

Independent Living Skills Survey

Informant Questionnaire

The purpose of this questionnaire is to obtain your view of the community adjustment of one of your relatives, or one of the consumers of your facility's services. "Community adjustment" means how often your relative or the consumer performs the tasks needed to live a satisfying, independent life in the community. These tasks typically include taking care of one's personal appearance, money, possessions, residence, and health; finding and keeping a job; and interacting with others.

A number of these tasks—e.g., Vacuumed or mopped as needed; Bought own groceries; Budgeted money—are listed on the following pages. Please indicate how often your relative or the consumer you are rating performed each of these tasks **during the past 30 days**. If your relative or the consumer **Always** performed a task, place a checkmark on the line that is in the **Always** column next to the task; if your relative or the consumer **Usually** performed a task, place a checkmark on the line that is in the **Usually** column; if your relative or the consumer **Often** performed a task, place a checkmark on the line in the **Often** column; if your relative or the consumer **Sometimes** performed a task, place a checkmark on the line in the **Sometimes** column; if your relative or the consumer **Never** performed a task, place a checkmark on the line in the **Never** column. Put **ONLY ONE** checkmark for each task.

There are some tasks that cannot be performed because there is **No Opportunity** to do so. For example, using a bus is impossible if public transportation is not available; meals cannot be cooked if the residential staff does all the work and limits access to the kitchen; and medication cannot be self-administered if someone else stores the medication and dispenses it. If a task is never performed because there is **No Opportunity** to do so, place a checkmark on the line in the **No Opportunity** column next to that task.

If you wish to write comments about your answers or provide information that is important for understanding your relative's or the consumer's adjustment, please feel free to write them in the comments lines and/or on the back of this questionnaire.

MANY, MANY THANKS FOR YOUR HELP!!

Relative or consumer to be rated: _____

Your name: _____ Date of completion: _____

Your relationship to the person you're rating: _____

Appearance and Clothing

	Always	Usually	Often	Sometimes	Never	No Opportunity
How often did the person perform each behavior in the last 30 days?						
1.* Washed clothes by hand or machine using the proper amount of detergent (without prompting)						
2.* Dried clothes in a dryer or on a clothes line (without prompting)						
3.* Folded, hung up, and stored clothes after they were washed and dried (without prompting)						
4.* Stored dirty clothes separate from clean (without prompting)						
5.* Changed underwear at least twice a week (without prompting)						
6.* Bought own clothes the last time clothing was needed (without prompting)						
7. Undressed self at designated times (without prompting)						
8. Dressed self at designated times (without prompting)						
9. Maintained clean, neat appearance throughout the day (without prompting)						
10. Wore bizarre combinations or excessive layers of clothing						
11. Wore clothing appropriate for the weather and the social occasion (without prompting)						
12. Changed clothes excessively (several times a day)						

Comments:

Personal Hygiene

	Always	Usually	Often	Sometimes	Never	No Opportunity
How often did the person perform each behavior in the last 30 days?						
1.* Bathed/showered with soap at least twice/week (without prompting)						
2.* Shampooed hair at least twice/week (once a week for females) without prompting						
3.* Used deodorant (without prompting)						
4.* Brushed/combed hair (without prompting)						

5.* Brushed teeth with toothpaste at least once/day (without prompting)	-	-	-	-	-	-
6. If needed, got a haircut or had hair styled (without prompting)	-	-	-	-	-	-

Comments:

Care of Personal Possessions

How often did the person perform each behavior in the last 30 days?

	Always	Usually	Often	Sometimes	Never	No Opportunity
1.* Made the bed (without prompting)	-	-	-	-	-	-
2.* Kept room clean (without prompting)	-	-	-	-	-	-
3.* Picked up "clutter" and put items back where they belong (without prompting)	-	-	-	-	-	-
4.* Wiped up spills such as coffee (without prompting)	-	-	-	-	-	-
5.* Vacuumed or mopped as needed (without prompting)	-	-	-	-	-	-
6.* Dusted furniture as needed (without prompting)	-	-	-	-	-	-
7. Changed bed linens as needed (without prompting)	-	-	-	-	-	-
8. Performed assigned household tasks (without prompting)	-	-	-	-	-	-
9. Used others' possessions inappropriately and/or without permission	-	-	-	-	-	-

Comments:

Food Preparation/Storage

How often did the person perform each behavior in the last 30 days?

