DFPS SIL Contract Provider:       Service Area:

**A. Definition Compliance:** **Host Home Setting**

A host home setting is a family home with a rented room or garage apartment with access to a kitchen and preferably laundry facilities in the home. The young adult agrees to the household rules and has the independence to come and go as needed for employment, school and other personal and social activities.

Physical Address of SIL Setting:

Date of Walk Through:        Before Contractor signature

After Contractor signature

Name of Young Adult for whom walk through is conducted (if applicable):

Name of family:       Number of family occupants (identify #of adults/children:

Number of SIL occupants:       Number of SIL occupants per bedroom:

Describe room(s) in house for SIL occupant(s):

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **#** | **Item** | **Met** | **Technical Assistance**  **Yes No** | **Comments**  (A No under Met or a Yes under Technical Assistance must have an explanation under Comments) |
| 1 | A family home with a room or garage apartment | Yes  No | Yes  No |  |
| 2 | Family lives in the home | Yes  No | Yes  No |  |
| 3 | No CPS placements other than SIL placements allowed | Yes  No | Yes  No |  |
| 4 | Access to kitchen | Yes  No | Yes  No |  |
| 5 | Can store personal food | Yes  No | Yes  No |  |
| 6 | Access to laundry facilities (optional) | Yes  No | Yes  No |  |
| 7 | House rules identified | Yes  No | Yes  No | (indicate if posted or to be handed out) |
| 8 | SIL young adult can come and go as needed for employment, school, and personal and social activities | Yes  No | Yes  No |  |

Meets DFPS definition for SIL type setting of: Host Home Setting: Yes  No

Comment (Must comment if "No" is selected):

**SIL Physical Setting Walk Through Check List**

DFPS SIL Contract Provider:       Service Area:

**B. Suitability:** for **Host Home Setting** identified in Section A:

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **#** | **Item** | **Met** | **Technical**  **Assistance Yes No** | **Comments**  (A No or N/A under Met or a Yes under Technical Assistance must have an explanation under Comments) |
| 1 | **Exterior House Condition Acceptable:**  -Outside grounds  -Outside lighting  -House Exterior | Yes  No  Yes  No  Yes  No | Yes  No |  |
| 2 | **Interior Condition Acceptable**  -General Cleanliness  -Floors  -Walls  -Windows | Yes  No  Yes  No  Yes  No  Yes  No | Yes  No |  |
| 3 | **Is Setting approved for use by a Young Adult who is in need of ADA accommodations.** | Yes  No | Yes  No |  |
| 4 | **Fire Safety**  -Up to Date Fire Extinguisher  -Working Smoke Alarm(s) in:  Bedrooms  Hallways  Living/Dining Room  Other  -Easy Access to Exits  -Combustibles Items  Stored Properly  -Electrical | Yes  No  Yes  No  Yes  No  Yes  No  Yes  No  Yes  No  Yes  No  Yes  No | Yes  No |  |
| 5 | **Furnishings Condition Acceptable**  -Bed frame  -Mattress  -Dresser  -Closet  -Table  -Chair  -Sofa  -Individual storage area for non-food items | Yes  No  Yes  No  Yes  No  Yes  No  Yes  No  Yes  No  Yes  No  Yes  No | Yes  No |  |
| 6 | **Working Appliances**  -Stove  -Refrigerator  -Microwave (optional) | Yes  No  Yes  No  Yes  No  NA | Yes  No |  |
| 7 | **Working Utilities for Home**  -Water  -Running Hot Water  -Running Cold Water  -Electric  -Gas  -Sewage  -Septic | Yes  No  Yes  No  Yes  No  Yes  No  NA  Yes  No  NA  Yes  No  NA  Yes  No  NA | Yes  No |  |
| 8 | **Working Bathroom**  -Working toilets  -Showers  -Bathtub  -Running Hot Water  -Running Cold Water | Yes  No  Yes  No  Yes  No  Yes  No NA  Yes  No  Yes  No | Yes  No |  |
| 9 | **Household cleaning supplies** | Yes  No | Yes  No |  |
| 10 | **Storage space for dry food** | Yes  No  NA | Yes  No |  |
| 11 | **On-site Laundry**  -Washing machine  -Clothes dryer  **If no on-site laundry, Proximity of off-site Laundry**  -Within 1 mile  -within 2 miles  -within 5 miles  -over 5 miles | Yes  No  Yes  No  Yes  No  Yes  No  NA  Yes  No  Yes  No  Yes  No  Yes  No | Yes  No |  |
| 12 | **Laundry Supplies** | Yes  No | Yes  No |  |
| 13 | **Bus Stop Available**  **If available – distance:**  -within 1 mile  -within 2 miles  -within 5 miles  -over 5 miles | Yes  No  Yes  No  Yes  No  Yes  No  Yes  No | Yes  No |  |
| 14 | **Grocery Store Available**  If available – distance:  -within 1 mile  -within 2 miles  -within 5 miles  -over 5 miles | Yes  No  Yes  No  Yes  No  Yes  No  Yes  No | Yes  No |  |
| 15 | **Access to library or other educational resources**  If available – distance:  -within 1 mile  -within 2 miles  -within 5 miles  -over 5 miles | Yes  No  Yes  No  Yes  No  Yes  No  Yes  No | Yes  No |  |
| 16 | **Posted rules for occupants/ others** | Yes  No | Yes  No |  |
| 17 | **Key provided to Young Adult for:**  -external building or house  -young adult’s section of home if closed off from others  -bedroom | Yes  No  NA  Yes  No  NA  Yes  No  NA | Yes  No |  |

**Participant(s) Information:**

|  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| Signature: | |  | | | | | | Date: | |  | |
| Printed Name: |  | | Position: |  | Phone: |  | | | Email: | |  |
| Signature: | |  | | | | | | Date: | |  | |
| Printed Name: |  | | Position: |  | Phone: | |  | | Email: | |  |
| Signature: | |  | | | | | | Date: | |  | |
| Printed Name: |  | | Position: |  | Phone: | |  | | Email: | |  |

**Recommendation to use:** Yes  No Yes, with follow up completed:

|  |
| --- |
|  |