

**Lifesharing Home Study**  
**Physical Site Review**

**Home Study Professional Information**

Name \_\_\_\_\_

Address \_\_\_\_\_

Phone \_\_\_\_\_ Email \_\_\_\_\_

Date of Physical Site Review \_\_\_\_\_ Date of Physical Site Review \_\_\_\_\_

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Lifesharer Home: \_\_\_\_\_

Address: \_\_\_\_\_

Phone #: \_\_\_\_\_ E-Mail Address: \_\_\_\_\_

**DESCRIPTION OF RESIDENCE**

Type of Structure and Construction (please check):

- |           |                |
|-----------|----------------|
| Apartment | Brick          |
| Row Home  | Stucco         |
| Duplex    | Concrete Block |
| Other     | Wood Frame     |

Do you have a yard? Yes \_\_\_\_\_ No \_\_\_\_\_

Is your yard fenced? Yes \_\_\_\_\_ No \_\_\_\_\_

Do you have any pets? Yes \_\_\_\_\_ No \_\_\_\_\_

If yes what pets? \_\_\_\_\_

If no, what pets would you consider if the individual wanted one? \_\_\_\_\_

How many floors (stories) does your home have? \_\_\_\_\_

Does your home have a basement? Yes \_\_\_\_\_ No \_\_\_\_\_

Does anyone sleep in the basement? Yes \_\_\_\_\_ No \_\_\_\_\_

Does your home have an attic? Yes \_\_\_\_\_ No \_\_\_\_\_

How long have you occupied your present home? \_\_\_\_\_

Type of Heating (please check all that apply):

Gas                  Oil                  Coal                  Electric                  Other

Do you use supplemental space heaters?                  Yes \_\_\_\_\_          No \_\_\_\_\_

If yes, what type (electrical, kerosene)? \_\_\_\_\_

How many full bathrooms do you have? \_\_\_\_\_          Half baths? \_\_\_\_\_

How many bedrooms do you have? \_\_\_\_\_

Square footage of bedroom for an individual living in your home? \_\_\_\_\_ feet by \_\_\_\_\_ feet

On what floor of the home is this bedroom located? \_\_\_\_\_

How many smoke detectors do you have in your home? \_\_\_\_\_

Is there a smoke detector on each floor?                  Yes \_\_\_\_\_          No \_\_\_\_\_

Do you have fire extinguishers in your home?                  Yes \_\_\_\_\_          No \_\_\_\_\_

How many? \_\_\_\_\_

What type of electrical service do you have (please check)?

Circuit breaker          Fuse          110          220

Do you permit smoking in your home?                  Yes \_\_\_\_\_          No \_\_\_\_\_

If apartment, is there a Certificate of Occupancy available to the entire building?

\_\_\_\_\_

**Neighborhood Location**

Urban (City)          Rural          Suburbs

**Neighborhood Characteristics**

Quiet          Noisy          Congested          Heavy Traffic          Many Children

Safe to be outside? (Circle one)          Daytime          Nighttime

**Comments:**

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

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<b>Physical Site Review Item</b>	<b>Yes (√)</b>	<b>No (√)</b>	<b>N/A or Corrective Action</b>
<b><i>Living Areas</i></b>			
Kitchen has refrigerator, sink, stove, oven, and cabinet for storage			
Utensils used for eating, drinking and preparation of food or drink are washed and rinsed after each use			
Living room/recreation space in addition to bedrooms			

<b>Physical Site Review Item</b>	<b>Yes (√)</b>	<b>No (√)</b>	<b>N/A or Corrective Action</b>
<b><i>Bathroom</i></b>			
At least one toilet, shower or tub			
Privacy provided for toilet, shower or tub by partitions or doors			
Sink, wall mirror, soap, towels, & toilet paper (individual paper/ cloth towels & trash receptacle)			
Individual washcloth, bath towel & toothbrush for each individual			
If physically handicapped, one bathroom constructed as accessible			

<b>Physical Site Review Item</b>	<b>Yes (√)</b>	<b>No (√)</b>	<b>N/A or Corrective Action</b>
<b><i>Bedroom</i></b>			
Bedroom is not in basement or attic.			
If a shared room, minimum of 50 sq. ft. per person or 60 sq. ft for a single person			
Room has direct access to a corridor			
Bedroom has one window			
Bedroom is ventilated.			

Bed linens laundered weekly			
Room is not sole means of egress to others rooms or entrance to stairway or basement			
Bedroom has a mirror, chest of drawers & closet or wardrobe space accessible			
Bed appropriate size with clean comfortable bed pillow, mattress & foundation			
<b>Physical Site Review Item</b>	<b>Yes</b>	<b>No</b>	<b>N/A</b>
<i><b>Laundry</b></i>	<b>(√)</b>	<b>(√)</b>	<b>or</b>
Provisions for regular laundry			<b>Corrective Action</b>
Clean & dirty laundries separate			
Towels, washcloths, and clothing kept clean			

<b>Physical Site Review Item</b>	<b>Yes</b>	<b>No</b>	<b>N/A</b>
<i><b>Stairs</b></i>	<b>(√)</b>	<b>(√)</b>	<b>or</b>
Well-secured handrails on stairways with more than two steps (including outside)			<b>Corrective Action</b>
All stairways, hallways & exits from rooms & home free from obstruction			
Interior stairs have non-skid surface			
Landings at interior & exterior stairway doors			

<b>Physical Site Review Item</b>	<b>Yes</b>	<b>No</b>	<b>N/A</b>
<i><b>Fire Extinguishers</b></i>	<b>(√)</b>	<b>(√)</b>	<b>or</b>
Portable fire extinguishers with 2A rating on each floor accessible to resident & kitchen with 2A-10BC			<b>Corrective Action</b>
Fire extinguishers inspected & approved within 12 months by local fire department or labor & industry			
Fire extinguisher for each 2000- sq ft. of space			

<b>Physical Site Review Item</b>	<b>Yes</b>	<b>No</b>	<b>N/A</b>
<i><b>Smoke Detectors</b></i>	<b>(√)</b>	<b>(√)</b>	<b>or</b>
At least one smoke detector on each floor (including attic & basement)			<b>Corrective Action</b>
Smoke detection devices located in common areas & hallways (& approved by PA Dept. of Labor & Industry, or Underwriters Lab. LS)			

<b>Physical Site Review Item</b>	<b>Yes (√)</b>	<b>No (√)</b>	<b>N/A or Corrective Action</b>
<b><i>Electricity and Heat</i></b>			
Electric lighting in all rooms & hallways, stairways, outside steps, porches & ramps			
All accessible 120- degree hot pipes, heaters, etc., have protective devices, etc.			
All operative fireplaces screened or with protective devices while in use			

<b>Physical Site Review Item</b>	<b>Yes (√)</b>	<b>No (√)</b>	<b>N/A or Corrective Action</b>
<b><i>Other</i></b>			
No obstructed doorways			
No locks on doors used as exits, which require keys, padlocks or skeleton key locks			
No interior doors with keyed locks to exit rooms (includes skeleton keyed locks)			
Floors, walls, ceilings, surfaces clean, free of hazards and in good repair			
All furniture and equipment in good repair			
Operable phone with emergency numbers posted nearby			
All cleaning supplies locked			
Flammable & caustic materials are stored in a locked area away from heat & flame			
First Aid kit (antiseptic, assorted adhesive bandages, sterile gauze, tweezers, tape & scissors)			
All medications locked			
No visible sign of insect or rodent infestation			
All open windows screened			
Windows & screens in good repair			
All weapons stored in a locked case with ammunition stored away from weapons & secured under lock			
Safety restraints are operable in all vehicles, which may be used to transport a client			
All in-ground swimming pools fenced with a gate that is locked when the pool is not in use			
All aboveground pools that are under 4 ft. in height made inaccessible by a fence with a gate that is locked, with a pool cover or other options			

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