	Always	Usually	Often	Sometimes	Never	No Opportunity
1.* Prepared simple foods such as sandwiches, cold cereal, etc. that did not require cooking	-	-	-	-	-	-
2.* Prepared foods that require some cooking such as eggs, TV dinners	-	-	-	-	-	-
3.* Discarded spoiled foods (without prompting)	-	-	-	-	-	-

4.* Used a dishwasher or washed dishes by hand after meals (without prompting)	—	—	—	—	—	—
5.* Put away dishes after washing them (without prompting)	—	—	—	—	—	—
6.* Had good nutritional choices in foods; that is, didn't live on candy and soda	—	—	—	—	—	—
7.* Bought own groceries—more than just snack foods (without prompting)	—	—	—	—	—	—
8. Stored foods appropriately (without prompting)	—	—	—	—	—	—
9. Cleared table (without prompting)	—	—	—	—	—	—

Comments:

Health Maintenance

How often did the person perform each behavior in the last 30 days?	Always	Usually	Often	Sometimes	Never	No Opportunity
1.* Self-administered medication (if not on medication, when the person last took medication)	—	—	—	—	—	—
2.* If didn't self-administer medication, cooperated with the person who administered it (score same as item #1 if person self-administered medication)	—	—	—	—	—	—
3.* Contacted appropriate person (e.g., physician, social worker, residential care operator, parent) to renew a prescription for a medication presently being prescribed	—	—	—	—	—	—
4.* When last ill with a minor physical problem such as a cold, correctly took care of himself/herself	—	—	—	—	—	—
5.* Knows proper use of insurance or welfare coverage (e.g., Blue Cross, Medicare, MediCal, Medicaid) for treatment	—	—	—	—	—	—
6.* If smokes, did so safely	—	—	—	—	—	—
7. Reported physical problems appropriately (neither over- nor underreported)	—	—	—	—	—	—
8. Obtained help from appropriate public agency or other resource (fire, police, social worker, doctor, dentist) when needed	—	—	—	—	—	—
9. Understands terms guardianship or conservator (if relevant)	—	—	—	—	—	—
10. Used telephone inappropriately (i.e., made long-distance calls charged to another number without permission, called others during the	—	—	—	—	—	—

middle of the night) | | { | | |

Comments:

Money Management

How often did the person perform each behavior in the last 30 days?

	Always	Usually	Often	Sometimes	Never	No Opportunity
1.* Paid bills such as rent, utilities, phone, and transportation (without prompting)						
2.* Made a deposit or withdrawal at a bank (without prompting)	{			{		
3.* Budgeted money (planned how funds were to be spent)		{			{	
4.* Cashed paycheck or SSI check (without prompting)		{			{	
5.* Purchased essential items prior to spending money on luxuries (without prompting)			{		{	
6. Purchased prescribed medication (without prompting)			{			
7. Maintained appropriate identification for cashing checks						
8. Contacted person responsible for financial support to ask questions and relay relevant information	{			{		
9. Returned or exchanged defective goods (without prompting)		{				
10. Counted change in store (without prompting)			{		{	

Comments:

Transportation

How often did the person perform each behavior in the last 30 days?

	Always	Usually	Often	Sometimes	Never	No Opportunity
1.* Had a valid, current driver's license			{		{	
2.* Used public buses, trains, or subway (without prompting)	{			{		
3.* When last went to an unfamiliar place, asked others or called public transportation for directions (without prompting)				{		{

4.* Read bus schedule the last time the information was needed (without prompting)	{	-	-	-	-	-
5. Walked to places in the neighborhood (without prompting)	-	-	-	-	-	-
6. Followed pedestrian rules (without prompting)	-	-	-	-	-	-
7. Acted appropriately on buses, trains, subways	{	-	-	-	-	-

Comments:

Leisure and Community

How often did the person perform each behavior in the last 30 days?

