



Family Pre-Assessment Guide

Please fill in, save and email to info@chunc.co.uk

Helping you prepare for your clinical assessment

Your experience of the wheelchair and how it supports everyday life is an important part of the assessment. This short guide is designed to help you think about what is working, what has changed, what matters most and what you would like to achieve. You do not need to know the technical terms or equipment specifications. There are no right or wrong answers.

Your therapist will complete the detailed clinical assessment and work with you to decide what is needed.

Patient Details

Client Name:	Email Address:
Phone Number:	Postcode:
Therapist:	Funding: ☐ Private ☐ NHS ☐ Charity ☐ Other

1. Where are we now?

What wheelchair or seating system does your son/daughter currently use?	
How long have they had it?	
What works well? What do you like about the current wheelchair or seating? Is there anything you would like to keep?	
What isn't working well?	

2. How does the wheelchair help with day to day life?

How do you use the wheelchair? For example, getting around at home/school, spending time with family/friends, eating, communicating, being independent	
What are the three most important things you would like the wheelchair to help with?	1. 2. 3.

3. What has changed?

Since the current wheelchair was provided, what has changed for the chair user?	Please Tick
They have grown or their body has changed	☐
What they can do has changed	☐
Their posture or positioning has changed	☐
They use their wheelchair more or differently	☐
Their home, school, or daily activities have changed	☐
The wheelchair no longer feels like the right fit	☐
The wheelchair is worn, damaged, or difficult to use	☐
Nothing significant has changed	☐
Other: (please specify)	

4. Comfort, posture & positioning

Are there any concerns about comfort, posture, or staying in a good position?	☐ No concerns ☐ Yes
If yes, please specify:	

5. What matters most?

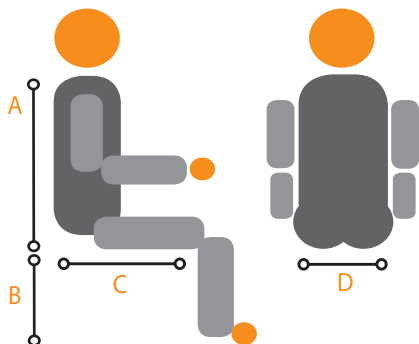
What would you most like to be different after the assessment?	
What is the biggest challenge at the moment?	
If the wheelchair user could tell us themselves, what would they like to be different?	

6. Getting ready for your assessment

What would you most like to discuss with your therapist?	
Is there anything you are worried about, unsure about, or would like your therapist to understand?	

If you would like to book a chair assessment, please complete the following section:

Measurements



- A. Back Height.** This is how tall the back of the chair needs to be.
Think: Measure from the top of your shoulder down to where your bottom touches the seat.
- B. Lower Leg Length.** This tells us how high the footrests should be.
Think: Measure from the back of your knee down to your heels while sitting.
- C. Seat Depth.** This helps us choose how deep the seat should be.
Think: Measure from the base of your spine (where your lower back meets the seat) to the back of your knee.
- D. Seat Width.** This ensures the chair isn't too tight or too wide.
Think: Measure the width of your hips from the outside of one hip to the outside of the other.

Please specify your measurements using the above guides

A (cm/in)		B (cm/in)		C (cm/in)		D (cm/in)	
cm	in	cm	in	cm	in	cm	in

Where will the assessment take place?	☐ School ☐ Home ☐ WCS
Address for assessment	
Is there appropriate parking for a van?	☐ Yes ☐ No
If no, please specify nearest location	
What days/times are most suitable for an assessment?	☐ Mon ☐ Tues ☐ Weds ☐ Thurs ☐ Fri ☐ AM ☐ PM
Where did you hear about us?	☐ Social Media ☐ Search Engine ☐ Exhibition ☐ Publication ☐ Therapist ☐ School ☐ Other:

Thank you. We will be in touch to arrange an assessment or discuss your enquiry in more detail.

Special Requests/Additional Comments

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