

# Identification of the Person

## General Short Version - 16 Items

1 Name

2 Date of birth      /      /  
                                 DD      MM      YYYY

3 Gender     Female     Male

4 Date of evaluation      /      /  
                                 DD      MM      YYYY

5 How the questionnaire was completed

- Self-administered
- Interview

6 The respondent is

- The person
- A significant other
- A professional (name and discipline)

7 The level of satisfaction is that of

- The person
- The significant other
- The professional

# Questionnaire

**Answer the following two questions.  
(Check the appropriate boxes.)**

- 1** For each of the following life habits, indicate  
A. How the person generally accomplishes it,  
and  
B. The type of assistance required to  
accomplish it.
- 2** For each of the following life habits, indicate  
the level of satisfaction with the way it is  
accomplished.

Note: Keep in mind that answers should reflect the person's usual way of carrying out life habits.

Question 1					Question 2		
A Level of Accomplishment (Check only 1)			B Type of Assistance (Check 1 or more, as required)		Level of Satisfaction (Check only 1)		
No difficulty	With difficulty	Accomplished by a proxy	No assistance	Assistive device	Very dissatisfied	Dissatisfied	More or less satisfied
Not accomplished	Not applicable	Adaptation	Human assistance	Satisfied	Very satisfied		

**Note: For each of the 16 items of the instrument, your answer should be a comprehensive appraisal of the accomplishment of the activities and roles *that apply* to your life context.**

Preparing and eating your meals	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	1	<input type="checkbox"/>
Maintaining your physical fitness and your mental well-being	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	2	<input type="checkbox"/>
Looking after your personal care (hygiene, appearance, looking after your health)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	3	<input type="checkbox"/>
Dressing and undressing (clothing, accessories, including the choice of clothes)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	4	<input type="checkbox"/>
Communicating with others by various means (oral, written, electronic, body language)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	5	<input type="checkbox"/>
Carrying out activities related to your home (maintenance, furnishings, and equipment)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	6	<input type="checkbox"/>
Moving from one place to another in your home and nearby surroundings	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	7	<input type="checkbox"/>
Moving from one place to another using transportation (as a driver or passenger)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	8	<input type="checkbox"/>
Carrying out your financial, civic, and family responsibilities	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	9	<input type="checkbox"/>
Maintaining social, affective, or intimate relationships with others	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	10	<input type="checkbox"/>
Participating in activities and organizations of your life milieu (social club, spiritual or religious groups)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	11	<input type="checkbox"/>
Shopping and accessing services in your community	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	12	<input type="checkbox"/>
Participating in educational activities or vocational training	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	13	<input type="checkbox"/>

**Answer the following two questions.  
(Check the appropriate boxes.)**

- 1** For each of the following life habits, indicate  
A. How the person generally accomplishes it, and  
B. The type of assistance required to accomplish it.
- 2** For each of the following life habits, indicate the level of satisfaction with the way it is accomplished.

Note: Keep in mind that answers should reflect the person's usual way of carrying out life habits.

	Question 1							Question 2							
	A Level of Accomplishment (Check only 1)				B Type of Assistance (Check 1 or more, as required)			Level of Satisfaction (Check only 1)							
	No difficulty	With difficulty	Accomplished by a proxy	Not accomplished	Not applicable	No assistance	Assistive device	Adaptation	Human assistance	Very dissatisfied	Dissatisfied	More or less satisfied	Satisfied	Very satisfied	
Carrying out activities related to paid work (job searching, completion of tasks, etc.) Note: If you are currently not working but you would like to, check <b>Not accomplished</b>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	14	<input type="checkbox"/>
Carrying out activities related to unpaid work (volunteering)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	15	<input type="checkbox"/>
Participating in recreational activities (arts, sports, hobbies, outings, etc.)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	16	<input type="checkbox"/>

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# Comments

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**Use the following lines for general comments or remarks related specifically to one or more of the categories in terms of**

- a) The level of accomplishment
- b) The type of assistance required
- c) The level of satisfaction

or for general comments pertaining to any other aspect of this questionnaire.

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