	Always	Usualy	Often	Sometimes	Never	No Opportunity
1.* Worked regularly on a hobby (without prompting)	-	-	-	-	-	-
2.* Attended religious services (without prompting)	-	-	-	-	-	-
3.* Wrote letters or visited friends/relatives (without prompting)	{	-	-	-	-	-
4.* Attended movies/theater (without prompting)	{	-	-	-	-	-
5.* Read books, newspapers, or magazines (without prompting)	-	-	-	-	-	-
6.* Attended meetings of civic or other organizations such as VFW (without prompting)	-	-	-	-	-	-
7.* Listened to radio or watched TV (without prompting)	-	-	{	{	-	-
8.* Worked in the garden or yard (without prompting)	-	-	-	-	{	{
9.* Attended spectator sport (without prompting)	-	-	-	-	-	{
10.* Bowled, played pool or other sports (without prompting)	-	-	-	-	-	-
11.* Played cards/table games (without prompting)	-	-	-	-	-	-
12.* Was registered to vote	-	-	-	-	-	-
13. Violated general social etiquette (e.g., scratched body parts in public, belched in public without apologies)	-	-	-	-	-	-

Comments:

Job Seeking

	Always	Usually	Often	Sometimes	Never	No Opportunity
How often did the person perform each behavior in the last 30 days?						
1.* Read classified ads one or more times per week to look for jobs (without prompting)						
2.* Contacted potential employers to determine possible job openings (without prompting)						
3.* Contacted friends/peers/social workers/employment agencies for job leads (without prompting)						
4.* Participated in a job interview (without prompting)						
5. Had realistic job aspirations						
6. Had realistic interest in and desire to work						
Comments:						

Job Maintenance

	Always	Usually	Often	Sometimes	Never	No Opportunity
How often did the person perform each behavior when last employed?						
1.* When last employed, arrived at work on time and followed daily break and work schedule (without prompting)						
2.* When last employed, got along with coworkers						
3.* When last employed, got along with supervisors						
Comments:						

Eating

	Always	Usually	Often	Sometimes	Never	No Opportunity
How often did the person perform each behavior in the last 30 days?						
1. Drank neatly (without prompting)						
2. Used appropriate utensils and dishes (without prompting)						
3. Ate at a reasonable pace (without prompting)						
4. Chewed food with mouth closed (without prompting)						

5. Used a napkin (without prompting)	1	1	1	1	1	1
6. Took food off others' plates without permission	1	1	1	1	1	1
7. Limited food intake to appropriate amount (without prompting)	1	1	1	1	1	1
8. Ate discarded food (e.g., from garbage cans, from trash bags)	1	1	1	1	1	1

Comments:

Social Relations

How often did the person perform each behavior in the last 30 days?	Always	Usually	Often	Sometimes	Never	No Opportunity
1. Communicated with coherent, comprehensible speech	1	1	1	1	1	1
2. Initiated conversations with peers (without prompting)	1	1	1	1	1	1
3. Maintained conversations for more than brief greetings	1	1	1	1	1	1
4. Terminated conversations politely	1	1	1	1	1	1
5. Communicated without provocative or abrasive speech	1	1	1	1	1	1
6. Communicated with normal range of eye contact, facial expression, and vocal tone/loudness/fluency	1	1	1	1	1	1
7. Changed the frequency and duration of social contacts to maintain personal comfort	1	1	1	1	1	1
8. Expressed interest in topics discussed by the conversational partner and used them to maintain the interaction	1	1	1	1	1	1
9. When last contacted family, the interactions were pleasant	1	1	1	1	1	1

Comments:

Independent Living Skills Survey

Self-Report Interview

The purpose of this questionnaire is to obtain an individual's view of his/her own community adjustment. "Community adjustment" means how often the individual performs the tasks needed to live a satisfying, independent life in the community. These tasks typically include taking care of one's personal appearance, money, possessions, residence, and health; finding and keeping a job; and interacting with others.

A number of these tasks—e.g., Vacuum or mop your floor; Buy your own groceries; Budget your money—are listed on the following pages. The individual's report of how often he/she performs these tasks will be obtained during an interview that should be conducted after a comfortable relationship has been established. Tell the individual that the interview consists of a comprehensive set of questions about the performance of **ALL** of the skills needed to live in the community. Some of the questions may seem irrelevant or even "babyish," but **ALL** must be asked so that a thorough picture can be drawn about the individual's strengths.

