# Certified Orientation and Mobility Specialist (COMS)

# Scope of Practice1

Certified Orientation and Mobility Specialists (COMS) are skilled, qualified professionals who teach skills for independent travel across the lifespan (e.g. children, youth, adults) who have low vision or blindness. Many clients have additional disabilities including deafblindness, physical limitations, intellectual disability, mental health problems and social complexities. COMS stay current in their practice by recertifying every five years and are bound by a strong Code of Ethics.

A COMS completes a comprehensive assessment of a client’s travel skills and needs as a foundation for program design. This assessment includes interviews, a review of medical records, observation of skill performance in a range of settings, and evaluation of sensory abilities and their development, including any functional vision. Program planning also includes an evaluation of travel environments for their accessibility and sequencing suited to the individual client’s abilities. Throughout training, the COMS conducts ongoing assessments of the client’s development and performance and adjusts instruction accordingly.

Assessment, planning and learning activities must be adapted to fit the individual needs of each client, taking into account age, strengths and limitations, learning style and cultural background. For example, a COMS working with children will focus more on motor and concept development while a COMS working with older adults will be more mindful of fall prevention. Program plans are developed in consultation with the client, family, support network and/or legal representative, according to the individual needs and goals of each client.

A COMS provides training that empowers individuals with blindness or low vision to travel safely, efficiently, and as independently as possible in home, school and community environments. Individualized programs may include training in sensory development, skills and concepts for community travel, and the use of a variety of low vision, mobility, or orientation technologies. Conceptual development lays the foundation for all orientation and mobility instruction, and for some, begins with awareness and knowledge of body parts, planes and movements and progresses to understanding basic and complex spatial, directional, positional, distance, time and environmental concepts. Sensory awareness and perceptual training may address visual efficiency skills and development of auditory and tactile skills and is typically integrated with the use of the long cane or other mobility or low vision devices. Mobility skills instruction focuses on safe movement and may involve guide techniques, protective techniques, and the use of mobility devices, such as the long cane or adapted mobility devices. Safe street crossings and negotiation of stairs, elevators, escalators and revolving doors are all aspects of community mobility skills. Orientation skills instruction focuses on cognitive mapping and spatial updating skills and typically addresses route planning and travel as a pedestrian, with use of public buses and rail, paratransit systems, and ride-sharing and ride-hailing options. Development of orientation may involve training in the use of a variety of wayfinding technologies, such as accessible GPS and mapping technologies. These instructional domains are highly interwoven and the COMS must conduct ongoing assessment of the client’s progress and performance in each area and adjust instruction accordingly.

COMS provide instruction in the following service areas, including but not limited to:

1. **Concept Development:** body image, spatial relations, temporal, positional, directional, environmental and social.
2. **Sensory Awareness and Perceptual Development:** visual, auditory, vestibular, kinesthetic, tactile, olfactory, haptic, and proprioception sensory information, and the interrelationships of these systems.
3. **Orientation:** identification of landmarks, spatial orientation methods, using environmental feedback, relative position, wayfinding, problem-solving, and echoidentification, route planning and reversal, and supporting guide dog teams.
4. **Mobility Systems and Techniques:**
	1. Techniques and Tools Taught

Human Guide technique, long canes, identification canes, adapted mobility devices, support for the guide dog team, and public transportation systems (bus, rail systems, taxi, paratransit, ride-sharing, hired drivers, etc.).

* 1. Devices Prescribed by Other Disciplines

Based on referral to the appropriate professional, collabarative instruction for techniques and devices, such as support canes, wheelchairs, motorized mobility scooters, and bicycles

1. **Blind and Vision-assisted Travel Skills:** self-protection, systematic search patterns, self-familiarization, trailing, turns, landmarks/clues, orientation systems, long cane skills, readiness for a guide dog, visual efficiency during travel, managing glare and visual fatigue, use of assistive technologies.
2. **Street Crossing Techniques:** visual and non-visual street crossing strategies, intersection types, traffic management systems (e.g., signs, lines, traffic lights, islands, roundabouts, channelized turn lane, Accessible Pedestrian Signals), traffic patterns, light cycles, veer correction, risk analysis, and use of low vision devices.
3. **Assistive and Access Technologies:** low- and high-tech devices, mobility devices (long cane, Adapted Mobility Devices (AMD), low vision tools/devices, map-making and use (visual, tactual, and/or haptic), electronic travel aids, electronic orientation aids (GPS, wayfinding applications for mobile devices, and live-streaming/visual interpretation services.
4. **Environmental Access:** tools: 2D- and 3D-Maps (visual, tactual, haptic), 2D- and 3D-graphics (visual, tactual, haptic), signage (visual, tactual), legislation: Accessibility rights and standards (e.g. United Nations Convention on the Rights of Persons with Disabilities, Americans with Disabilities Act, etc.), public rights-of-ways, accommodations and modifications for learning/employment; principles: social equity, universal design
5. **Self-Determination:** safety awareness, self-advocacy, soliciting/declining assistance, giving/receiving directions; advocacy and community education, informed choices

A COMS can be employed in public schools, hospitals, schools for the blind, low vision/blindness agencies, or work as private contractors. Programs typically take place in the types of travel environments in which a client will be travelling. Program sequencing generally proceeds from less to more complex environments, and the COMS’s support is gradually withdrawn as independent travel skills develop.

The COMS will generally work on a one-to-one basis with clients but might work as part of an interdisciplinary team and/or offer group programs. A COMS collaborates with other vision, allied health, and education professionals and social services to provide a comprehensive approach to the client’s needs.

A COMS advocates for increased accessibility of the general travel environment, and liaises with other professionals and the broader community. This advocacy often requires a knowledge of transportation systems in the local community and the ability to network with traffic engineers and city planners on urban travel design. The COMS may also offer published resources (handouts, brochures, newsletters, etc.) or participate in workshops, seminars and other community-based events.

A COMS promotes safe and independent travel to help clients reach their goals for education, employment and full inclusion in family and community life.