

Mealtime Checklist Assessment with DIR Levels

Developmental Levels	Regulation & Interest DIR 1	Engagement & Attachment DIR 2
Behaviors	0-3 mos	3-6 mos
Optimum Position for Eating	Reclines on back, tummy or side at an angle of less than 45 degrees	Supported semi-sitting position, reclining at an angle of 45 to 90 degrees
Mealtime Dynamics	On demand feedings. Pay attention to cues for start & stop. Sit still. Play after feeding. Put to bed when drowsy.	On demand feedings. Follow infant's cues for start & stop. Bring to table for family mealtimes. Play after feeding. Put to bed when drowsy.
Types of Food	Only liquids from the bottle or breast	Usually introduced to cereals and pureed foods.
Drinking Independence	Holds onto bottle with two hands.	Lifts cup with handle (not yet drinking).
Eating Independence	Depends on caretakers.	Depends on caretakers.
Swallowing During Eating and Drinking	Swallows thin liquid. Does not take soft or pureed foods (semi-solids).	Uses a primitive suckle-swallow response to move semi-solid food into the pharynx. Some food is pushed out of the mouth. Periodic choking, gagging, or vomiting can occur.
Coordination of Suck, Swallow, and Breathe	Sequences two or more sucks from the breast or bottle before pausing to breathe or swallow.	Sequences 20 or more sucks from breast or bottle. Swallowing follows sucking with no discernible pauses when hungry. Less frequent pauses for breathing. Occasional coughing or choking indicates developing coordination of suck, swallow, and breathe.
Use of Tongue During Eating and Drinking	Uses extension-retraction movement (suckle-swallow pattern). Tongue may protrude slightly through the lips.	Uses a primitive suckle-swallow response to move soft or pureed foods into the pharynx. Some food is pushed out of the mouth.
Use of Lips During Eating and Drinking	Does not take food from a spoon.	Uses a suckling or sucking pattern as food approaches or touches the lips. Lips do not assist in food removal.
Jaw Movements in Eating and Drinking	Uses only suckling and sucking.	Primitive phasic bite-and-release pattern. No controlled, sustained bite. Reverts to sucking instead of biting. Begins munching with a regular, stereotypic rhythm and intermittent vertical movements. Variable jaw movement increases in up-down direction and speed. Diagonal rotary movement of jaw can occur with food between biting surface of gums.
Control of Drooling	Rarely drools because of minimal saliva production.	Rarely drools in supine, prone, or sitting. May drool in these positions if babbling, when using hands OR teething OR during or eating.
Social & Communication Skills	Gazes at person providing food.	Smiles at person providing food. Makes eye contact.

