

**CHILDHOOD DISABILITY DETERMINATION**  
**ANALYSIS OF FUNCTIONAL AREAS**  
*TODDLER (age 1-2)*

Child's Name: \_\_\_\_\_

SSN: \_\_\_\_\_ D.O.B. \_\_\_\_\_

Relationship to the child (teacher, therapist, pediatrician, counselor): \_\_\_\_\_

Length of relationship: \_\_\_\_\_

Diagnosed Impairment (s): \_\_\_\_\_

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This analysis requests an evaluation of the severity of a child's functional limitation in six broad areas of functioning. This information is used to determine whether the child's limitations are functionally equivalent to the impairments listed in the Social Security regulations.

Please complete the following questions and feel free to comment where applicable. For questions 1-6, please mark the appropriate level of limitation for each area of functioning. When making this determination, the child's level of functioning should be considered in relation to children the same age who do not have impairments. The definitions of each level of limitation are as follows:

<b>None:</b>	<b>No interference with functioning in that area and child functions in an age-appropriate manner</b>
<b>Moderate:</b>	<b>More than slight interference, but less than a marked restriction</b>
<b>Marked:</b>	<b>Serious interference with the child's ability to function independently, appropriately, and effectively in an age appropriate manner</b>
<b>Extreme:</b>	<b>Very serious limitation in functioning to no meaningful functioning in that area</b>

The examples given are intended only to provide an illustration of typical functioning in that area, *particular to the child's age group*. They are taken directly from the Social Security Administration's policy interpretation rulings.

*Please continue to refer back to the definitions of each level of limitation (on previous page) when considering your responses.*

*1. Acquiring and Using Information*

The child's ability to think, acquire and use information, visual and verbal reasoning, problem solving, and idea development. This includes perceptual, sensorimotor, language and memory processes necessary to learn.

**Examples of Typical Functioning:** Learns how objects go together in different ways; learns through pretending that actions can represent real things; understands that words represent people, things, places, and activities; refers to self and things by pointing and eventually naming; learns concepts and solves simple problems by purposeful experimentation (for example, taking a toy apart), imitation, constructive play (for example, building with blocks), and pretend play activities; makes simple choices between two things; responds to increasingly complex instructions and questions; produces an increasing number of words and grammatically correct simple sentences and questions.

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None	Moderate	Marked	Extreme
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*2. Attending and Completing Tasks*

The child's level of alertness, ability to work at an appropriate pace, allay impulses, and initiate, sustain and change focus. This includes the capacity to focus on certain stimuli and ignore others.

**Examples of Typical Functioning:** Attends to things of interest (for example, looking at picture books, listening to stories); has adequate attention to complete some tasks independently (for example, putting a toy away); demonstrates sustained attention (for example, building with blocks, helping to put on clothes).

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None	Moderate	Marked	Extreme
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### 3. *Interacting and Relating with Others*

All aspects of social interaction and relationships with groups and individuals, as well as the speech and language skills necessary to communicate effectively. This includes the ability to respond to emotional and behavioral cues and form intimate relationships.

**Examples of Typical Functioning:** Begins to separate from caregivers, although is still dependent on them; expresses emotions and responds to the feelings of others; initiates and maintains interactions with adults; begins to understand concept of “mine” and “his” or “hers”; shows interest in, plays alongside, and eventually interacts with other children; communicates wishes or needs, first with gestures and later with words that can be understood most of the time by people who know the child best.

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None	Moderate	Marked	Extreme
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### 4. *Caring for yourself*

The child’s ability to care for one’s physical needs and maintain a healthy emotional state. This includes the ability to care for one’s own health and safety and to cooperate with others to meet one’s needs. Incorporate the concept that the child should be developing an increasing sense of independence and competence.

**Examples of Typical Functioning:** Is increasingly able to console self (for example, carrying a favorite blanket); cooperates with caregiver in dressing, bathing, and brushing teeth, but also shows what he can do (for example, pointing to the bathroom, pulling off coat); insists on trying to feed self with spoon; experiments with independence by a degree of contrariness (for example, “No! No!”) and declaring own identity (for example, by hoarding toys).

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None	Moderate	Marked	Extreme
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5. *Moving about and manipulating objects*

The child’s ability to perform physical functions like sitting, standing, balancing, shifting weight, bending, crawling, running, and transferring. This includes the ability to hold, carry and manipulate objects, as well as the capacity to plan, remember and execute movements. Consider the child’s coordination, dexterity and integration of sensory input.

**Examples of Typical Functioning:** Explores a wider area of the physical environment with steadily increasing body control and independence from others; begins to walk and run without assistance, and climbs with increasing skill; tries frequently to manipulate small objects and to use hands to do or get something wanted or needed; uses improving motor skills to play with small blocks, scribble with crayons, and feed self.

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None	Moderate	Marked	Extreme
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6. *Health and Physical Well Being*

The cumulative effects of physical and/or mental impairments. This includes the effects of chronic illness, including shortness of breath, reduced stamina, pain and poor growth. Consider the impact of therapies, medications and exacerbations. (A marked limitation requires episodes of illness or exacerbations that occur an average of 3 times a year, lasting 2 weeks or more, or the equivalent.)

**Examples of Limitations:** Weakness; dizziness; agitation; lethargy; psychomotor retardation; seizure or convulsive activity; recurrent infections; changes in weight; insomnia; need for frequent treatment or therapy; need for intensive medical care to maintain level of health; or unacceptable side effects of medication (stomach cramps, dizziness, headaches, daytime drowsiness).

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None	Moderate	Marked	Extreme
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1. What age-appropriate activities is the child able to perform? \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

2. What age-appropriate activities is the child unable to perform? \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

3. Which of the child's activities are restricted compared to other children the same age who do not have impairments? \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

4. Where does the child have difficulty with activities - at home, in childcare, at school or in the community? \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

5. Does the child have difficulty independently initiating, sustaining or completing the activities? \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

6. What kind of help does the child need to do his or her activities, how much help, and how often is it needed? \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date