**Observational Assessment of Functional Vision Performance**

**Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Therapist: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date:\_\_\_\_\_\_\_\_\_\_\_\_**

**Directions:** Complete the assessment in the client’s usual living environment and in the typical manner used by the client to perform the task (as much as possible). The client may use optical devices or other adaptive equipment to complete the task. If administering the assessment in a clinic, try to simulate the client’s home lighting as much as possible. The examiner provides the items for the assessment to ensure standardization of performance. Use the rating key on page 1 to rate performance.

**Task Items**: can of baking powder (Clabber Girl brand or can with black printing on white), prescription bottle, white sheet of 8.5 x 11 inch paper with signature line (standard size-not bolded), pen, # 10 white (business size) envelope, pitcher of water, 8 oz clear glass, container with 5 quarters, 5 dimes, 4 nickels and 5 pennies, standard white baking timer with dial or digital interface.

**Not Applicable**: Does not or no longer performs this task for various reasons.

0 **–** Unable: dependent on others to perform task; would perform task if able

**1 – Great Difficulty**: May perform some aspect of the task but requires assistance for 50-75% of task; and/or cannot perform in safe and efficient manner.

**2 – Moderate Difficulty**: Performs task with difficulty even under optimal conditions; and/or difficulty performing task in a timely manner; and/or safety and efficiency questionable; and/or makes errors; and/or assistance required for 25-50% of task.

**3 – Minimal Difficulty**: Performs with some difficulty and/or can only perform under optimal conditions; may require assistance for 25% or less of the task.

**4 – Independent**: Experiences no difficulty performing task safely, accurately and efficiently.

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| **Item** | **Task Description** | **Rating** |
| Read food label | (1M print, high contrast): read aloud the instructions on the can of baking powder | 0 1 2 3 4 NA |
| Read medication label | (1M print, low contrast): read aloud the name of the medication, instructions, and prescription number | 0 1 2 3 4 NA |
| Write signature on regular line | Place paper at the client’s midline; instruct client to write signature on the line. | 0 1 2 3 4 NA |
| Address envelope | Place envelope at the client’s midline; instruct client to address the envelope to self | 0 1 2 3 4 NA |
| Pour a glass of water | Place glass and pitcher of water at client’s midline; instruct client to pour water into glass until it is ½ full. | 0 1 2 3 4 NA |
| Make Change | Place container of coins at client’s midline; instruct client to count out 67 cents in change. | 0 1 2 3 4 NA |
| Set time | Place timer at client’s midline; instruct client to set timer to 37 minutes. | 0 1 2 3 4 NA |

**Comments**