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Developmental Levels	Purposeful Communication DIR 3	Shared Problem Solving DIR 4
Behaviors	6-12 mos	12-18 mos
Optimum Position for Eating	Sitting, with the seat back at 90 degrees & some form of external support (belts, pillows, tray, person).	Sitting, with the seat back at 90 degrees. Secured by the highchair. Seat belt for safety, not support.
Mealtime Dynamics	Begin mealtimes on a flexible schedule. Introduce solid foods at infant's pace. Follow cues. Give lots of chances to learn, but keep it fun.	Follow a schedule of meals/snacks every 2-3 hours with only water between meals. Allow child to get messy when exploring eating independence. Eat together.
Types of Food	Liquids, pureed foods, ground or junior foods, and mashed table foods.	Liquids and coarsely chopped table foods, including easily chewed meats
Drinking Independence	Drinks from cup held by an adult. Holds own bottle to drink.	Tips cup too fast and spills liquid. Frequently drops cup. Holds cup to drink when adult places it in hand.
Eating Independence	Puts food in mouth with fingers. Holds spoon palm down (pronated grasp).	Puts filled spoon in own mouth. Partially fills spoon. Often loses contents before reaching mouth. Frequent drops and spills.
Swallowing During Eating and Drinking	Swallows liquid from a cup with extension retraction (suckling pattern). Swallows some thicker pureed foods and tiny, soft noticeable lumps.	Swallows liquid from a cup with intermittently elevated tongue (suck pattern). Swallows ground, mashed or chopped table foods with noticeable lumps.
Coordination of Suck, Swallow, and Breathe	Long sequences of suck, swallow, and breathe, with breast, bottle, then cup. Difficulty coordinating sucks with swallow and breathe. Up to 3 sucks before stopping. From a cup, may have continuous sucks followed by uncoordinated swallowing. Larger mouthfuls result in choking or coughing. Loses much liquid. May pull away from cup to breathe.	From a cup, swallow follows suck with no pause. Sequences at least 3 suck-swallows when thirsty. Less than 1 ounce taken during each suck-swallow. Some coughing and choking if liquid flows too fast.
Use of Tongue During Eating and Drinking	Tongue rests quietly to accept the spoon. Sucking movements alternate with the munching/chewing patterns. Simple tongue protrusion between teeth or gums. Tongue begins gross rolling movements or simple horizontal transfers of food between biting surfaces in molar area. Intermittent extension-retraction movements occurs occasionally with a difficult food transfer. The tongue does not push out food, although minor losses of food occur.	Transfers food from the center of the tongue to both sides of the mouth. Swallows with a tongue tip that is intermittently elevated (Sucking pattern). May use an extension-retraction pattern or simple tongue protrusion with a difficult food transfer. Tongue may protrude slightly beneath the cup to provide some additional stability. May lose liquid during sucking.
Use of Lips During Eating and Drinking	Upper & lower lips begin to draw slightly inward with food on them. Cheek and lip tighten asymmetrically to keep food in place between the lateral biting surfaces of the gums when chewing. Lips may be open for swallow but increasingly take an active role in removing food from spoon. Upper lip moves downward and forward to rest on the spoon and lower lip draws inward. Loses liquid when drinking.	Swallows food & liquids from cup with easy lip closure. Lips active during chewing. Less & less liquid, food or saliva loss while chewing, drinking, & removing cup from lips. Corner of lips & cheeks draw inward to assist in controlling food placement and movement. Upper and lower lips more active during chewing, cleaning, & transferring a wider variety of foods.
Jaw Movements in Eating and Drinking	The jaw remains quiet in a stable, open position until the spoon enters the mouth. Sufficient jaw control to hold foods without biting all the way through. May alternate holding pattern with phasic bite pattern. Diagonal rotary movements occur as the tongue moves from the center of the mouth to the side for chewing. Occasional phasic bite-and-release pattern when chewing food between the upper and lower central incisors.	Uses upper incisors or gums to clean food from the lower lip. Uses controlled, sustained bite on soft foods. Lack of teeth & weak bite may produce a phasic bite or sucking on harder foods. Diagonal rotary movements become smooth and well coordinated. Playful biting on the spoon occurs, but phasic bite reflex no longer present.
Control of Drooling	No longer drools attempting newly acquired gross motor skills, such as rolling and belly crawling. Drooling occurs during but not immediately before or after teething.	No longer drools attempting newly acquired gross motor skills, such as walking and running. Drooling may occur when teething.
Social & Communication Skills	Looks at other people & babbles during mealtimes. Stops when told "no".	Gives food and utensils when asked for them. Points to food choices.

