WAC 388-828-4200 What activities are assessed in the home living activities subscale of the support needs scale? The home living activities subscale measures your personal support needs for the following home living activities:

thing and taking care of personal hygiene d grooming needs essing ing the toilet eparing food	0 0 0	1	2	3	4	0	1	2	3	*	0	1	2	3	4	
ing the toilet	_	1	2	3												
0	0	1		)	4	0	1	2	3	4	0	1	2	3	4	
maring food		1	2	3	4	0	1	2	3	4	0	1	2	3	4	
eparing rood	0	1	2	3	4	0	1	2	3	*	0	1	2	3	4	
ting food	0	1	2	3	4	0	1	2	3	4	0	1	2	3	4	
king care of clothes, including laundering	0	1	2	3	4	0	1	2	3	4	0	1	2	3	4	
susekeeping and cleaning	0	1	2	3	4	0	1	2	3	4	0	1	2	*	*	
erating home appliances/electronics	0	1	2	3	4	0	1	2	3	4	0	1	2	3	4	
ing currently prescribed equipment or atment	0	1	2	3	4	0	1	2	3	4	0	1	2	3	4	
1	usekeeping and cleaning erating home appliances/electronics ng currently prescribed equipment or	usekeeping and cleaning 0 erating home appliances/electronics 0 ng currently prescribed equipment or 0	usekeeping and cleaning 0 1 erating home appliances/electronics 0 1 ng currently prescribed equipment or 0 1	usekeeping and cleaning 0 1 2 erating home appliances/electronics 0 1 2 ng currently prescribed equipment or 0 1 2	usekeeping and cleaning 0 1 2 3 erating home appliances/electronics 0 1 2 3 ng currently prescribed equipment or 0 1 2 3	usekeeping and cleaning 0 1 2 3 4 erating home appliances/electronics 0 1 2 3 4 ng currently prescribed equipment or 0 1 2 3 4	usekeeping and cleaning 0 1 2 3 4 0 erating home appliances/electronics 0 1 2 3 4 0 ng currently prescribed equipment or 0 1 2 3 4 0	1   2   3   4   0   1	1   2   3   4   0   1   2   2   2   2   2   2   2   2   2	1   2   3   4   0   1   2   3   3   4   0   1   2   3   3   4   0   1   2   3   4	1   2   3   4   0   1	sekeeping and cleaning 0 1 2 3 4 0 1 2 3 4 0 0 1 2 3 4 0 0 1 2 3 4 0 0 1 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0	sekeeping and cleaning 0 1 2 3 4 0 1 2 3 4 0 1 erating home appliances/electronics 0 1 2 3 4 0 1 2 3 4 0 1 ang currently prescribed equipment or 0 1 2 3 4 0 1 2 3 4 0 1	1   2   3   4   0   1   2   3   4   0   1   2   2   3   4   0   1   2   2   3   4   0   1   2   2   3   4   0   1   2   3	sekeeping and cleaning 0 1 2 3 4 0 1 2 3 4 0 1 2 ** erating home appliances/electronics 0 1 2 3 4 0 1 2 3 4 0 1 2 3  ng currently prescribed equipment or 0 1 2 3 4 0 1 2 3 4 0 1 2 3	sekeeping and cleaning 0 1 2 3 4 0 1 2 3 4 0 1 2 * * * erating home appliances/electronics 0 1 2 3 4 0 1 2

<sup>\* =</sup> Score is not an option per AAIDD.

[Statutory Authority: RCW 71A.12.030 and 71A.16.050. WSR 24-23-058, s 388-828-4200, filed 11/15/24, effective 1/1/25. Statutory Authority: RCW 71A.12.030 and 71A.12.120. WSR 19-02-020, § 388-828-4200, filed 12/21/18, effective 2/1/19. Statutory Authority: RCW 71A.12.030 and Title 71A RCW. WSR 07-10-029, § 388-828-4200, filed 4/23/07, effective 6/1/07.

Note: Question A9 is a question added by DDA. It is for informational purposes only and is not used to calculate scores or levels for service determination.