

**SEMI-SUPERVISED INDEPENDENT LIVING ASSESSMENT TOOL**

This tool may be used to assess a young adult's readiness for a less restrictive independent living setting, as well as the appropriateness of a desired placement. This form should be completed by the social worker **and** the young adult.

Young Adult: \_\_\_\_\_

Social Worker: \_\_\_\_\_

Address of desired Placement: \_\_\_\_\_

Young adult will be living (check one):  alone or with dependent child  with peers  with adult connection

Other relevant information about proposed placement:

\_\_\_\_\_  
 \_\_\_\_\_

**SECTION 1: FINANCIAL PLAN**

**1. Using the budgeting tool provided below, have the young adult list out his/her projected income and expenses to calculate whether he/she can afford the proposed Semi-Supervised Independent Living Arrangement.**

Monthly Sources of Income		Monthly Expenses	
FC Maintenance Payment	\$ _____	Rent: \$	_____
_____	\$ _____	Food: \$	_____
_____	\$ _____	Utilities: \$	_____
_____	\$ _____	Cable/Internet: \$	_____
		Public Transportation: \$	_____
		Car Insurance: \$	_____
		Gas: \$	_____
		Car Payment: \$	_____
		Clothing: \$	_____
		Phone: \$	_____
		Personal/Hygiene: \$	_____
		Childcare: \$	_____
		Educational Expenses: \$	_____
		Entertainment: \$	_____
		Other ( _____ ): \$	_____
		Other ( _____ ): \$	_____
List all sources of income above and the expected monthly income from that source. This should include wages from employment, any financial aid, and any other sources of income.		TOTAL MONTHLY EXPENSES: \$ _____	
TOTAL MONTHLY INCOME: \$ _____			

**Total monthly income \$ \_\_\_\_\_ – total monthly expenses \$ \_\_\_\_\_ = \$ \_\_\_\_\_**

**Does the young adult have enough monthly income to support the desired placement?  Yes  No**

**SECTION 2: READINESS ASSESSMENT**

Using your knowledge of the young adult's past behavior and information obtained during your conversation with the young adult, assess each of the areas below. Indicate in the notes section the readiness indicators for each subject area.

YOUNG ADULT'S ABILITY TO HANDLE DAILY TASKS				
Subject:	Areas to Explore:	Social Worker Notes	YES	NO
Education / Employment	Does the young adult have the skills necessary to pursue educational and employment goals?			
Food Preparation	Can the young adult shop for food and prepare their own meals?			
Laundry	Does the young adult know how to do laundry? Will he/she have access to a washer/dryer, or is there a laundromat within close proximity to the young adult's proposed living arrangement?			
Transportation	Does the young adult have his/her driver's license and access to an automobile, <b>OR</b> know how to utilize public transportation?			
Community Resources	Is the young adult aware of available community resources and how to access them?			
Budgeting and Money Management	Is the young adult financially responsible and able to budget his/her income with the assistance of the social worker?			
Healthcare	Does the young adult know how to seek medical attention when needed, and is he/she capable of taking prescription and OTC medications appropriately?			
Safety	Does the young adult have a healthy relationship with the other household members in the desired placement?			
Safety, cont.	Are any household members in the desired placement engaged in illegal activity or dangerous behavior that could pose a threat to the young adult?			
Behavior	Is the young adult engaging in any concerning behaviors such as substance abuse, criminal activity, or any other dangerous behavior's?			

**SECTION 3: HEALTH AND SAFETY CHECKLIST**

Assess each of the safety factors below while walking through and observing the desired placement. If minor repairs are needed and do not pose a safety risk to the young adult, the item can be marked “yes” with maintenance needs noted.

HEALTH AND SAFETY STANDARDS				
Subject:	Areas to Explore:	Maintenance Notes	YES	NO
Bedroom / Sleeping Area	Does the young adult have a reasonable sleeping area with a bed and room to store his/her personal belongings?			
Bedroom / Sleeping Area	Sleeping room has no more than two adults and is not a kitchen or bathroom.			
Bathroom	Young adult has access to a bathroom that contains at least one toilet, one sink, and one tub or shower maintained in safe, operating condition free from health hazards.			
Kitchen	Young adult has an area to prepare meals, appliances are safe, operational, with adequate storage for food and is free from health hazards.			
Waste	Waste is stored, located and disposed of in a manner that will not permit the transmission of communicable disease or odors, create a nuisance, or provide a breeding place or food source for insects or rodents.			
Utilities	Home has adequate and functioning ventilation including heating systems; has running water and electricity.			
Electrical	Lighting and outlets are provided in rooms used by the young adult and no electrical hazards are present.			
Smoke Detector	Home has a functioning smoke detector installed near the young adult's sleeping area and audible in each room used by the young adult.			
Emergency Exit	The home has at least one exit that ensures safe, direct, emergency exit to the outside.			
Safety Hazards	Indoor and outdoor halls, stairs, ramps and porches are free from obstructions and no structural damage that poses a safety hazard is observed. Living space appears to be safe and free from hazards.			

**SECTION 4: SUMMARY**

Has it been determined that the young adult is capable of living in a semi-supervised independent living arrangement?  Yes  No

If yes, please check one of the options below in regards to the health and safety of the placement:

- The Semi-Supervised Independent Living Placement meets the standards for approval as described in this form.
- The Supervised Independent Living Placement meets the safety and health standards for approval with the above recommended maintenance or repair issues noted.

PLAN FOR CORRECTIONS:

- The Supervised Independent Living Placement does NOT currently meet the standards for approval.

**SECTION 5: SIGNATURES:**

Young Adult:	Date:
Social Worker:	Date:
Director / Designee:	Date: