

SUPERVISED INDEPENDENT LIVING SETTING (SILS) APPROVAL STANDARDS: CHECKLIST OF FACILITY HEALTH AND SAFETY STANDARDS

YOUNG ADULT NAME:			
SUPERVISED SETTING ADDRESS:	CITY:	STATE:	ZIP CODE:
FACILITY GENERAL DESCRIPTION (HOUSE, MOBLE HOME, APARTMENT, ETC.):	TOTAL BEDROOMS:	TOTAL BATHROOMS:	RENT/OWN:

Supervised Independent Living Setting (SILS): A broad range of settings as defined and permitted under federal regulation for federal funding. SILS are not licensed, **they are approved**. A SILS placement may include apartments, shared apartments, dorm rooms and rented rooms or spaces. A young adult may rent a room or space in the home or on the property of a parent, legal guardian, or former foster parent as long as it is paired with Agency supervision. In such a placement, the parent, legal guardian, or foster parent is not considered the foster provider for that young adult and therefore does not need to meet the requirements of a traditional foster home, and the young adult is not considered to have been returned home. The young adult may instead be placed with a foster parent, relative, or in any other traditional (e.g., non-SILS) placement in the same way that a child under 18 may be placed as long as the young adult consents to such a placement.

SECTION A: SUPERVISED INDEPENDENT LIVING SETTING TYPE

- ☐ **University/College Approved Housing (Exempt from Safety Checklist, Skip to Section E)**
- ☐ **Shared Roommate Setting, Single Resident Occupancy, Apartment, Room and Board, Room or Space Rental.**
- ☐ **Young adult has a child(ren) living with them. (Will also need to complete Section D)**

SECTION B: SAFETY CHECKLIST (Exempt for University/College Housing)

Each item below must be answered accordingly:

YES: Requirement is met.

Maintenance Needed: Minor repairs are needed, there may be some safety risk to the young adult. A Correction plan must be created (Section D).

NO: Requirement is not/cannot be met.

Supervisor Approval: Requires supervisory review for approval.

SAFETY CHECKLIST	YES	MAINTENANCE NEEDED	NO	SUPERVISOR APPROVAL
1. Bedroom/sleeping area used by the young adult has at least one exit that ensures safe, direct, emergency exit to the outside. If security bars are installed on windows, the window is considered operable only if equipped with safety release devices.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
2. Home has functioning smoke detector installed in the hallway(s) of the young adult's sleeping area audible in each room or sleeping room used by the young adult.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
3. Home has accessible supply of water.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
4. Young adult has access to a bathroom that contains 1 toilet, 1 sink, and 1 tub/shower maintained in safe, operating condition and free from health hazards.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
5. If applicable, the young adult has access to a kitchen that is free from health hazards and includes an area for food preparation and storage. Appliances are safe and operational. Note: Some settings may not have standard kitchens.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
6. Exit doors and means of exit, halls, and stairs must be well lit and clean, free of obstruction and ready for immediate use.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
7. Home has functioning ventilation including heating and cooling systems.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
8. Setting is clean and waste is stored/located and disposed of in a manner that will not permit the transmission of communicable disease or odors.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
9. Living space appears to be safe and free from hazards.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
10. Young adult has their own designated sleeping area that is not a kitchen or bathroom.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
SECTION C: Considerations for Parenting Young Adult	YES	MAINTENANCE NEEDED	NO	SUPERVISOR APPROVAL
11. Setting is a safe environment and free from hazards for child(ren) of parenting young adult.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
12. Sleeping arrangements for child(ren) of parenting young adult are free from obstructions and other hazards.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
13. All weapons and/or ammunition are stored appropriately and safely (leave row blank if no weapons in the home).	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
14. All medications are stored appropriately and safely (leave row blank if no medications in the home).	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
15. Other:	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

SECTION D: PLAN FOR CORRECTIONS (Only Complete if Section C has “No” and “Maintenance Needed” boxes checked)

Items marked as “no” or “Maintenance Needed” in SECTION B may indicate immediate risk to the health, safety, or personal rights that either require correction prior to the supervised setting being approved or require that a plan for correction be established in order for supervised setting to be approved.

Suggested areas for maintenance or repair:	Plan for correction (e.g., young adult will contact the landlord to make needed repairs). Agency assigned worker should assist the youth when needed and to the extent possible.	Date agency assigned worker will return to check progress toward remediation:

SECTION E: INSPECTION SUMMARY (Required Completion)

- ☐ The supervised setting meets the standards for approval as described in this form.
- ☐ The SILS meets the core safety and health standards for approval with the above recommended maintenance or repair issues noted and addressed via A Correction Plan. Once corrected, the SILS will meet the standards of approval. If the required corrections are not made within 30 days, or a reasonable time frame decided upon by the agency and the young adult, the SILS approval may be rescinded.
- Agency assigned worker will return to check on progress toward completing the correction plan:
 - Date:
 - Note: The correction plan can be developed in a separate document and attached to this form, or SECTION D can be used as the correction plan.
- ☐ The SILS does NOT currently meet the standards for approval as described in this form.
- Explain:

Young Adult Name

Young Adult Signature

Date

Agency Worker Name

Agency Worker Signature

Date

☐ **SILS Approval Standards has been reviewed and approved by:**

Agency Supervisor Name

Agency Worker Signature

Date