

Specialist Homelessness Services

Initial Assessment form

The **Initial Assessment** records the person's identified needs and the actions required to respond to these needs.

The **question guide** will assist practitioners to seek responses that **identify** the safety, accommodation and support needs of the presenting person.

The **act** section will assist practitioners to capture the best response for the person, based on their needs. This form also includes an attachment that can be used to capture information for each **accompanying person (child)**.

The notes page should be used to record additional information.

Question guide

Client	Administration	Safety	Accommodation	Support	Restrictions
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The client section captures the person's demographic information and contact details.

Client	Administration	Safety	Accommodation	Support	Restrictions
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The administration section of the initial assessment seeks to establish who is seeking assistance, the location, date and the details of a third party providing information on behalf of the client.

Client	Administration	Safety	Accommodation	Support	Restrictions
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The practitioner must seek to establish the immediate risks to the presenting person and the risks they pose to others. The practitioner must create an actionable response plan.

Client	Administration	Safety	Accommodation	Support	Restrictions
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Through a series of open-ended questions, the practitioner must seek to establish:

- how the person became homeless (or at risk)
- the specific vulnerabilities of the person in relation to their current accommodation / living arrangements
- the underlying causes of the current situation
- what the presenting person wants to happen next
- what immediate action needs to be taken

Client	Administration	Safety	Accommodation	Support	Restrictions
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Through a series of open-ended questions the practitioner must seek to establish :

- what issues may require further investigation
- how the presenting person understands their needs
- what the presenting person wants to happen next
- how best to meet their identified needs
- how the person's accommodation needs relate to their support needs
- the specific issues that require support /referral
- the person's current capacity to cope (support network, financial independence)
- what immediate action needs to be taken

Client	Administration	Safety	Accommodation	Support	Restrictions
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The practitioner must establish any locational restrictions. This may be due to safety issues, or legal matters such as an AVO or bail conditions.

The presenting person may also state the areas in which they prefer to be located such as near schools or networks.

Response	Outcome
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The response section of the initial assessment seeks to capture the main decisions that inform the best initial response.

Response	Outcome
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The outcome section of the initial assessment captures the primary response type and the additional or alternative services to which the presenting person is best matched.

Client profile

Given name

Middle name

Family name

Sex Male Female

Date of birth

dd

mm

yyyy

year estimated

Identifies as

- Aboriginal
 Torres Strait Islander
 both
 neither

Country of birth

Language at home

Culturally and Linguistically Diverse

Comments

Mobile phone

Home phone

Email

Current address

Identify

Administration

Safety

Accommodation

Support

Restrictions

Assessment method

- In person
- Telephone
- Teletypewriter

If in person, what location

- Outreach
- SHS interview room

Date assistance requested

<input type="text"/>	<input type="text"/>	<input type="text"/>
dd	mm	yyyy

Date of assessment

<input type="text"/>	<input type="text"/>	<input type="text"/>
dd	mm	yyyy

Expiry date

<input type="text"/>	<input type="text"/>	<input type="text"/>
dd	mm	yyyy

Who is looking for assistance

- Person only
- Person and another / others
- Person with one child
- Person with two or more children
- Spouse / partner
- Other

Details

Source

- Person
- Third party
- Person & third party

Type of third party (select from list)

Details

Immediate safety concerns

- Yes
- No

Risks to the person (& accompanying persons)

- Domestic or family violence
- Threats, violence or harassment
- Suicidal thoughts/self harm
- Physical health
- Mental health
- Unaccompanied under 16 year old
- Risk to accompanying children
- Parental Responsibility of the Minister
- Other

Details

Risks the person (& accompanying persons) pose to others

- Domestic or family violence
- Threats, violence or harassment
- Physical health
- Mental health
- Risks to children and/or young people
- Other

Details

Urgent safety issues that require immediate intervention

- Yes
- No

Details

Response required to address immediate safety concerns

In an emergency call 000

Children at Risk of Significant Harm
www.keepthemsafe.nsw.gov.au/home
 Family and Domestic Violence
www.domesticviolence.nsw.gov.au/services

Person's current accommodation

- Private: house / town house / flat
- Social housing: Public housing / Community Housing / Aboriginal Community Housing / Aboriginal Housing Office
- Couch surfing
- Young people care arrangements / Out of Home Care
- Caravan
- Tent
- Cabin
- Boat
- Improvised building / dwelling
- No dwelling / street / park / in the open
- Motor vehicle
- Boarding / rooming house
- Emergency accommodation
- Hotel / motel / bed & breakfast
- Hospital (excluding psychiatric)
- Psychiatric hospital / unit
- Disability support
- Rehabilitation
- Adult correctional facility
- Youth / juvenile justice correctional centre
- Boarding school / residential college
- Aged care facility
- Immigration detention centre
- Other

