Transfer Assessment Instrument Questionnaire (TAI-Q) – Independent Transfers

This tool is designed to objectively unassisted transfers. The tool breaks down the transfer into three components: wheelchair setup, body set up, and flight/landing. Scoring differs based on whether the user is transferring from a manual or power wheelchair. Each section of the tool should be completed before advancing to the next phase. It is written in user-centered language but can be utilized by end users, their caregivers, and clinicians. Space is allotted to score a transfer to and from a surface (2 total transfers), however only one transfer is necessary to use the tool.

Select Wheelchair Type: Power wheelchair Manual wheelchair Do you use a sliding board when transferring? Yes No	
Phase I: Wheelchair Setup	
Set up your wheelchair to transfer to another surface (bed, mat table, couch), then following questions.	answer the
 Using a ruler (if available), measure the distance from the front corner of your wheelchair to the object to which you are transferring. What is the distance? a. Less than 3 inches b. 3-5 inches c. Greater than 5 inches What is the angle between your wheelchair and the mat? 	Scoring Transfer 1 Transfer 2
Use an angle measurement tool if possible (see appendix). a. 0-19 degrees b. 20-45 degrees c. 46-90 degrees 1 0-19° 20-45°	Transfer 1 Transfer 2
3. Did you lock the brakes on your wheelchair? a. Yes, I engaged the brakes (manual wheelchair) b. Yes, I turned my wheelchair off (power wheelchair)	Transfer 1 Transfer 2

d. Not applicable, my wheelchair does not have brakes

- 4. Did you remove the armrest from your chair? a. Yes
 - b. No, but my wheelchair does have armrests
 - c. Not applicable, my wheelchair does not have armrests
 - d. Not possible, my wheelchair has armrests but they cannot be removed (bolted in, welded)
- 5. Did you remove the clothing/sides guards or postural supports (thigh guides, lateral supports) from your chair?
 - a. Yes
 - b. No
 - c. No, however my clothing/sideguards don't go any higher than my wheel
 - d. Not applicable, my wheelchair does not have clothing/side guards
 - e. Not possible, my wheelchair has clothing/side guards but they cannot be removed (bolted in, welded)
- 6. Was your transfer set up to be level (top of cushion is level with the surface you are transferring to)? Use a ruler (if possible) to measure the difference in height between the top of the front corner your cushion and the surface you are transferring to. What is the distance?
 - a. My cushion height is within 1 inch of the surface
 - b. My cushion is more than 1 inch higher
 - c. My cushion is more than 1 inch lower
 - d. Not possible to adjust height of wheelchair/transfer destination



Scor Transfer 1	_
Transfer 1	Transfer 2
Transfer 1	Transfer 2

Phase II: Body Setup

Position your body for the transfer, adjusting your hips and legs as you normally would, then answer the following questions

- 7. Where are your feet?
 - a. Both on footplate
 - b. One on footplate, one on the ground
 - c. Both up on the surface I am transferring to
 - d. One up on the surface I am transferring to and one on the ground/footplate
 - e. Both on the floor
 - f. One on floor (I am a single limb amputee)
 - g. One on footplate (I am a single limb amputee)
 - h. Not touching any surface (I am a double limb amputee)
- 8. Did you scoot to your hips to the front of your seat, so at least 1/3 of your thigh was off the surface?
 - a. Yes
 - b. No
 - c. Not possible, I am unable to maintain my balance in this position
- 9. Where is your leading arm (see images) once you position it to transfer?
 - a. On the surface I am transferring to behind my hip
 - b. On the surface I am transferring to between my hip and knee
 - c. On the surface I am transferring to past my knee
 - d. It is in my lap, I don't use this arm during my transfer

Transfer 1 Transfer 2
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Transfer 1 Transfer 2
Transfer 1 Transfer 2

Scoring



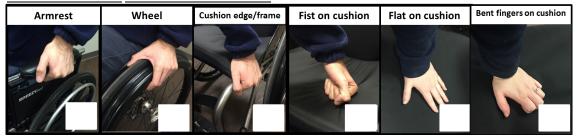
Transfer

Phase III: Flight

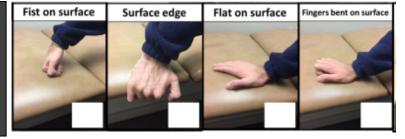
Complete your transfer between surfaces, then answer the questions on the following pages

10. Identify the type of surface you transferred <u>FROM</u>. Then, check the box of the type of hand position that most closely represents the hand position you used for your <u>push off hand</u> when <u>your hips were moving</u> between surfaces. CHECK ALL THAT APPLY.

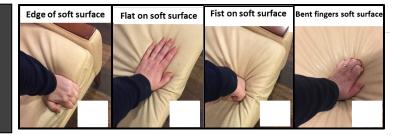
Wheelchair



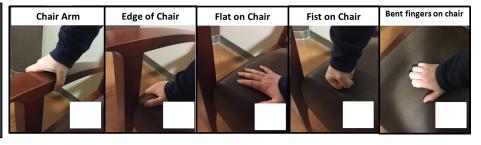
Firm Surface



Soft Surface (Bed/Couch)



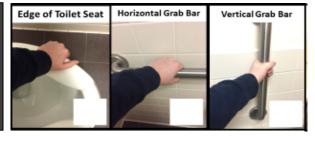
Chair

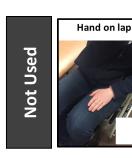


Scoring	

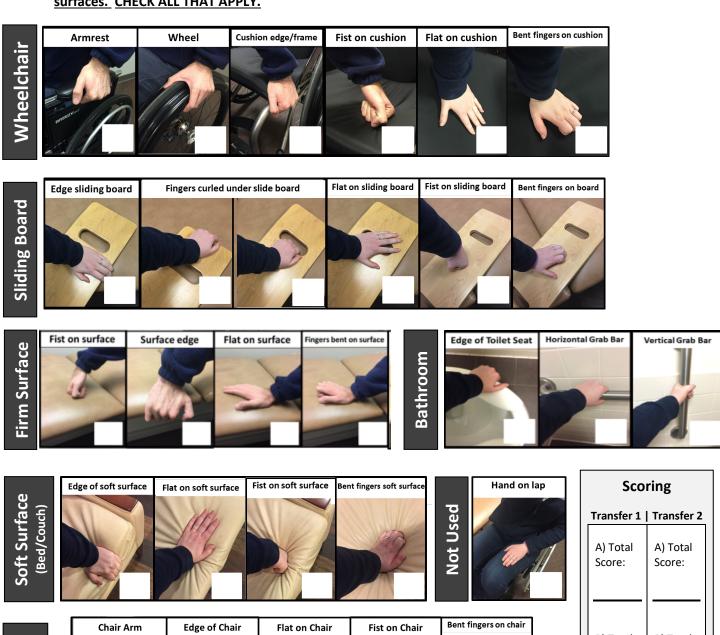
Transfer 1	Transfer 2
A) Total Score:	A) Total Score:
B) Total # Positions Used:	B) Total # Positions Used:
Score = A/B	Score = A/B

Bathroom



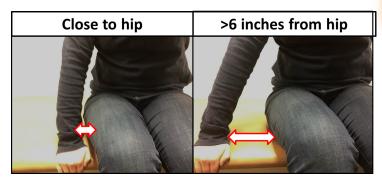


11. Identify the type of surface you transferred <u>TO</u>. Then, check the box of the type of hand position that most closely represents the hand position you used for your <u>leading hand</u> when <u>your hips were moving between surfaces.</u> <u>CHECK ALL THAT APPLY.</u>



Chair Arm	Edge of Chair	Flat on Chair	Fist on Chair	Bent fingers on chair
			600	
, , , , , , , , , , , , , , , , , , ,				

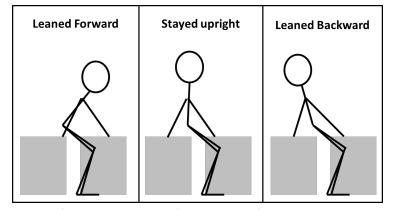
- 12. When you <u>finished</u> the transfer, where was your <u>leading hand</u> (see image) in relation to your hips?
 - a. Close to my hip
 - b. More than 6 inches from my hip





Scoring	
Transfer 1	Transfer 2

- 13. When you transferred between surfaces which way were you leaning?
 - a. I was leaning backward, towards the surface I was transferring to
 - b. My body remained upright
 - c. I was leaning forward, away from the surface I was transferring to
 - d. I'm not sure



- 14. When you transferred between surfaces did you (please circle all that apply):
 - a. Perform the movement in one smooth and fluid motion
 - b. Use multiple 'scoots' to complete my transfer
 - c. Land or rest on the tire
 - d. Perform the movement in an abrupt manner where you had to change directions or body positions in rapid manner to avoid falling (unintentionally landing on an undesired surface)
 - e. Experienced a near fall (unintentionally landing on an undesired surface)
 - f. Experience a fall (unintentionally landing on an undesired surface)
- 15. When you landed on the target surface (please circle all that apply):
 - a. No excessive movement occurred (no loss of balance)
 - b. Experienced excessive movement (loss of balance) but did not unintentionally land on an undesired surface (experience a fall)
 - c. Experienced excessive movement (loss of balance) and some part of your body unintentionally landed on an undesired surface (experience a fall)

Transfer 1	Transfer 2

Transfer 1	Transfer 2
(lowest	(lowest
possible	possible
score: 0)	score: 0)

Transfer 1 Transfer 2	
(lowest	(lowest
possible	possible
score: 0)	score: 0)

- 16. When you transfer do you:
 - a. Always lead with the same arm
 - b. Alternate which arm you lead with

Assistive Technology

- 17. I use assistive technology (such as a transfer board or lift):
 - a. Never, I am strong enough to perform the transfer without a struggle
 - b. Never, however I sometimes feel that I struggle to complete the transfer
 - c. Sometimes when I feel tired or weak
 - d. Sometimes, due to pain
 - e. Sometimes for safety or to preserve my arms
 - f. All of the time because of fatigue or strength limitations
- 18. If a sliding is used, when using the board do you:
 - a. Perform the transfer as multiple 'lifts'/'scoots', picking up your hips and placing them over several steps
 - b. Slide your hips along the board

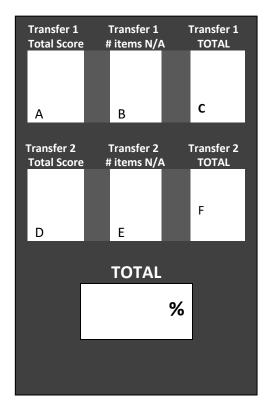
Scoring
Transfer 1 Transfer 2
Transfer 1 Transfer 2
Transfer 1 Transfer 2

To calculate total score for Independent Transfers:

- 1. Sum all scores for Transfer 1 items (Box A)
- 2. Count # N/A items for Transfer 1 (Box B)
- 3. Calculate a score for Transfer 1 (Box C): a. 100% x A (19-B)

Ignore remaining steps if only 1 transfer completed

- 4. Sum all scores for Transfer 2 items (Box D)
- 5. Count # N/A items for Transfer 2 (Box E)
- 6. Calculate a score for Transfer 2 (Box F):
 - a. 100% x D (19-E)
- 7. Calculate the total score:
 - a. C+F/2



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