



App	end	ix	2

TREATMENT PLANNING GUIDE

Client:			Date:	
Area of dyscontrol (identified from		Treatment suggestions		Additional treatment
reactive balance assessment)				strategies/comments
	Failed step reactions – requires		Start with low-magnitude perturbation,	
	external assistance (from the therapist		increase magnitude as tolerated	
	and/or safety harness) to regain stability		Consider other problems that	
			contribute, like delayed stepping or no	
			stepping	
	Does not step when magnitude of		Instruct client to step when s/he feels	
	perturbation requires a step		unstable	
			Start with low-magnitude perturbations	
			Start with predictable time/direction of	
			perturbation	
			Practice the step prior to perturbation	
			Consider other problems that	
			contribute, like unwillingness to step	
			with one limb	
	Has low foot clearance during reactive		Use obstacles to encourage a step-over	
	steps: foot 'slides', or shuffles			

Version date: 24 August 2021 Page 1 of 3



Reactive Balance Training Toolkit

Area of dyscontrol (identified from	Treatment suggestions	Additional treatment
reactive balance assessment)		strategies/comments
☐ Demonstrates delayed stepping reaction	☐ Instruct client to step as quickly as	
l l l l l l l l l l l l l l l l l l l	possible	
	Start with predictable time/direction of	
	perturbation	
	☐ If delay is with one limb specific (e.g.,	
	paretic limb for clients with stroke),	
	have client weight-shift to the opposite	
	limb prior to perturbation	
☐ Is unwilling/unable to step with both	☐ Block the preferred limb with obstacles,	
limbs	or hand/foot of therapist	
	☐ Instruct client to step with non-	
	preferred limb	
	☐ Start with predictable time/direction of	
	perturbation	
	☐ Time perturbation to coincide with non-	
	preferred leg/foot being un-weighted	
☐ Demonstrates multi-step reactions	☐ Instruct client to take as few steps as	
	possible	
	☐ Instruct client to take long(er) steps	
	☐ Choose voluntary tasks that require	
	stepping to targets (step and hold on	
	that spot)	
☐ Stands asymmetrically prior to	☐ Instruct client to increase loading on the	
perturbation	less-loaded limb	
	☐ Consider using video or feedback of	
	stance symmetry	
☐ Takes short reactive steps	☐ Instruct client to take longer steps	
	☐ Step to targets	
	☐ Step over obstacles	

Version date: 24 August 2021 Page 2 of 3



Reactive Balance Training Toolkit

	T	La da a
Area of dyscontrol (identified from	Treatment suggestions	Additional treatment
reactive balance assessment)		strategies/comments
☐ Attempts to use upper extremity to	☐ Therapist should stand as far away as	
regain stability	safely possible	
	☐ Instruct to not use reach-to-grasp	
	reactions	
	☐ Have client hold object to prevent	
	grasping	
☐ Falls laterally on step termination when	☐ Instruct client to take as few steps as	
responding to antero-posterior	possible	
perturbations*	☐ Start with low-magnitude perturbation	
	☐ Try forward/backward perturbations	
	initially with a narrow base of support	
	☐ Choose voluntary tasks that require	
	stepping to targets (step and hold on	
	that spot)	
☐ Experiences limb collisions when	☐ Instruct client to use side-stepping	
responding to lateral perturbations	strategy	
	☐ Place large obstacles in front and	
	behind client to deter 'crossover' step	
	reactions*	
☐ Is unable to step equally well in all	☐ Use multi-directional perturbations	
directions	☐ Do more perturbations in the most	
	challenging direction	

^{*}See accompanying videos for more information about these step patterns.

Version date: 24 August 2021 Page 3 of 3