**Irvine Adult Transition Program Inventory of Daily Living Skills**

**Adult Student: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Assessor: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Directions: This inventory of daily living skills should be completed by the adult student and/or guardian.**

**Rating Scale of Independence**

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **Inventory of Skills** | **1=Hand over hand instruction** | **2=Direct prompt given** | **3=Indirect prompt given** | **4=**  **Independent** | **N/A** |
| **Daily Routine** |  |  |  |  |  |
| Sets and uses alarm to wake up |  |  |  |  |  |
| Takes medications |  |  |  |  |  |
| Makes bed daily |  |  |  |  |  |
| Goes to sleep at a reasonable time |  |  |  |  |  |
| Keeps bedroom organized |  |  |  |  |  |
| Keeps belongings organized |  |  |  |  |  |
| Keeps bedroom clean |  |  |  |  |  |
| Does laundry |  |  |  |  |  |
| Prepared for activities |  |  |  |  |  |
| Leaves the house on time to school |  |  |  |  |  |
| Uses purse/wallet |  |  |  |  |  |
| Carries & uses money for daily purchases |  |  |  |  |  |
| Uses household cleaning products |  |  |  |  |  |
| Uses a broom & dust pan |  |  |  |  |  |
| Uses a vacuum |  |  |  |  |  |
| Uses an iron |  |  |  |  |  |
| Uses computer properly and safely |  |  |  |  |  |
| Can access the Internet properly & safely |  |  |  |  |  |
| **Hygiene** |  |  |  |  |  |
| Showers daily |  |  |  |  |  |
| Clips nails regularly |  |  |  |  |  |
| Wears deodorant daily |  |  |  |  |  |
| Shaves regularly |  |  |  |  |  |
| Hair is cut regularly |  |  |  |  |  |
| Selects appropriate clothes for daily wear consistent with weather conditions |  |  |  |  |  |
| Dresses self daily |  |  |  |  |  |
| Dresses age appropriately |  |  |  |  |  |
| Brushes/combs hair daily |  |  |  |  |  |
| Brushes teeth daily |  |  |  |  |  |
| Able to take care of toileting needs |  |  |  |  |  |
| Washes Face Daily |  |  |  |  |  |
| Take care of feminine hygiene needs |  |  |  |  |  |
| Uses Make-up Appropriately |  |  |  |  |  |
|  |  |  |  |  |  |
|  |  |  |  |  |  |
| **Inventory of Skills** | **1=Hand over hand instruction** | **2=Direct prompt given** | **3=Indirect prompt given** | **4=**  **Independent** | **N/A** |
| **Personal Safety** |  |  |  |  |  |
| Understands emergency procedures (ie, earthquake preparedness, calling 911, fire response.) |  |  |  |  |  |
| Uses a key/code/garage remote to enter/exit home |  |  |  |  |  |
| Knows home address, phone number |  |  |  |  |  |
| Can use basic self - defense |  |  |  |  |  |
| Knows friends vs. strangers |  |  |  |  |  |
| Carries CA Identification card when not at home |  |  |  |  |  |
| Stays home alone |  |  |  |  |  |
| Uses & charges cell phone on a daily basis |  |  |  |  |  |
| Able to ask for assistance when in the community |  |  |  |  |  |
| Knows who to talk to for help |  |  |  |  |  |
| Has the ability to problem solve |  |  |  |  |  |
| Avoids dangerous situations |  |  |  |  |  |
| **Transportation** |  |  |  |  |  |
| Travels safely crossing parking lots, streets (signal & non signal), walking on community paths, etc. |  |  |  |  |  |
| Uses public transportation |  |  |  |  |  |
| Can read a bus schedule |  |  |  |  |  |
| Can buy a bus pass |  |  |  |  |  |
| Rides bike or walks to places in the community |  |  |  |  |  |
| **Meal Planning** |  |  |  |  |  |
| Makes healthy eating choices |  |  |  |  |  |
| Knows healthy eating portions |  |  |  |  |  |
| Prepares breakfast |  |  |  |  |  |
| Prepares lunch |  |  |  |  |  |
| Prepares dinner |  |  |  |  |  |
| Plans meal and makes a grocery list |  |  |  |  |  |
| Uses a microwave |  |  |  |  |  |
| Uses a toaster |  |  |  |  |  |
| Uses stove |  |  |  |  |  |
| Uses oven |  |  |  |  |  |
| Uses a can opener |  |  |  |  |  |
| Uses knives |  |  |  |  |  |
| Uses a dishwasher |  |  |  |  |  |
| Using standard cleaning procedures, cleans up meal prep area |  |  |  |  |  |
| **Consumer Skills** |  |  |  |  |  |
| Uses coupons when grocery shopping |  |  |  |  |  |
| Comparison Shops while shopping for items |  |  |  |  |  |
| Selects and Purchases own clothing |  |  |  |  |  |
| Orders own food, pays, and dines in a food establishment |  |  |  |  |  |
|  |  |  |  |  |  |
|  |  |  |  |  |  |
|  |  |  |  |  |  |
| **Money Skills** |  |  |  |  |  |
| Knows the difference between needs & wants |  |  |  |  |  |
| Knows next dollar up |  |  |  |  |  |
| Counts bills and coins |  |  |  |  |  |
| Counts back change |  |  |  |  |  |
| Uses ATM card |  |  |  |  |  |
| Comparative shopping |  |  |  |  |  |
| Maintains account balance |  |  |  |  |  |
| Uses online banking |  |  |  |  |  |
| Writes Checks |  |  |  |  |  |
| **Inventory of Skills** | **1=Hand over hand instruction** | **2=Direct prompt given** | **3=Indirect prompt given** | **4=**  **Independent** | **N/A** |
| **Social /Communication Skills** |  |  |  |  |  |
| Communicates wants, needs |  |  |  |  |  |
| Demonstratesappropriate social behavior |  |  |  |  |  |
| Participates in leisure activities |  |  |  |  |  |
| Does activities w/ friends own age |  |  |  |  |  |
| Calls friends |  |  |  |  |  |
| Emails friends |  |  |  |  |  |
| Plans social activities |  |  |  |  |  |

|  |  |  |
| --- | --- | --- |
| **Current Services and Documents** | **YES** | **NO** |
| California ID |  |  |
| Regional Center of Orange County |  |  |
| Department of Rehabilitation |  |  |
| Supplemental Security Income (SSI) |  |  |
| Social Security Disability Insurance (SSDI) |  |  |
| Cal Optima |  |  |
| Medicare |  |  |
| In-Home Support Services |  |  |
| OCTA Reduced Fare Card |  |  |
| OC ACCESS Eligibility |  |  |
| City of Irvine TRIPS Eligibility |  |  |
| Work Authorized Social Security Card/Right to work documents if applicable |  |  |

**X\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Title:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**(Parent/Guardian Signature)**