**CHECKLIST TO EVALUATE IF MOM, DAD CAN STILL LIVE AT HOME**

As people age, they can develop difficulties performing everyday activities. But, when is there cause for concern? When should services be considered and when are those services no longer enough?

This checklist can help families determine what resources might be appropriate now and help prepare for the future. For further help, consult a physician, geriatric care manager, county social service department or other professionals.

What help is needed? For each task below, check the description that best fits the situation of the person you are concerned about. Add the category numbers to get a score. Then find recommendations in: “SCORING HOME EVALUATION”

### Maintains home/lawn:
- Without help: Score 1
- With some help: Score 2
- Needs total assistance: Score 3
- Lives in apartment or other maintained housing: Score 1

### Does Housekeeping/Laundry:
- Without help: Score 1
- With some help or reminding: Score 2
- Needs total assistance: Score 3
- Hires outside help: Score 1

### Recognizes Strangers:
- Recognizes strangers and seeks help: Score 1
- Unable to recognize strangers or seek help: Score 3

### Handling emergencies:
- Independently able to get help: Score 1
- Needs guidance and instruction: Score 2
- Unable to get emergency help: Score 3

### Driving:
- Drives or safely uses public transportation: Score 1
- Doesn’t drive or needs help with public transportation: Score 2
- Needs special van for transportation: Score 3

### Social Activities:
- Independently arranges and attends social activities: Score 1
- Needs help making social arrangements and getting transportation: Score 2
- Unable to participate in social activities without direct help: Score 3

### Managing Finances:
- Independently manages finances: Score 1
- Needs some help (reminder to pay bills, writing checks, reviewing mail): Score 2
- Unable to manage finances: Score 3

### Getting Groceries:
- Able to get or arrange for groceries: Score 1
- Needs some help: Score 2
- Unable to get groceries: Score 3

### Preparing Meals:
- Prepares meals without assistance: Score 1
- Needs some help: Score 2
- Unable to prepare meals: Score 3

### Eating:
- Feeds self without help: Score 1
- Needs supervision or reminders: Score 2
- Unable to feed self: Score 3

### Recognizing Surroundings:
- Always alert and oriented to date, time and place: Score 1
- Intermittently confused about date, time and place: Score 2
- Consistently confused about date, time and place: Score 3

### Keeping Appointments:
- Able to set and keep appointments: Score 1
- Needs reminding: Score 2
- Needs help setting and keeping appointments: Score 3

### Following Directions:
- Able to understand and follow directions: Score 1
- Needs to check several times before understanding directions: Score 2
- Unable to follow directions, even with supervision: Score 3

### Wandering:
- Does not wander: Score 1
- Wanders or has gotten lost: Score 3

### Personal Care:
- Independently manages hygiene; brushing teeth, nail care, shaving and hair care: Score 1
- Needs reminders to maintain grooming and appearance: Score 2
- Needs help to complete grooming: Score 3

### Dressing:
- Gets dressed independently: Score 1
- Needs reminders to choose clothing and dress: Score 2
- Needs help to dress: Score 3

### Bathing:
- Independently bathes and showers: Score 1
- Needs standby help or supervision: Score 2
- Needs help to bathe or shower: Score 3

### Continence:
- Continent of bowel and bladder or can independently use incontinence products: Score 1
- Needs reminder to use toilet or help using incontinence products: Score 2
- Unable to use toilet independently: Score 3

### Gait:
- Walks or moves independently (with or without cane/walker/wheelchair) with no falls: Score 1
- Has unsteady gait and has fallen in the past 6 months: Score 2
- Needs help to walk or maneuver wheelchair: Score 3

### Transferring:
- Independently transfer to bed, chair or toilet: Score 1
- Needs help to transfer: Score 3

### Medical/Rehabilitative Therapy:
- No need for medical/rehab therapy: Score 1
- Has medical/rehab needs and manages them independently: Score 1
- Needs intermittent help managing medical/rehab needs: Score 2
- Needs medical monitoring: Score 3

### Medications:
- No need help identifying and taking medications: Score 1
- Needs help or reminders to take medications: Score 2
- Unable to manage medications: Score 3

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**REPEAT THIS EVALUATION CHECKLIST ON A REGULAR BASIS**

(See back for scoring instructions)