

PERSONAL FOCUS HOME TIP SHEET

If the person spends a good deal of time in two different homes, such as a child in the joint custody of two parents, report this information for each home or note the differences as appropriate.

👉 These are suggestions of what to consider when completing the “Home” section of the Personal Focus. Inclusion in the ISP should be based on the unique characteristics, needs and preferences of the person. There is no expectation or requirement that all areas be specifically addressed in the ISP.

A. Column One (The Person’s Current Situation and What is Important to the Person):

1. How the person spends his/her time;
2. What the person does at home;
3. What equipment, if any, in the home the person knows how to operate e.g. stove, microwave, telephone, washer, dryer, thermostat, etc.
4. What the person likes about his/her home;
5. What the person’s day is usually like;
6. What the person does to relax;
7. When the person can be at home alone and under what circumstances (will also have to be included in the “Risk” section of the Action Plan).
8. Who the person spends time with;
9. What they do together;
10. Relationship with neighbors.
11. What supports the person needs to get through the day;
12. Any help the person needs with completing daily activities at home such as:
 - ❑ What the person does independently;
 - ❑ What the person needs help with;
 - ❑ How much help and the kind of help the person needs;
 - ❑ The things that someone else must do for the person.Activities of daily living include grooming, bathing, dressing, meal preparation, eating, oral hygiene, toileting, ambulation, housekeeping, shopping and social activities.
13. Include any medical, therapeutic activities, behavioral and/or mental health issues that effect home life and how it is effected;
14. Risk issues related to home life.
15. What things the person needs to be safe in his/her home;
16. The choices and decisions the person makes regarding his/her home life;

17. Durable, medical, mobility, adaptive or assistive technology, equipment or supplies needed in the home. Whether the equipment and/or assistive technology is in good working condition or in need of maintenance/repair.
 18. Any environmental accessibility adaptations needed by the person in the home.
 19. Life altering events such as the loss of a home, multiple relocations, unusual living situations, etc.
 20. Equipment in the home such as telephone, stove, microwave, thermostat, washer, dryer, etc. and what, if any assistance they need in using it.
- B. Column Two (What the Person is Dissatisfied With and What Needs to Be Changed):
- a. What the person wants to be different, if anything;
 - b. Anything the person wants to learn how to do;
 - c. Any new needs related to health and safety issues in the home; and
 - d. Any new risks that need to be addressed.