Mealtime Checklist Assessment with DIR Levels

Developmental Levels	Creative Use of Symbols DIR 5		
	Behaviors	18-24 mos	24-30 mos
Optimum Position for Eating	Sitting in a raised chair at adult table or at a child's table and chair. Highchair no longer needed for safety and security.		
Mealtime Dynamics	Eat together. Stick to routines. Avoid using food as a reward or to calm child. Allow child to choose from available choices, and provide at least one food child accepts among these choices. Let child choose whether to eat and how much. Only water between meals/snacks.		
Types of Food	Liquids and coarsely chopped table foods, including most meats and many raw vegetables		
Drinking Independence	Sucks from a straw. Drinks from a cup. Still spilling when putting cup on table.	Drinks from a glass held in one hand	
Eating Independence	Fills spoon. Turns spoon in mouth. Still spilling and dropping food.	Puts food in mouth without turning over spoon. Beginning to use fork.	
Swallowing During Eating and Drinking	Swallows solid foods with easy lip closure, tongue tip elevation and occasional tongue protrusion. No loss of food or saliva.	Skillfully swallows foods that have a combination of textures with no loss of food or saliva.	
Coordination of Suck, Swallow, and Breathe	From a cup, swallowing follows sucking with no pause. Well-coordinated pattern with rare occurrences of coughing and choking. Sequences at least three suck-swallows of one ounce or more without a major pause.		
Use of Tongue During Eating and Drinking	Tongue <u>does not</u> protrude from the mouth or rest beneath the cup. Sucking pattern. Some simple tongue protrusion may continue during swallowing. No extension-retraction movements of the tongue.	Tongue makes free, sweeping motions to clean food from the upper or lower lips. Smooth transfers food from one side of mouth to the other & center to side. Tongue elevation and depression independent of jaw movement. Extension-retraction movements occasionally with difficult food transfers. Uses tongue tip elevation consistently for swallow.	
Use of Lips During Eating and Drinking	Upper lip closes on edge of the cup when drinking. Closes lips for chewing when needed to prevent food from falling out. May lose food or saliva while chewing.	No longer loses food or saliva. Adequate lip movement and easy lip closure when needed to retain the food during chewing	
Jaw Movements in Eating and Drinking	Controlled, sustained bite with harder foods. Less frequent need for associated arm and leg movements & pulling head backward into slight extension to assist with bite. Opens the mouth wider than necessary to bite foods of various thicknesses.	Controlled, sustained bite. Keeps head in midline even if food enters on the side of the mouth. Grades opening of the jaw to accommodate foods of various thicknesses. Uses a variety of diagonal rotary movements. Circular rotary movements occur when transferring food across the midline from one side of the mouth to the other and slight lateral movements of the jaw may occur.	
Control of Drooling	No longer drools attempting early fine motor tasks, such as self-feeding, undressing, or random play. Drooling may occur if teething.	No longer drools attempting more advanced fine motor tasks, such as drawing, fine finger movements, or two-three word speech combinations.	
Social & Communication Skills	Names some food items or people sharing meals. Refuses or complains about food.	Asks for food by name. Listens to stories. May tell own immediate experiences.	Asks for food by name or in simple sentences, "I want..." Takes dishes to sink.

Mealtime Checklist Assessment with DIR Levels

Developmental Levels	Logical Connections between Emotions & Ideas DIR 6		Multi-Causal, Grey-Area Thinking & Self Relection DIR 7-9
	Behaviors	36-48mos	48-60 mos
Optimum Position for Eating	Sits with peers at small tables. Continue to use a booster seat at family mealtimes.		Use regular chairs at table. May refuse booster seats.
Mealtime Dynamics	Introduce more variety at mealtimes, but let child choose how far to explore new foods. Keep to routines. Only water between meals/snacks. Let child serve his/her own food. Provide more of any food requested (except desserts). Expect some messiness. Excuse child from table when finished eating.		Keep to routines. Share meals with others. Let child choose from available foods at mealtimes. Allow to child to choose from a variety of snacks between meals. Only water between meals/snacks. Avoid eating in front of TV or computer. Encourage participation in set-up, clean-up and meal preparation.
Types of Food	Regular table food. Make sure food is in bite-size pieces.		Regular table food. Child learns to use a knife at the table.
Drinking Independence	Drinks from a glass held in one hand		Pours from two-quart container
Eating Independence	Holds spoon with fingers and rotates forearm to maintain spoon's position to mouth (supination). Little spillage. Uses fork.	Uses fork. Uses finger position (3 jaw chuck grasp). Chooses correct utensils. Uses fingers when appropriate.	Uses knife and fork to cut food.
Swallowing During Eating and Drinking	Skillfully swallows foods that have a combination of textures with no loss of food or saliva.		Skillfully swallows foods that have a combination of textures with no loss of food or saliva.
Coordination of Suck, Swallow, and Breathe	When taking liquids from a cup, swallowing follows sucking with no pause. Well-coordinated pattern with rare occurrences of coughing and choking. Sequences at least three suck-swallows of one ounce or more without a major pause.		
Use of Tongue During Eating and Drinking	No observable extension-retration pattern and no tongue protrusion even with difficult food transfers.		
Use of Lips During Eating and Drinking	No longer loses food or saliva. Adequate lip movement and easy lip closure when needed to retain the food during chewing		
Jaw Movements in Eating and Drinking	Controlled, sustained bite. Keeps head in midline even if food enters on the side of the mouth. Grades opening of the jaw to accommodate foods of various thicknesses. Uses a variety of diagonal rotary movements. Circular rotary movements occur when transferring food across the midline from one side of the mouth to the other and slight lateral movements of the jaw may occur.		
Control of Drooling	No longer drools attempting more advanced fine motor tasks, such as drawing, fine finger movements, or when talking.		
Social & Communication Skills	Plays with food. Likes to talk about self.	Tells stories. Exchanges comments with peers.	