PLEASE DO NOT SKIP ANY QUESTIONS. For each, begin by reading the "time frame" statement (In the **last 30 days**, did you...) followed by a task (vacuum or mop your floor). Ask the individual to respond **YES**, **NO**, or **NOT APPLY**, and, based on that response, place a checkmark in the appropriate column. If the individual has been in an unusually restrictive setting such as a hospital for the past 30 days and the restrictive setting is not the one in which the individual typically resides, change the time frame statement to **When you are living in your typical residence, NOT the hospital, do you....**

Explain that the **NOT APPLY** response option means a task may not be performed because the setting doesn't allow it. Using a bus is impossible, for example, if public transportation is not available; meals cannot be cooked if the residential staff does all the work and limits access to the kitchen; and medication cannot be self-administered if someone else stores the medication and dispenses it. If the individual responds that a task is not performed because there is **NOT APPLY** to do so, **BE SURE TO ASK FOR FOLLOWUP INFORMATION THAT VERIFIES THE LACK OF ENVIRONMENTAL OPPORTUNITY.**

Write comments about the individual's answers or provide information that is important for understanding his/her environment in the comments lines and/or on the back of this questionnaire.

Individual: _____

Your name: _____ Date of completion: _____

Appearance and Clothing

In the last 30 days, did you?

Yes No Not Apply

- 1.* Wash your clothes by hand or machine using the proper amount of detergent?
- 2.* Dry your clothes in a dryer or on a clothes line?
- 3.* Fold, hang up, and store your clothes after they were washed and dried?
- 4.* Store your dirty clothes separate from your clean clothes?
- 5.* Change your underwear at least twice a week?
- 6.* Buy your own clothes the last time you needed some?

—	—	—
—	—	—
—	—	—
—	—	—
—	—	—
—	—	—

INTERVIEWER'S OBSERVATIONS

- 7. Clothing appears neat and clean
- 8. Clothing appears appropriate for the time of year
- 9. Colors and types of clothing appear appropriately coordinated

—	—	—
—	—	—
—	—	—

Comments:

Personal Hygiene

In the last 30 days, did you?

Yes No Not Apply

- 1.* Bathe or shower using soap at least twice a week?
- 2.* Shampoo your hair at least twice a week (once a week for females)?
- 3.* Use deodorant daily?
- 4.* Brush or comb your hair daily?
- 5.* Brush your teeth (or dentures) using toothpaste at least once a day?
- 6. Regularly clean your nails?

—	—	—
—	—	—
—	—	—
—	—	—
—	—	—
—	—	—

INTERVIEWER'S OBSERVATIONS

- 7. Face, arms, hands, etc. appear clean
- 8. Hair appears clean
- 9. Hair appears neatly combed
- 10. Hair appears neatly cut
- 11. No body odor
- 12. Nails appear clean

—	—	—
—	—	—
—	—	—
—	—	—
—	—	—
—	—	—

Comments:

Care of Personal Possessions

	Yes	No	Not Apply
In the last 30 days, did you?			
1.* Make your bed daily?			
2.* Keep your room clean?			
3.* Pick up your "clutter" and put back items where they belong?			
4.* Wipe up spills on your furniture or carpet such as coffee?			
5.* Vacuum (if you have a carpet) or mop your floor?			
6.* Dust your furniture?			
Comments:			

Food Preparation/Storage

	Yes	No	Not Apply
In the last 30 days, did you?			
1.* Prepare simple foods such as sandwiches, cold cereal, etc., that did not require cooking?			
2.* Prepare foods that required a small amount of cooking such as fried eggs, TV dinners?			
3.* Discard spoiled foods?			
4.* Wash dishes after meals by hand or in a machine?			
5.* Put away the dishes after they'd dried?			
6.* Choose mostly nutritional foods to eat; that is, you didn't live on candy and soda?			
7.* Buy your own groceries – more than snacks?			
Comments:			

Health Maintenance

	Yes	No	Not Apply
In the last 30 days, did you?			
1.* Administer your own medication? (If you are not prescribed medication, did you administer your own medication when you were last taking it?)			
2.* If you take medication now but you do not administer it yourself, cooperate with the person who administers the			

medication? (if you are not prescribed medication now, did you cooperate when you were last taking it?)	—	—	—
3.* Contact the appropriate person to renew your prescription? (if not on medication, did you contact the appropriate person to renew your prescription when you last took it?)	—	—	—
4.* When you were last ill with a minor physical problem such as a cold, did you correctly take care of yourself?	—	—	—
5.* Do you know the proper use of insurance or welfare coverage such as Medi-Cal, Medicaid, and Medicare?	—	—	—
6.* Smoke cigarettes safely; that is, no holes in clothes, no cigarette burns on beds and furniture (score Y if person does not smoke)?	—	—	—
7. Take your medication every day exactly as prescribed? (if not on medication, in the past when you were taking medication, did you take the medication every day exactly as prescribed?)	—	—	—

