

Questions	Responses	Notes
Waking		
 What time do I normally get up? Can I tell whether it is time to wake up? (visual limitations) Do I need help to get out of or transfer from my bed using equipment i.e. hoisting? Are my mornings the same or is it different every day? Do I follow a routine in the morning? Describe the routine. If I need medicine, does someone help me take it? Do I have appropriate and working equipment to support me to get up safely? Do my parents/carers have any special educational needs or health difficulties, and how does this impact on my care? Who is awake in the house with me to assist me if I need it? 		
Dressing		
 Do I wear special clothes – i.e. all in one, to prevent taking it off overnight and removing my nappy? Do I dislike certain textures of clothes, zips, or buttons? Are my clothes clean, the right size for me, right for the weather? Do my shoes fit? Are they right for the weather? Does someone help me get dressed or do I do it myself? 		



Questions	Responses	Notes
Personal Care 1. Do I use a special shower or bath? 2. Do I have to be supported to move with special equipment i.e. hoisting? 3. Can I independently wash myself and clean my teeth? 4. Does someone come to my house to help me wash and dress? Who? 5. Do I have to take regular medication or use daily creams? 6. Do I have to have pureed food or my food through a tube or peg? 7. Do I have a special toothbrush and does someone help me to wash and brush my teeth? 8. Do I feel pain with certain tasks like brushing hair, teeth cleaning or showering? 9. Do I have sensory difficulties which impact on my personal care? 10. How often do I shower/bath?	responses	I votes
 Do my parents take me to school? Do I travel by taxi or minibus to school? Do I have an escort? Do I have any behavioural or other difficulties which make travel difficult? Am I met when I get to school by the teachers? Do I understand safety on the road and in cars? 		



Questions	Responses	Notes
In School/College		
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1. Do I like school/college?		
2. What is my attendance record?		
Do my parent(s) attend school meetings?		
4. What is my favourite bit?		
5. Which bit do I not like so much?		
6. Do I have an Education, Health and Care Plan		
7. EHCP)?		
8. Am I educated at school or at home?		
9. If I am at home, how is my progress monitored? Do I		
have access to the resources I need at home? Do my		
carers communicate openly with education welfare?		
10. Is my home link book completed and given to my		
teachers when I get to school?		
11. Do I complete homework and reading at home? Who		
supports me with this?		
12. Do my carers tell school about any difficulties I have had that morning?		
13. What do I do at breaks? Do I have a snack?		
14. Do I have appropriate food at school i.e. orally or PEG		
fed?		
15. Do I have the right things for school – medication,		
reading books, home schoolbooks, uniform, PE		
clothes, coat, hats, gloves, nappies, spare clothing?		
16. Do I have a favourite teacher or someone I like to talk		
to?		
17. Do I see anyone for help at school – school nurse,		
Educational Psychologist, Speech and Language		
Therapist, Physiotherapist and Occupational		
Therapist.		
18. Do I go on school trips?		
19. Do I have regular health appointments when I am at		
school?		



Questions	Responses	Notes
After School		
Do my parents collect me, or do I travel by minibus or		
taxi with an escort?		
2. Does school pass on any issues for me during the day?		
3. Do I go home at the end of the school day or do I go to		
afterschool clubs?		
4. Do I watch TV and if so, is what I watch okay for my		
age?		
5. Do I have homework to do and does anyone help me with it?		
6. Do I have any food?		
7. Does anyone help me with my food?		
8. Do I like to play with toys?		
9. If I misbehave what happens?		
10. Do I have any triggers for my behaviour, if so, what are		
they?		
11. Does someone have to hand me toys to play with as I		
am not able to access them myself due to mobility or		
visual impairment?		
12. Do I only like certain TV programmes or videos?		
13. Am I encouraged to participate in other activities/try		
new TV programmes? 14. Am I included in normal family life?		
15. Do I find some toys/play activities too noisy or too		
busy?		
16. Does someone need to supervise me as I find it difficult		
to play with others, to share, or to be close to other		
people?		
17. Do l spend time in my bedroom alone?		



Questions Responses Notes Evenings 1. Do I have a dinner in the evening and what time is this?
 Does someone have to prepare and help me eat my dinner i.e. orally or PEG fed? What do I eat? Where do I eat? Do I have a favourite food? Do I eat with others? Do my carers understand if I am hungry or not? Do they provide food for me? Do I watch TV and what do I watch? Do I use the interner? What device do I use — laptop/tablet/phone? Does anyone check what I am doing on the interner/are there any parent controls? What sites do I visit online and what do I do? Do I go out in the evening and if so, who do I go out with? Do I have carers to take me out? Do they have the appropriate equipment and training to look after me? What do I do with my family in the evenings? Am I included in family time? Do I need medication before I go to bed? Who gives this to me?



Questions	Responses	Notes
Bedtime		
 Do I go to bed at the same time every night? Who decides when it is bedtime? Does someone help me with my personal care? Where do I sleep? Do I have a special bed? How do I get into my bed? Do I like where I sleep? Who else is in the house at night-time? Do I have additional carers overnight? Do I have my own room? Do I have what I need in my room (clean bed, curtains, warm floors, specialist equipment)? Do I have to wake in the night, or be woken to be changed or turned? 		
Sleep		
 Do I need a special sleep system to keep me positioned correctly when I am in bed? Do I need to be repositioned at night? Do I need to use a hoist to get from chair, bed, or toilet? Do I need my nappy changing at night? Do I have a bedtime routine? Do I go to bed on my own or does someone put me to bed? Who? Do I sleep well at night, or do I tend to wake? How often do I wake? What happens when I wake up? Does my carer respond or am I left to cry/self soothe? Do I have feeds during the night? Do I often need a pad change during the night? 		

