



# PCA Context Guide — Mobility Support (Informative)

*(PCA Quality Service Standard)*

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## Foreword

This PCA Context Guide supports interpretation of quality in **mobility support** situations.

Mobility support includes assistance with activities such as:

- moving from bed to chair, chair to toilet, or similar transfers
- standing, sitting, and repositioning
- walking short distances
- adjusting support as strength, balance, or endurance changes

Mobility situations can involve changing conditions and increased risk of harm if support is not adjusted in time. Quality in mobility support depends not only on whether movement occurs, but on **how safely, respectfully, and appropriately assistance is provided**.

This PCA Context Guide:

- does **not** introduce requirements
- does **not** prescribe tasks, steps, procedures, or techniques
- does **not** modify or replace the **PCA Quality Service Standard — Core**

It illustrates how the **same Quality Factors with Indicators** defined in the Core Standard may be expressed in mobility contexts.

Mobility support is presented here as **one example**. Other PCA activities and contexts exist, and additional PCA Context Guides may be developed without changing the PCA Core Standard.

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## CG-M.1 Purpose of this PCA Context Guide

This PCA Context Guide provides **context-specific illustrative guidance** on how the **PCA Quality Service Standard — Core** may be interpreted and applied in **mobility support** situations.

This Guide:

- Is **informative only**
- Does **not** introduce requirements
- Does **not** prescribe tasks, procedures, or techniques
- Does **not** modify or replace the PCA Core Standard
- Applies across **all employment models** (agency-based, consumer-directed, family caregiver, hybrid)

Mobility support is used here as an example of how quality concepts apply in contexts involving **physical movement, balance, and dynamic risk**.

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## CG-M.2 Position within the Document Set

This **PCA Context Guide — Mobility Support (CG-M)** is an **informative** document within the PCA Quality Service Standard document set. It provides task-anchored, context-specific guidance to support interpretation and application of the **PCA Quality Service Standard — Core** in mobility support situations. This Guide does not introduce requirements and does not modify the Core Standard.

### CG-M.2A Relationship to the Context Guides Framework (PFS1)

This Context Guide is governed by the **PCA Context Guides Framework — Structure, Use, and Boundaries (PFS1)**. PFS1 defines how Context Guides are structured, how **task context** and **functional limitation context** are treated, and how disability-related variation is addressed without creating diagnosis-based guidance.

This Mobility Support Context Guide remains **task-anchored** and **diagnosis-neutral**. Where mobility support is affected by functional limitations (for example, strength, balance, coordination, endurance, cognition, sensory processing, or behavioral regulation), this Guide should be used together with any applicable **Functional Limitation Appendices** developed in accordance with PFS1.

This Guide is intended to be used together with:

- **PCA Quality Service Standard — Core** (*normative*)
- **PCA Foundational Guidance** (*informative; cross-cutting caregiving understanding*)
- **CG-M Annex A** (*illustrative examples*)
- **CG-M Annex B** (*role of Context Guides*)

This Guide derives its authority solely from the **PCA Quality Service Standard — Core**.

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## CG-M.3 Interpretation Rule

**All Quality Factors and their Indicators defined in the PCA Quality Service Standard — Core apply to mobility support.**

This PCA Context Guide does **not select, limit, or vary** Quality Factors or Indicators.

It highlights how the **same invariant Quality Factors and Indicators** are **commonly expressed or stressed** in mobility contexts.

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## CG-M.4 Mobility as a Care Context

Mobility support typically involves:

- Transfers (e.g., bed, chair, toilet)
- Ambulation or repositioning
- Variable strength, balance, and endurance
- Environmental hazards (e.g., uneven surfaces, clutter)
- Day-to-day or moment-to-moment changes in ability

Quality in mobility support depends on **continuous assessment, adaptive assistance, and appropriate judgment**, rather than fixed assumptions.

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## CG-M.5 Quality Factors — Contextual Expression in Mobility

While **all Quality Factors apply**, mobility support often makes the following quality dimensions **most visible**:

- **Protection from Foreseeable Harm**  
(e.g., falls, sudden instability)
- **Maintenance of Health & Bodily Integrity**  
(e.g., joint stress, skin injury, fatigue)
- **Support for Daily Functioning**  
(e.g., enabling movement without over-assistance)
- **Timely Recognition & Escalation of Risk**  
(e.g., dizziness, pain, loss of balance)
- **Continuity of Information**  
(e.g., communicating changes in mobility status)
- **Scope-Appropriate Practice & Judgment**  
(e.g., stopping assistance when unsafe)

These emphases **do not exclude** other Quality Factors.

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## CG-M.6 Illustrative Indicator Interpretation

The mobility context illustrates how existing Indicators from the Core may be interpreted, for example:

- Aligning assistance with **real-time functional ability**, not prior performance
- Adjusting or pausing assistance when instability or fatigue appears
- Supporting participation without forcing movement
- Recognizing and communicating changes in mobility or tolerance
- Exercising judgment within role limits and seeking assistance when needed

These interpretations **do not add indicators** and **do not redefine** them.

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## CG-M.7 Illustrative Quality Outcome Criteria — Mobility

Quality Outcome Criteria for mobility are **context-specific** and **person-specific**, but may be illustrated by outcomes such as:

- Movement and transfers occur without avoidable harm
- Assistance adapts to fluctuating strength, balance, or endurance
- Confidence and functional capacity are preserved where possible
- Emerging risks are recognized promptly and escalated appropriately
- Relevant mobility changes are communicated to support continuity of care

These outcomes illustrate **appropriate achievement**, not universal thresholds.

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## CG-M.8 Relationship to Training and Task Descriptions

Training materials or task descriptions (e.g., personal care aide curricula) may describe how mobility assistance is commonly performed and may address important elements of good practice (such as safety precautions, body mechanics, and respectful interaction). However, they do not provide a complete, stable definition of service quality across contexts as defined in the PCA Quality Service Standard — Core.

This PCA Context Guide:

- Uses general caregiving knowledge as background
  - Translates that knowledge into **quality-relevant considerations**
  - Avoids embedding procedures or techniques
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## CG-M.9 Employment-Model Neutrality

This PCA Context Guide applies regardless of employment arrangement.

Differences in supervision, documentation, or coding **do not change**:

- Applicable Quality Factors
  - Applicable Indicators
  - The quality logic of mobility support
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## CG-M.10 Key Takeaway — Mobility Context

**In mobility support, quality is demonstrated not only by movement achieved, but by appropriate achievement of specified Quality Outcome Criteria, interpreted through invariant Quality Factors and Indicators in a context of dynamic physical risk.**

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