Comments:

Money Management

In the last 30 days, did you?	Yes	No	Not Apply
1.* Pay your own bills such as rent, utilities, phone, and transportation?	—	—	—
2.* Make a deposit or withdrawal at a bank?	—	—	—
3.* Budget your money (plan how your funds were to be spent)?	—	—	—
4.* Cash your paycheck or SSI check?	—	—	—
5.* Pay for essential items such as rent prior to spending money on luxuries?	—	—	—

Comments:

Transportation

In the last 30 days, did you?	Yes	No	Not Apply
1.* Have a current, valid California driver's license?	—	—	—
2.* Use public buses, trains, or subway?	—	—	—

- medication? (If you are not prescribed medication now, did you cooperate when you were last taking it?) — — —
- 3.* Contact the appropriate person to renew your prescription? (If not on medication, did you contact the appropriate person to renew your prescription when you last took it?) — — —
- 4.* When you were last ill with a minor physical problem such as a cold, did you correctly take care of yourself? — — —
- 5.* Do you know the proper use of insurance or welfare coverage such as Medi-Cal, Medicaid, and Medicare? — — —
- 6.* Smoke cigarettes safely; that is, no holes in clothes, no cigarette burns on beds and furniture (score Y if person does not smoke)? — — —
7. Take your medication every day exactly as prescribed? (If not on medication, in the past when you were taking medication, did you take the medication every day exactly as prescribed?) — — —

Comments:

Money Management

- | | Yes | No | Not Apply |
|---|-----|----|-----------|
| In the last 30 days , did you? | | | |
| 1.* Pay your own bills such as rent, utilities, phone, and transportation? | — | — | — |
| 2.* Make a deposit or withdrawal at a bank? | — | — | — |
| 3.* Budget your money (plan how your funds were to be spent)? | — | — | — |
| 4.* Cash your paycheck or SSI check? | — | — | — |
| 5.* Pay for essential items such as rent prior to spending money on luxuries? | — | — | — |

Comments:

Transportation

- | | Yes | No | Not Apply |
|--|-----|----|-----------|
| In the last 30 days , did you? | | | |
| 1.* Have a current, valid California driver's license? | — | — | — |
| 2.* Use public buses, trains, or subway? | — | — | — |

- 3.* When you last went to an unfamiliar place, did you ask others or call public transportation for directions? _ _ _
- 4.* Read a bus schedule the last time you needed the information? _ _ _
- 5. Have and use your own car? _ _ _

Comments:

Leisure and Community

In the last 30 days, did you?

- | | Yes | No | Not Apply |
|--|-----|----|-----------|
| 1.* Have a hobby on which you worked regularly? | | | |
| 2.* Attend religious services? | | | |
| 3.* Write letters or visit friends/relatives? | | | |
| 4.* Attend movies/theater? | | | |
| 5.* Read books, newspapers, or magazines? | | | |
| 6.* Attend meetings of civic organizations or organizations such as VFW? | | | |
| 7.* Listen to the radio or watch TV? | | | |
| 8.* Work in the garden or yard? | | | |
| 9.* Attend a spectator sport? | | | |
| 10.* Bowl, play pool, or other sports? | | | |
| 11.* Play cards/table games? | | | |
| 12.* Are you currently registered to vote? | | | |

Comments:

Job Seeking

In the last 30 days, did you?

- | | Yes | No | Not Apply |
|---|-----|----|-----------|
| 1.* Read the classified ads one or more times per week to look for jobs? | | | |
| 2.* Contact potential employers to determine possible job openings? | | | |
| 3.* Contact friends and others such as employment agencies to obtain job leads? | | | |
| 4.* Participate in job interviews? | | | |

Comments:

Job Maintenance

On your current job or when you were last employed, did you?

- 1.* Get along with your coworkers?
- 2.* Get along with your supervisors?
- 3.* Arrive on time for work and follow a daily work
and break schedule?

Yes	No	Not Apply
—	—	—
—	—	—
—	—	—

Comments:
