

**Balance of State Continuum of Care
Common Assessment Tool Template**

A. Greeting & Presenting Need:

Hello, this is _____ with _____.

- How may I assist you today? Or
- Why are you calling today?

Note: for any housing or housing-related calls, you may want to re-phrase their presenting need for clarification. For non-housing related calls, this may be the appropriate time for a referral to appropriate community resource or service (like 2-1-1).

B. Screen for Domestic Violence:

Before we proceed are you in a safe location that we can talk?

If caller is fleeing domestic violence, follow accepted DV protocol. If caller is in a safe place, skip to the immediate shelter screen.

Thank you for sharing this information with me. Based on your recent experiences, I would like to connect you with people that can improve your situation, _____.

Depending on available local services, consider the following options:

- If a DV provider, initiate approved intervention.
- Make an immediate referral to local DVSA crisis line (or live connection if possible) Note: members of the DV provider community want to explore the details of how the live connection could work. DV providers use a different database than HMIS.

C. Screen for Veteran Supportive Services

For locations that have an active SSVF program that assist homeless or near homeless veteran families.

Have you or any member of your household served in the active military, naval, air services, National Guard or Merchant Marines?

If the caller confirms that a member of the household has veteran status, make an immediate referral to the local SSVF service provider.

D. Preliminary Contact Information:

In order to best serve you and others in our community experiencing a housing need, we need to collect information about you and your household. This information collected will be considered confidential.

Are you willing to provide this information?

Yes: continue with assessment. No: move to closure or crisis/outreach as appropriate to situation or available services.

- What is your full legal name?
- How many people are living with you?
 - Are there any children in your family/household?
 - Has anyone served in the military, reserve or National Guard?

E. Screen for immediate shelter need:

Ok, so your current housing situation appears to be _____ [re-phrase presenting need back to the client.]

- What is a telephone number we can reach you at? (____) ____-____
 - Do you have an alternate number? (____) ____-____
 - Can we leave a voicemail at the number(s) provided? _____
- Where did you stay last night?
- Do you know (or please tell me)
 - ZIP Code _____
 - Street Address:
 - City:
 - County:
- If a safe option: How long will you (and your family members) be able to stay there?
 - What resources would you need to stay at your current location?
 - Is there anyone else you (and your family) could stay with for a few days (or longer)?

If the caller appears to have a safe housing options for at least two business days, proceed to non-emergency housing screen. If the caller appears to have no safe location meant for human habitation, continue with this segment of the assessment tool. *Note: additional questions may be added to explore in greater details options to prevent the move to shelter, especially for rural areas with shelters may not exist.*

It appears you may need some temporary shelter. Our community/region has some options for shelter. We use an information management system called *Service Point* that will share some of your personal information to help determine eligibility for participating shelters.

- **Are you interested in temporary shelter services at this time?**
 - **Have you ever been in a shelter before?**
 - **What shelter?**
 - **How long ago?**
- **May I have your permission to enter your information into this housing options database?**
- **Do you give me consent to release your information to shelters and other housing programs?**

Provide list of shelters and other local housing services that provide temporary or short-term transitional options for caller approval.

If no to these questions, the caller may not be eligible for any shelter options (or has no interest in existing options). At this point, you may be able to refer them to any existing Street Outreach programs, Navigation Specialists, etc. as may be present in your community or region of the state.

If yes, you will collect the Iowa Basic data for Service Point for all members of the caller’s household, needing shelter. You will also need to ask questions relevant to eligibility requirements of local shelter or emergency shelter options (i.e., programs that may provide temporary hotel stays). Eligibility requirements will vary from shelter to shelter. Examples may include: veteran status, presence or absence of children/ pregnant adults, substances abuse concerns, sex offender status, gender and if caller is an unaccompanied adult (or youth). Remember that the fundamentally goal is to match the caller with shelter options that fit his/her circumstance.

Once a referral has been made, the shelter that places the caller should be able to provide the necessary case management to transition the caller from shelter to more stable housing options. If local shelters do not provide housing case management, the caller may be referred back to the intake staff to complete the non-emergency housing assessment.

F. Screen for non-emergency housing solutions:

This section of the common assessment template assume the caller has safe, temporary shelter. This section probably will have the most customization based upon the mix of available non-emergency housing options, which may include prevention services (for those at risk of housing loss), rapid re-housing (for households with reasonable income to pay market rent or low barriers), transitional housing (for households with high barriers that can be remedied) and permanent supportive housing (for households with high barriers or chronic situations which require routine supports).

It appears you may be eligible for housing stabilizations services. Our community/region has a variety of resources. In order to determine which program or service best fits your situation, we will need to ask some more detailed questions about your household. The interview will take about ____ minutes and may include the completion of a monthly household budget. Do you have that time now? (If not, which of these appointment times will work for you?)

At this time, you will either arrange for an appointment or complete a telephone interview as needed to support local services. *Note: w ho and how this interview process may vary by community or region of the state, depending on existing services in the area.*

The information and data we collect will be kept confidential, but it may need to be shared with local housing service providers. We use an information management system called *Service Point* that may be used to manage some of the data.

- **Would you like to determine if you are eligible for additional housing services?**
- **May I have your permission to enter your information into this housing options database?**
- **Do you give me consent to release your information to the following housing programs and services?**

Provide list of non-emergency housing services that the caller may be eligible to use.

Essential questions for screening:

- Are you facing eviction?
 - Do you have a court ordered eviction?
- Do you have any pending landlord or legal problems that may need assistance?
- Do you have any existing utility concerns?
 - Do you have a disconnect notice?
 - Do you have current or old utility debt that preventions you from acquiring utilities?
- How long have you lived at your current place of stay?
 - How long do you plan to stay there (how long do you think you can keep this housing?)
- What is your total household income?
- What are your monthly and annual living expenses?
- What is your housing plan to accommodate your family?
 - What is keeping you from this housing at this time?

In addition to these housing stabilization questions, you may have specific questions related to programs available in your defined region or service area. These specific questions should directly link to the actual housing options available in your community. For example, if you have housing stabilization services for veterans, you would want to confirm veteran status before referring the caller/client to the respective veterans' service program. If you have a transitional housing program for foster youth timing out of the program, you would want a specific question that would screen for such a foster youth transitional housing program. Remember the goal is to refer callers/clients to programs designed to meet their presenting circumstance as it relates to their ability to obtain and sustain stable and safe housing within their means.

G. Closure statement:

Do you have any additional concerns today?

This works as the beginning of a closure statement or to provide additional community resource referrals.

Someone from _____ [agency with available resources and is a strong match to presenting need] will be in touch. If you need additional assistance, please call (____) ____-____.

Final closure statement probably will need to be edited based on available community/mainstream and housing resources available locally.

Appendices

1. Iowa Basic data form for Service Point
2. List of available local or regional housing services by type.
3. Monthly budget tool
4. List of any required documents for eligibility determination.
5. Additional data collection forms as needed for specific services.