Further details

Primary reason current accommodation no longer viable / appropriate / safe

- Tenancy ending / eviction
 - Lease ending / ended
 - Eviction notice
 - Warrant of possession
 - Notice of termination / tenancy at risk
- Financial challenges
 - Can't pay rent / rent unaffordable
 - Experiencing mortgage stress (homeowner)
- Property issues
 - Substandard / in need of repairs / dangerous / unhealthy
 - Does not have essential facilities (e.g. no water / electricity / bathroom / kitchen)
 - Aggravates a severe or ongoing medical condition/disability
- Institutional exit
 - Official exit
 - Unofficial exit
- Family & domestic issues
 - Family & domestic violence
 - Family or relationship breakdown
 - Accommodation severely overcrowded
 - Accommodation does not allow immediate family members to live together
 - A member of the household is leaving care or custodial setting
- Other

Details

Person has somewhere safe to stay tonight

- Yes
 No

Person can stay safely within their current living arrangements for:

- Tonight only
 A few more nights after tonight
 Approximately one week
 Approximately two weeks
 Approximately one month
 Other (not appropriate in the long term)
 Cannot stay safely within their current living arrangements

Date person must leave the current accommodation

dd	mm	yyyy

Current homelessness status

- At risk of homelessness
 Homeless
 Is not homeless or at risk

History of current homelessness

- Less than 1 week ago
 1 week, to 1 month ago
 More than 1 month, to 6 months ago
 More than 6 months, to 1 year ago
 More than 1 year, to 5 years ago
 More than 5 years ago
 Don't know

History of homelessness

- No
 Yes

Details of history and frequency

History of Temporary Accommodation (TA)

- No
 Yes

Number of TA days in last 12 months

T Number

Housing history

- Private rental
- Owned (mortgage)
- Social housing (Public housing / Community Housing / Aboriginal Community Housing / Aboriginal Housing Office)
- Parent / carer / relative's / friend's house

Summary of rent/mortgage history

Person has applied for Social Housing

- No
- Yes
 - Public housing
 - Community Housing
 - Aboriginal Community Housing
 - Aboriginal Housing Office
 - On NSW housing register

Date applied

<input type="text"/>	<input type="text"/>	<input type="text"/>
dd	mm	yyyy

Details

Current Residency Status

- Australian citizen
 Permanent resident
 Sponsored migrant
 New Zealand Special Category Visa (Protected)
 New Zealand Special Category Visa (Unprotected)
 Refugee/Humanitarian program
 Asylum seeker
 Other (specify)

Details

Identification

- No
 Yes
 - Centrelink
 - Birth Certificate
 - Medicare Card
 - Passport
 - Visa/Migration papers
 - Driver's Licence
 - Other (Specify)

Details

Support received from another agency

Name of organisation

Name

Telephone

Email

Third party consent must be completed if information is required from another agency.

Details

Identified issues

- | | |
|---|--|
| <input type="checkbox"/> Challenging behaviours | <input type="checkbox"/> Legal |
| <input type="checkbox"/> Child Protection | <input type="checkbox"/> Literacy |
| <input type="checkbox"/> Counselling / support | <input type="checkbox"/> Living skills |
| <input type="checkbox"/> Cultural / religious | <input type="checkbox"/> Medical / general health |
| <input type="checkbox"/> Disability | <input type="checkbox"/> Mental health |
| <input type="checkbox"/> Domestic & family violence | <input type="checkbox"/> Non family violence |
| <input type="checkbox"/> Drug and alcohol | <input type="checkbox"/> Parenting / caring |
| <input type="checkbox"/> Education | <input type="checkbox"/> Personal safety & wellbeing |
| <input type="checkbox"/> Employment | <input type="checkbox"/> Psychological trauma |
| <input type="checkbox"/> Finances & money management | <input type="checkbox"/> Relationship breakdown |
| <input type="checkbox"/> Food / meals | <input type="checkbox"/> Sexual health |
| <input type="checkbox"/> Gender identity | <input type="checkbox"/> Tenancy support |
| <input type="checkbox"/> General health / wellbeing / self care | <input type="checkbox"/> Transition from care |
| <input type="checkbox"/> Identity papers | <input type="checkbox"/> Transition from custody |
| <input type="checkbox"/> Income support / government allowance | <input type="checkbox"/> Other |

Provide further details of issues identified

Currently enrolled in education

- Yes
 - Part time
 - Full time
- No

Details

Approximate income per fortnight

Income next due

<input type="text"/>	<input type="text"/>	<input type="text"/>
dd	mm	yyyy

Approximate debt payments per fortnight (exclude living expenses)

Currently employed

- Yes
 - Part time
 - Full time
- No

Details

Further financial information (e.g. variability, duration, reasons)

Main Source of Income

- No income
- Employee income/salary
- Casual/intermittent work
- Self employed
- Super/self-funded
- Business income
- Government/Centrelink payment or allowance
 - Not sure
 - Newstart
 - Parenting payment
 - Disability pension
 - Youth allowance
 - Age pension
 - Austudy/Abstudy
 - Carer allowance or payment
 - Sickness allowance
 - Family Tax Benefit A
 - Family Tax Benefit B

Person's support needs are appropriate to a SHS response

- Yes
- No

Details

Locations to consider when looking for vacancies

Locational restrictions relating to where the person can be placed

- Bail or parole conditions
- Legal or AVO requirements
- Domestic and family violence
- Other (specify)

Specify

Details of service/s from which the person has been excluded

Presenting people can be separated

- No
- Yes

Details of arrangements

Persons can be separated from their pets

- No
- Yes

Details of arrangements

Act

Response

Outcome

SHS Outcome

If a person is safe within their current living arrangements, could a preventative response address their accommodation / support needs?

