

## Transition to a Home of Our Own

## **Home Skills Worksheet**

Name:	Date
<u>.</u>	

This is a worksheet for <u>you</u>, about <u>you</u>.

This is how you can let staff know what you can already do, and what you need help with.

This form is divided into different sections for skills that are important when working towards living more independently.

Read each statement then choose an answer that tells us what supports you may need. You may mark the box with an "x" or a check mark.

Staff will use your answers to help you work on and build new skills.

## **POSSIBLE ANSWERS:**

**On my own**: Means that you can independently do the activity or function

Need some help: Means you can do most of it yourself, but need some support

**Need lots of help:** Means you can do part of it, but have lots of support to complete

**Haven't tried it:** Means you have never done it, or someone does it for you

**Unsure:** Means you do not know how to answer the question.

Section 1: My Personal Care					
Medication	On my own	Need some help	Need lots of help	Haven't tried it	Unsure
I know what medications are and why I take them					
I know when to take medications					
I take medicine at the right time					
I have taken prescriptions to a pharmacy					
I know how to store my medication					
I can read medication labels and warnings					
Medical	On my own	Need some help	Need lots of help	Haven't tried it	Unsure
I know when I need to book a medical appointment					
I can book my own medical appointment					
I can go to a medical appointment					
I let the doctor know why I am there					
Body Care & Appearance	On my own	Need some help	Need lots of help	Haven't tried it	Unsure
I know when I need to shower or bathe					
I know when to brush my teeth					
I know how to shave					
I know how to apply deodorant					
I know how to trim my nails					
I know how to brush my hair					
I know how to take care of my skin					
I know when to put on sunscreen					
I put on clean clothes each day					
I put on the right clothing when it's cold or hot					
I can take care of my glasses/hearing aids/etc					
FOR WOMEN: I take care of my feminine hygeine					

Section 2: Menus and Shopping						
Menu Planning		On my own	Need some help	Need lots of help	Haven't tried it	Unsure
Each day I plan what to eat						
I make out a menu for the we	ek (or longer)					
I know what healthy foods are	2					
I choose to eat healthy foods						
I can read flyers to look for sal	es					
I make a grocery list before sh	opping					
Grocery Shopping		On my own	Need some help	Need lots of help	Haven't tried it	Unsure
I can choose a store to buy foo	od from					
I know how to get a cart or ba	sket					
I can push the cart or carry the	e basket in the store					
I can find the food items on my grocery list						
I can pay the cashier						
I can put my groceries in a bag						
I can carry my groceries						
I know what goes in the fridge	or freezer					

Section	3: Meals				
Meal Preparation	On my own	Need some help	Need lots of help	Haven't tried it	Unsure
I can cut food up					
I know how to measure food					
I can use small appliances (toaster, kettle, mixer)					
I can unplug small appliances when not in use					
I can prepare a cold breakfast like cereal					
I can make a sandwich					
I can make something using a recipe					
Safe Food Handling	On my own	Need some help	Need lots of help	Haven't tried it	Unsure
I know how to wash my hands before I touch food					
I make sure the things I use are clean					
I use separate knives for meat					
I do not leave food out for long periods of time					
I know how to check expiry dates on foods					
I can wrap or seal foods before putting them away					
Cooking	On my own	Need some help	Need lots of help	Haven't tried it	Unsure
I know how to turn an oven on and off					
I know how to set the oven temperature					
I know how to turn the burners on and off					
I know how to set the temperature on the burners					
I can use a microwave					
I can use a timer					
I know when to wear oven mitts					
I know what to do if a pot boils over					
I check the food while it cooks					
I know when food is finished cooking					

Section 4: House Clea	aning and	l Mainten	ance			
Cleaners	On my own	Need some help	Need lots of help	Haven't tried it	Unsure	
I know what different cleaners are used for						
I know how to use cleaners safely (ie: wear gloves)						
I know how to put cleaners away in a safe place						
Cleaning Tools	On my own	Need some help	Need lots of help	Haven't tried it	Unsure	
I can use a broom and dustpan						
I can use a vacuum						
I can put cleaner and water in a bucket						
I can wash the floor with a mop						
I can dust furniture						
I can clean the toilet with a toilet brush						
I wipe down sinks and counters with a rag						
I know to put away my cleaning tools when done						
Laundry	On my own	Need some help	Need lots of help	Haven't tried it	Unsure	
I take dirty clothes to the laundry room						
I can put clothes in the washer						
I can put the right amount of soap in the washer						
I can turn the washer on						
I know to put washed clothes into the dryer						
I know to use a dryer sheet						
I can turn the dryer on						
I can clean the lint trap						
I can fold clean laundry	I can fold clean laundry					
I can put clean laundry away						

Section 4: House Cleaning	and Main	tenance (	Continued	1)	
Bedroom	On my own	Need some help	Need lots of help	Haven't tried it	Unsure
I can make my own bed					
I put my dirty clothes in a laundry basket					
I keep my room tidy					
Garbage and Recycling	On my own	Need some help	Need lots of help	Haven't tried it	Unsure
I can empty a garbage can					
I know what can be recycled					
I can separate the recycling					
I know what goes into the compost					
I can take out the garbage/recycling/compost					
General Upkeep	On my own	Need some help	Need lots of help	Haven't tried it	Unsure
I replace empty toilet paper rolls					
I can change a light bulb in a lamp					
I put things away when I'm not using them					
I open and close windows when necessary					
I can set temperature of heat / air conditioning					
I can ask for help fixing things					
Home Skills	On my own	Need some help	Need lots of help	Haven't tried it	Unsure
I can answer the door					
I answer the phone when it rings					
I can look up a phone number					
I can make a phone call					
I can work the TV					
I know when to charge the phone					

Section 5: N	ly Comm	unity			
Resources and Services	On my own	Need some help	Need lots of help	Haven't tried it	Unsure
I look for community programs (sports, classes, etc.)					
I know how to access these programs					
I know of services I can use for help (ie: ODSP)					
I know how to contact people from these services					
I use community resources (ie: Library, train, bus)					
I can arrange my own transportation (ie: taxi, family)					
I am able to use the city bus					
I know how to pay for transit					
I can use a bike to go places					
I walk to places					
Recreation	On my Own	Need some help	Need lots of help	Haven't tried it	Unsure
I know what I like to do for fun					
I get together with friends					
I spend time with my family					
I can spend quiet time on my own					
I am interested in meeting new people					
I participate in formal groups (ie: sports, church)					
Time Management	On my own	Need some help	Need lots of help	Haven't tried it	Unsure
I book my own appointments					
I keep track of my scheduled events					
I do not miss appointments					
I cancel appointments ahead of time when needed					
I am ready on time for work and appointments					
I can manage time for daily activities					
I can get up and go to bed on time					

Section 5: My Con	nmunity	(Continue	d)		
Communication	On my own	Need some help	Need lots of help	Haven't tried it	Unsure
I can talk, sign or use a device to say what I need					
I make choices about my life					
I use socially appropriate conversations with others					
I can ask questions if I don't understand something					
I can read					
I am able to understand what I read					
I use pictures to help me understand something					
I can print, write, or type					
I can use email					
I can use the internet					
Money	On my own	Need some help	Need lots of help	Haven't tried it	Unsure
I can count money					
I know how to use money					
I know how to use a debit card					
I keep track of how much I spend					
I keep receipts					
I can write a cheque					
I can create a budget and follow it					
I do my own banking					
I can pay a bill					
I can submit my ODSP package (submitting pay stubs and monthly form if working)					
I know what to keep in my wallet					

Section 6:	Comments – Here you may tell us more about your abilities