

OEDI Score Sheet

Name: _____

County Board: _____

Circle the conclusion of each item listed under the SEVEN life activity areas. Then, record whether or not the individual has a Substantial Functional Limitation based on the scoring criteria given for each area.

<p>MOBILITY ① Yes No</p> <p>The item must have a conclusion of <u>NO</u> for the individual to have a <u>S</u>ubstantial <u>F</u>unctional <u>L</u>imitation (SFL) in Mobility.</p>	<p>Does the individual have a SFL in MOBILITY?</p> <p>Yes No</p>
<p>SELF-CARE ① Yes No ② Yes No ③ Yes No ④ Yes No ⑤ Yes No NA</p> <p>ONE item must have a conclusion of <u>NO</u> for the individual to have a SFL in Self-Care.</p>	<p>Does the individual have a SFL in SELF-CARE?</p> <p>Yes No</p>
<p>SELF-DIRECTION ① Yes No ② Yes No ③ Yes No ④ Yes No ⑤ Yes No</p> <p>TWO items must have a conclusion of <u>NO</u> for the individual to have a SFL in Self-Direction. <i>For Self-Direction only: if the individual does not have the required TWO NO scores in Self-Direction, but does have a number of cross-reference items, the rater has the authority to "override" the criterion.</i></p>	<p>Does the individual have a SFL in SELF-DIRECTION?</p> <p>Yes No</p>
<p>CAPACITY FOR INDEPENDENT LIVING ① Yes No ② Yes No ③ Yes No ④ Yes No</p> <p>TWO items must have a conclusion of <u>NO</u> for the individual to have a SFL in Capacity for Independent Living.</p>	<p>Does the individual have a SFL in INDEPENDENT LIVING?</p> <p>Yes No</p>
<p>LEARNING ① Yes No ② Yes No ③ Yes No ④ Yes No ⑤ Yes No</p> <p>TWO items must have a conclusion of <u>NO</u> for the individual to have a SFL in Learning.</p>	<p>Does the individual have a SFL in LEARNING?</p> <p>Yes No</p>
<p>ECONOMIC SELF-SUFFICIENCY ① Yes No ② Yes No ③ Yes No</p> <p>TWO items must have a conclusion of <u>NO</u> for the individual to have a SFL in Economic Self-Sufficiency.</p>	<p>Does the individual have a SFL in ECONOMIC SELF-SUFFICIENCY?</p> <p>Yes No</p>
<p>RECEPTIVE & EXPRESSIVE LANGUAGE ① Yes No ② Yes No ③ Yes No</p> <p>ONE item must have a conclusion of <u>NO</u> for the individual to have a SFL in Receptive & Expressive Language.</p>	<p>Does the individual have a SFL in RECEPTIVE & EXPRESSIVE LANGUAGE?</p> <p>Yes No</p>
<p>Transfer the final decisions to the Form for Eligibility Determination (FED)</p>	

Individual completing this form:

Date: