

Wheelchair Skills Test Questionnaire (WST-Q), Version 4.3
Powered Wheelchairs Operated by Wheelchair Users

Name of the wheelchair user: _____ Date: _____

Person completing questionnaire (if not user): _____

Relationship between the wheelchair user and the person who helped him/her: _____

#	Individual Skill	Capacity (0-2)	Confidence (0-2)	Performance (0-4)	Training Goal? (Y/N)
1	Moves controller away and back				
2	Turns power on and off				
3	Selects drive modes and speeds				
4	Operates body positioning options				
5	Disengages and engages motors				
6	Operates battery charger				
7	Rolls forwards short distance				
8	Rolls backwards short distance				
9	Turns in place				
10	Turns while moving forwards				
11	Turns while moving backwards				
12	Maneuvers sideways				
13	Reaches high object				
14	Picks object from floor				
15	Relieves weight from buttocks				
16	Level transfer				
17	Gets through hinged door				
18	Rolls longer distance				
19	Avoids moving obstacles				
20	Ascends slight incline				
21	Descends slight incline				
22	Ascends steep incline				
23	Descends steep incline				
24	Rolls across side-slope				
25	Rolls on soft surface				
26	Gets over threshold				
27	Gets over gap				
28	Ascends low curb				
29	Descends low curb				
30	Gets from ground into wheelchair				
Total scores:			%		

General comments:

Training goals described by the wheelchair user, other than those noted for specific skills:

Name and address of any person(s) to whom the test subject would like a copy of the report to be sent.

Details about the WST can be found in the WSP Manual at www.wheelchairskillsprogram.ca.