

NEEDS ASSESSMENT CHECKLIST

Consult this checklist to determine what kind of help you need and how many hours are required.
Share your concerns honestly with the in-home caregiver.

Activities of daily living

Can your loved one:

- Dress and undress?
- Prepare nutritious meals and clean up afterward?
- Shop for groceries and other necessities?
- Get in and out of bed or a chair on their own?
- Bathe, shower and generally maintain personal hygiene, including oral care?
- Walk and use the stairs safely?
- Drive or use public transportation?
- Manage medications?
- Keep the house clean and organized?

Mental health

Are they:

- Forgetful to the point that safety is a concern?
- Depressed?
- Showing decreased interest in life, family, friends or hobbies?
- Wandering?
- Able to pay bills, manage insurance and legal forms?
- Experiencing mood swings?

Physical health

Do they have:

- Special dietary needs?
- Chronic conditions?
- Short-term illnesses or recovery issues?
- Balance problems?
- Sleep disturbances?
- Vision or hearing problems?
- Moderate to severe pain?