feedback	●

### Recommendations

- Begin wearing a Pediatric Belt Cane at 10 months.
- MVI/B children with a motor impairment (e.g., use walkers, wheelchairs) also benefit from a Belt Cane leading the way.

The next pages evaluate the extent of the impact untreated MVI/B has had on an MV/B child's early walking development and physical activity.



# 2. Observable Outcomes

## A. Independent Walking Milestone Attainment

- Select child's current independent walking milestone.
  - With assistance means handheld or cruising furniture/wall.
  - Solo means without assistance, using a mobility tool.

Milestone Age	Observable Milestone Indicators	Present
10	Stands (with assistance)	<input checked="" type="checkbox"/>
11	Cruises (takes steps with assistance)	<input checked="" type="checkbox"/>
12	Walks with hand-held assistance	<input checked="" type="checkbox"/>
15	Walks solo, wide base, guard position	<input checked="" type="checkbox"/>
18	Walks narrow base, avoids objects	<input checked="" type="checkbox"/>
24	Runs solo, avoids objects	<input checked="" type="checkbox"/>

- Calculate child's motor milestone age and circle descriptor (delay, on-target, or ahead).

Child's Current Age: \_\_\_\_\_ - \_\_\_\_\_ = \_\_\_\_\_  
 Today's Date    Date of Birth    Months

Highest Milestone Age Observed: \_\_\_\_\_  
 Months

Current Age - Motor Milestone = \_\_\_\_\_  
 Delay, On-target, Ahead

**Example** 37 months - 15 months = 12 month  
Delay, On-target, Ahead

## B. Recommended Daily Physical Activity by Age 2

1. Review the child's typical day including transitions and play and calculate number of hours per day the child is moving about, on average.
  - a. Select the physical activity hours and assistance type that best describe the child during routine daily activities.

Physical Activity Age	Hours	Assistance Type	Present
10	0-1	Full Verbal/Physical	<input checked="" type="radio"/>
11	1-2	Full Verbal/Physical	<input checked="" type="radio"/>
12	3-5	Partial Verbal/Physical	<input checked="" type="radio"/>
15	4-6	Fading Verbal/Physical	<input checked="" type="radio"/>
18	6-8	Introduce Rules	<input checked="" type="radio"/>
24 and above	9-12	Follows Rules	<input checked="" type="radio"/>

2. Compare child's current physical activity to age-based recommendation and circle most appropriate description (deficit, on-target, or surplus).

Child's Current Age: \_\_\_\_\_ - \_\_\_\_\_ = \_\_\_\_\_  
Today's Date      Date of Birth      Age

Age-recommended Physical Activity: \_\_\_\_\_  
Hours

Current Physical Activity Hours = \_\_\_\_\_  
Deficit, On-target, Surplus

**Example**  
 9-12 hours/day - 3-5 hours/day = 6-7 hour  
Deficit, On-target, Surplus

## C. Video Observation of Physical Activity

### 1. Record Observable Walking Incidents and Activities

#### **BACKGROUND**

Full Name: \_\_\_\_\_ Today's Date: \_\_\_\_\_

Job Title: \_\_\_\_\_ Contact info: \_\_\_\_\_

Child's Name: \_\_\_\_\_

Background: \_\_\_\_\_

#### **ACTIVITY DETAILS**

Check that box that best describes the nature of child's activity.

Playing with child

Watching child

Calling child

Leading child

Pushing child

Other: \_\_\_\_\_

Date of Observation: \_\_\_\_\_ Time of Observation: \_\_\_\_\_

Location of Observation: \_\_\_\_\_

List the child's activities: Laying, sitting, crawling, standing with assistance, walking with assistance, standing solo, walking solo, or solo running.

Activity	Describe Any Contact Incidents	Time



# Report

Use this checklist to indicate rationale and goals for MVI/B child's Pediatric Belt Cane.

## Recommend a Pediatric Belt Cane (check all that apply)

- Eye Condition.
- Motor milestone delay.
- Physical activity deficit.
- Observation of activities included unavoidable bodily contacts.



## Recommended Usage Hours

- 1-2 hours not consecutive (10 to 12 months, during therapy).
- 3-5 hours per day, child is age 15 to 24 months.
- 7 plus hours per day, child is above the age of 2 years.



## Mobility Skills to be Taught (check all that apply)

- Righting the cane frame - whenever it goes off-center.
- Stop at the drop - immediate, consistent response.
- Ascending Stairs - independent balance and handrail use.
- Manual Doors - cane frame goes first.

