

## ENVIRONMENTAL ACCESS CHECKLIST

NAME: \_\_\_\_\_ AGE: \_\_\_\_\_ DATE: \_\_\_\_\_  
 EVALUATOR(S) / Contact Info.: \_\_\_\_\_  
 RESIDENCE LOCATION: \_\_\_\_\_  
 WORK OR DAY PROGRAM LOCATION: \_\_\_\_\_

### BACKGROUND INFORMATION

DIAGNOSIS/ RELEVANT HEALTH ISSUES

INDIVIDUAL'S OR TEAMS' PRIORITIES/GOALS REGARDING ENVIRONMENTAL ACCESS ISSUES

WHAT ARE SOME OF THE INDIVIDUAL'S ACTIVITY PREFERENCES?

### BRIEF SURVEY OF FUNCTIONAL RESOURCES

**KEY:** 1 = Severely Impaired  
 2 = Moderately Impaired  
 3 = Mildly Impaired  
 4 = No Impairment Noted

RATING                  COMMENTS

1 - MOBILITY		
2 - BALANCE		
3 - STRENGTH		
4 - ACTIVE ROM		
5 - FINE MOTOR FUNCTION		
6 - ALERTNESS/ ATTENTION		
7 - COGNITION		
8 - COMMUNICATION		
9 - VISION		
10 - HEARING		
11 - TACTILE		

IN WHAT SPECIFIC ACTIVITY LOCATIONS DOES THE INDIVIDUAL SPEND LARGE AMOUNTS OF TIME?  
 (IE: Bedroom, Recliner in living room, Desk at work, Mat in day program, Kitchen table, Wheelchair, etc)

ADDITIONAL COMMENTS:

Name:

ENVIRONMENTAL ACCESS CHECKLIST

LOCATION CODES

L = Living room  
 K = Kitchen  
 B = Bedroom  
 R = Restroom/Bath

STATUS CODES\*

W/C = Wheelchair  
 W = Work or Day Area(s)  
 C = Community  
 H = Throughout Home  
 I = Independent  
 C = Cues (Needs verbal or gestural cues)  
 D = Dependent (Needs physical help)  
 N/A = Not Applicable  
 N/E = Not Evaluated

PRIORITY CODES

1 = Immediate Priority  
 2 = Short Term Priority  
 3 = Long Term Priority

\* Status Code circled indicates person is mobility dependent and needs assistance to be positioned for access.

ACCESS ITEM	LOC. CODE	STATUS CODE	COMMENTS (Include assistive devices currently in use)	PRIORITY CODE	PLAN ATTACHED
1- DOORS					
2- DOOR LOCKS					
3- LIGHTS					
5- RECEPTACLES					
6- WINDOWS					
7- CURTAINS					
8- BED					
9- CHAIRS					
10- TABLES					
11- OTHER FURNITURE					
12- COUNTERTOPS					
13- LEISURE ITEMS					
14- WORK ITEMS					
15- CLEANING/ MAINT. ITEMS					
16- CLOTHING					
17- SOAP/TOWELS					
18-TOOTHBRUSH/ TOOTHPASTE					
19- HAIRCARE ITEMS					
20- OTHER PERSONAL ITEMS					
21- FAUCETS					
22- TUB/SHOWER					
23- MIRROR					
24- TOILET					
25- TOILET PAPER					
26- EATING UTENSILS					
27- REFRIGERATOR					

ADDITIONAL COMMENTS:

ACCESS ITEM	LOC. CODE	STATUS CODE	COMMENTS (Include assistive devices currently in use)	PRIORITY CODE	PLAN ATTACHED
28- COOKING SUPPLIES					
29- FOOD (cans/boxes)					
30- WATER FOUNTAIN					
31- MICROWAVE					
32- STOVE					
33- SINK					
34-SM.COOKING APPLIANCES					
35- LAUNDRY					
36- TV/VCR					
37- RADIO					
38- PHONE					
39- CLOCK					
40- CALENDAR					
41- FAN HEATING/COOLING					
42- COMMUNICATION AIDES					
43- MAILBOX					
44- COMPUTER					
45- ID'S/MONEY					
46- EMERGENCY CALL DEVICE					
47- MEDICATION					
48-FIRE EXTINGUISHER					
49-EMERG. LIGHT					
50-EMERG. EGRESS					
51- TRANSPORTATION					
51- OTHER					
52- OTHER					
53- OTHER					

ADDITIONAL COMMENTS: