**PERSONAL SUPPORT INVENTORY**

To be filled out by:

***Parent/Family/Guardian/Support person***

**Instructions:** Please use the following scale to represent level of functioning in each section

* (3) Student is independent
* (2) Student requires some/moderate support
* (1) Student requires complete support

**Where necessary, write notes to explain scaled responses**

**EATING AND FOOD PREPARATION**

|  |  |
| --- | --- |
| **Preparing meals and snacks:**Gathers ingredients and equipmentOpens containersFollows recipeUses microwaveUses stove topUses ovenUses other appliances | Current Level of Functioning |
| **Eating meal /snack**Oral motor skills i.e. chewing/swallowingUses utensilsUses manners | Current Level of Functioning |
| **Preparing eating area**Sets tableGets condiments | Current Level of Functioning |
| **Cleaning up after meal**Puts away leftoversWipes off work surfaceWashes dishes * Hand washing
* Using Dishwasher
 | Current Level of Functioning |
| **Accessibility to kitchen**Uses adaptive equipment | Current Level of Functioning |
| **Priorities:** |  |

**GROOMING AND DRESSING**

|  |  |
| --- | --- |
| **Grooming:**Brushes teethUses mouthwashBrushes/combs hairStyles hairSkin careUses make-upCleans eyeglassesCleans hearing aid ear moldsMaintains appearance | Current Level of Functioning |
| **Dressing/Undressing**Dresses and Undresses selfChooses appropriate clothesDresses appropriately for season/weather conditions | Current Level of Functioning |
| **Priorities:** |  |

**HYGIENE AND TOILETING**

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| --- | --- |
| **Using private & public toilets**toileting needswashes handsBath / showeringShampooing / rinsing hairManaging menstrual care**Shaving**MenWomenUsing deodorant | Current Level of Functioning |
| **Priorities:** |  |

**SEXUALITY, HEALTH, SAFETY**

|  |  |
| --- | --- |
| **Awareness of sexuality issues**Awareness of public vs. private activitiesCloses door for bathing, toileting, dressing, etc.Appropriate show of affectionAppropriate control of sexual needsAwareness of bodily and sexual functionsKnowledge and use of birth control methodsKnowledge of sexually transmitted disease | Current Level of Functioning |
| **Knowledge of general health concerns**Disease transmission (i.e., covers mouth whensneezing/coughing, controls drooling, blows nose,etc.)Health concerns specific to disability (i.e., skin care,range of motion, positioning of weight)Manages medication (i.e., knows medicationschedule, ability to swallow, related behavioralconcerns)Cares for minor injury and/ or illness | Current Level of Functioning |
| **Awareness of home hazards and emergency****procedures**Uses adaptive strategiesPoisonsFireAccidents | Current Level of Functioning |
| **Priorities:** |  |

**HOUSEHOLD MAINTENANCE**

|  |  |
| --- | --- |
| **Keeping room neat**Makes bedChanges bed linensStraightens room | Current Level of Functioning |
| **Handling of household chores**Does laundryVacuums / dustsCleans bathroomSweeps | Current Level of Functioning |
| **Maintaining outdoors**Rakes leavesMows lawnWeedsWaters lawn and plantsCleans up after animals | Current Level of Functioning |
| **Priorities:** |  |

**TRAVEL**

|  |  |
| --- | --- |
| **"Walking„ (Wheeling) to and from destination**safety when crossing streetsarrives at destination | Current Level of Functioning |
| **Riding Bicycle**knows safety rulesable to find waylocks bicycle | Current Level of Functioning |
| **Riding School/City Bus**demonstrates appropriate behavior when on the buscommunicates with bus drivercan find appropriate buscan read bus mapcan make a transferknows how to payshows buss pass | Current Level of Functioning |
| **Driving Own Vehicle**knows lawsuses seat beltsknows what to do in an emergencyuses appropriate adaptive equipmentdemonstrates safe & defensive technique | Current Level of Functioning |
| **Orienting Skills**identifies signscarries identificationasks for helpresponsible for possessionsuses cautions with strangersreads maps | Current Level of Functioning |
| **Priorities:** |  |

**GENERAL SHOPPING**

|  |  |
| --- | --- |
| **Handling Money/Budgeting**makes shopping listsknows budget constraintshandles money exchanges | Current Level of Functioning |
| **Locating/Getting Items**pushes cartuses store directoryasks for helpfollows listmakes appropriate choicesdoes cost comparisons | Current Level of Functioning |
| **Clothes/Personal Items**selects appropriate storeasks for helpselects items within budgetknows sizesmakes wise choiceshandles money exchange | Current Level of Functioning |
| **Restaurant**"reads" Menu (or alternative)communicates to Waitpersonuses Mannerslocates Restroomstallies bill (including tip)handles money exchanges | Current Level of Functioning |
| **Priorities:** |  |

**USING SERVICES**

|  |  |
| --- | --- |
| **Using Services**uses pay phoneuses Relay system (if hearing impaireduses Beauty parlormakes Appointmentsuses Banking Servicesuses/Communicates with dentist, doctor, etc.uses Laundry/drycleaner | Current Level of Functioning |
| **Priorities:** |  |

**PLANNING/SCHEDULING**

|  |  |
| --- | --- |
| **Following daily routines**shows up on timegets to where they are supposed to beadapts to changes in routineable to tell time | Current Level of Functioning |
| **Scheduling weekly activities**uses a time management system (i.e.,calender/daytimer)maps out plans and time (i.e., organizes time) | Current Level of Functioning |
| **Preparing for special outings**arranges special things to dohandles logistics involved in planning an event | Current Level of Functioning |
| **Handling Time Management**plans homework timearranges study areaattends to homeworkplans time for chores, meetings, leisure timearranges transportation | Current Level of Functioning |
| **Priorities:** |  |

**SOCIAL SKILLS**

|  |  |
| --- | --- |
| **Telephone Use**phone etiquettetakes messagedials phonecan use phone for emergencycan use assistive devices if necessarycan use phone directory | Current Level of Functioning |
| **Caring for Others**pet caresibling carebabysittingelderly | Current Level of Functioning |
| **Reciprocal Relationships**gift givingremembers birthdayssends thank you card | Current Level of Functioning |
| **Behavior Management Social Skills**introduces selffollows instructionsaccepts criticism or consequenceaccepts no for an answergreets peoplegets peoples attention appropriatelymakes requests appropriatelydisagrees appropriatelygives negative feedback appropriatelyresists peer pressureapologizesengages in conversationgives complimentsvolunteersreports peer behavior appropriately | Current Level of Functioning |
| **Priorities:** |  |