- Yes > the person may be suitable for a Prevention and Early Intervention response. (End)
- No > continue to the next question

Is the person able to settle quickly back with family & friends or have the capacity & willingness to manage a tenancy / live independently with low level support?

- Yes > the person may be suitable for a Rapid Rehousing response. (End)
- No > continue to the next question

Could the person's high and complex needs only be met by an intensive response?

- Yes > the person may be suitable for an Intensive Response For Clients With Complex Needs. (End)
- No > the person may be suitable for a Crisis And Transitional Response. (End)

Additional comments (reasons for suitability)

Response

Outcome

Primary recommended outcome

- SHS: Prevention & Early Intervention
- SHS: Rapid Rehousing
- SHS: Crisis & Transitional
- SHS: Intensive Responses for Clients with Complex Needs
- Non-SHS response
- Information Only

Alternative or additional non-SHS responses

- Aboriginal Medical Service
- Aged care service
- Ambulance
- Brokerage
- Centrelink
- Child Protection Agency
- Court Advocacy
- Disability Support Service
- Drug & Alcohol Service
- DV Line
- Education enrolment/support
- Emergency Crisis Line
- Employment agency/support
- Family & child support service
- Family/friends
- It Stops Here Safer Pathway (Domestic and family violence)
- Legal service
- Medical service
- Mental health service
- Other agency (government / non-government)
- Out of Home Care provider
- Police
- Refugee or asylum seeker service
- Social Housing Provider (for housing assistance)
- Temporary accommodation provider (Link2home or local office)
- Other

Details

Key issues that should be noted in an immediate response

Other issues that the caseworker may need to investigate further

Assessment status

- Complete
- Incomplete
 - Safety concerns
 - Client provided insufficient information
 - Client abandoned assessment

(End)

NOTES

Accompanying person attachment (child)

Given name

Mobile phone

Middle name

Home phone

Family name

Email

Sex Male Female

Date of birth

<input type="text"/>	<input type="text"/>	<input type="text"/>
dd	mm	yyyy

year estimated

Identifies as

- Aboriginal
 Torres Strait Islander
 both
 neither

Country of birth

Current address

Language at home

Relationship to presenting person

Culturally and Linguistically Diverse

Comments

Accompanying person attachment (child)

Current Residency Status

- Australian citizen
- Permanent resident
- Sponsored migrant
- New Zealand Special Category Visa (Protected)
- New Zealand Special Category Visa (Unprotected)
- Refugee/humanitarian program
- Asylum seeker
- Other (specify)

Details

Identification

- No
- Yes
 - Birth certificate
 - Medicare card
 - Passport
 - Visa/migration papers
 - Other (specify)

Details

Currently enrolled in education

- No
- Yes
 - Part time
 - Full time

Details

Currently employed

- No
- Yes
 - Part time
 - Full time

Details

Accompanying person attachment (child)

Identified Issues

- | | |
|---|--|
| <input type="checkbox"/> Challenging behaviours | <input type="checkbox"/> Legal |
| <input type="checkbox"/> Child Protection | <input type="checkbox"/> Literacy |
| <input type="checkbox"/> Counselling / support | <input type="checkbox"/> Living skills |
| <input type="checkbox"/> Cultural / religious | <input type="checkbox"/> Medical / general health |
| <input type="checkbox"/> Disability | <input type="checkbox"/> Mental health |
| <input type="checkbox"/> Domestic & family violence | <input type="checkbox"/> Non family violence |
| <input type="checkbox"/> Drug and Alcohol | <input type="checkbox"/> Parenting / caring |
| <input type="checkbox"/> Education | <input type="checkbox"/> Personal safety & wellbeing |
| <input type="checkbox"/> Employment | <input type="checkbox"/> Psychological trauma |
| <input type="checkbox"/> Finances & money management | <input type="checkbox"/> Relationship breakdown |
| <input type="checkbox"/> Food / meals | <input type="checkbox"/> Sexual health |
| <input type="checkbox"/> Gender identity | <input type="checkbox"/> Transition from care |
| <input type="checkbox"/> General health / wellbeing / self care | <input type="checkbox"/> Transition from custody |
| <input type="checkbox"/> Identity papers | <input type="checkbox"/> Other |
| <input type="checkbox"/> Income support / government allowance | |

Provide further details of issues identified