

Outer Southern Metropolitan Region
Homelessness Service System
Development Project

C.H.A.P.

Common Homelessness Access Points

Common Homelessness Assessment & Referral Tool
(CHART)

Definitions Manual
June 2006

DEFINITIONS MANUAL

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DEFINITIONS MANUAL

OVERVIEW

The Outer Southern Metropolitan Region Homelessness Service System Development Project – CHART Working Group has developed the Common Homelessness Assessment & Referral Tool (CHART) for use by homelessness services in the Outer Southern Metropolitan Region (SMR). The CHART will be used to record client consent, needs assessment and referral. The SMR electronic intake, vacancy and referral system, including CHART, is known by the acronym CHAP (Common Homelessness Access Points).

The CHART should be filled in for all clients on initial contact or as soon as practical and kept up-to-date as details change. The information being collected falls under the headings of 'Client Details' and 'Client Need'.

Client Details

Client Details information is at a basic level and includes items collected in a format consistent with the Victorian Homelessness Data Collection. This section also includes client consent. It is expected that this section will be completed without requiring the client to go into too much detail or by probing problems in depth. A client requiring HEF for example, may only need the Client Details section to be completed.

Client Need

Client Need contains further Household Details, Accompanying Children's Immediate Needs, Supports and Housing History. It also covers areas of vulnerability and factors impacting on the client's homelessness.

Completion of the client need section of the CHART is a process that staff undertake with clients in order to provide assistance that best meets the immediate needs of clients.

Client need refers to an assessment of client housing and support needs, and the development of a course of action for a client to address those needs. Any relevant information about a client's current circumstances and needs should be collected. Client Need does not refer to the more detailed, comprehensive assessments that are part of an ongoing, longer-term case management approach.

The CHAP system has been developed to assist practise and not to replace the establishment of open dialogue with a client. Workers may use the system to directly enter data in a Question & Answer method, have a general conversation in relation to need and then complete, or a combination of both.

Client Need includes the following key sections:

- Referral details,
- A housing history listing accommodation in the last 12 months or five moves,
- Key supports and income details
- Household Details, Accompanying Children's Immediate Needs, and
- A preliminary assessment of client support needs, for which appropriate referrals may be given.

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Other vulnerabilities are to be considered during the Clients Needs section of the CHART. These vulnerabilities include-

- Safe place to sleep
- First time homeless
- Family violence
- Dependants
- Health
- Mental health
- Alcohol and/or drug
- Legal issues
- Disabilities.

As vulnerabilities are identified, the relevant section is available within the electronic CHART. These sections do not need to be completed unless required. Users will be prompted at the completion of a CHART to consider other vulnerabilities.

An assessment of housing and support needs should include an assessment of the following immediate needs:

- Who needs the service (presenting person, other person/s, children)
- What is the most immediate need of the person (what is being asked for?)
- Does the person have safe housing for that night?
- Does the person/s have food?

The initial CHART is not a comprehensive assessment (case plan) tool in itself. Using case notes, the CHART will develop into a case history file. To access this file into the future, consent must be received from the client.

Homelessness

"A person is homeless if he or she does not have access to safe, secure and adequate housing. Hence even if a person has a physical home, they would be considered homeless if:

They were not safe at home;

They had no legal right to continued occupation of their home (security of tenure); or

The home lacked the amenities or resources necessary for living.

A person is also considered homeless when he or she is accommodated at a SAAP agency or in other emergency accommodation, regardless of whether or not they pay rent."

Supported Accommodation Assistance Act 1994.

Primary

People without conventional accommodation, such as people living on the streets, sleeping in parks, squatting in derelict buildings, using cars or railway carriages for temporary shelter, or living in improvised dwellings.

Secondary

People who move frequently from one form of temporary accommodation to another, including:

People using various types of emergency accommodation (such as hostels, night shelters and refuges)

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People residing temporarily with other households (because they have no accommodation of their own) and

Those using boarding houses on an occasional or intermittent basis.

Tertiary

People who live in single rooms in private boarding houses on a medium to long-term basis. They do not have a separate bedroom and living room; they do not have kitchen and bathroom facilities of their own; their accommodation is not self-contained; and they do not have security of tenure provided by a lease.

Chamberlain and MacKenzie (1992)

Client

A client is a person who:

- is aged 18 years or older, or a person of any age not accompanied by a parent or guardian, and
- is homeless or at imminent risk of becoming homeless, and
- receives an *Initial assessment*, and
- receives *Homelessness assistance*, excluding one-off types of assistance such as information or advice where the client has not undergone an initial assessment process, unless the client is in an ongoing support relationship with the *Service outlet*.

Children

Accompanying and/or assisted children:

- Are under 18
- Have parents/guardians who are SAAP clients;
- Can accompany their parents/guardians, or be assisted at any time during their parents/guardians support period.

Accompanying children must accompany the parent or guardian and may or may not receive assistance.

Assisted children receive assistance from a SAAP agency and may or may not accompany the parent/guardian during the support period.

Who fills in the form?

You as the worker in a Front Door or Outpost fill in the initial Client Details & Clients Needs form based on information provided by the client. It is not appropriate for clients to complete the CHART on their own, but if appropriate, consider using the paper based 'client CHART form' if the person is waiting to be seen and is able to complete the form unassisted. The information collected in this form is basic but can be used to develop dialogue.

You should use the definitions in this manual to help complete the form accurately.

Superseded Information

If new issues or information is identified following initial contact, the original file is kept in tact and updates included.

The original record will not be changed as it forms part of the client's history.

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INITIAL CONTACT

User Details

Completed By

The name of the worker who interviews the client and commences the CHART.

Location/Site

The name of the assessing service, where the worker is situated, when interviewing the client.

Date (Effective Date)

Date the client contacted the assessing service.

Time

Time the client contacted the assessing service.

Phoned (Check Box)

The client made contact with the assessing service by phone.

In Person (Check Box)

The client made contact with the assessing service in person.

Client Details

Personal Details

Family name

That part of a name a person usually has in common with some other members of his/her family, as distinguished from his/her given names.

Given name

The person's identifying name(s) within the family group or by which the person is socially identified.

Given name and family name should be recorded in the format preferred by the person. The format should be the same as that written by the person on a (pre) registration form or in the same format as that printed on an identification card, such as Medicare card, to ensure consistent collection of name data.

Please indicate the 'type' of given name that is to be recorded:

(a) Medicare card name (if different to preferred name).

(b) Alias (any other name that you are known by).

Whenever a person informs the agency or establishment of a change of given name (e.g. prefers to be known by their middle name), the former name should be recorded according to the appropriate name type. Do not delete or overwrite a previous given name, e.g. 'Mary Georgina Smith' informs the hospital that she prefers to be known as 'Georgina'. Record 'Georgina' as her preferred 'Given Name' and record 'Mary' as the Medicare card 'Given Name'.

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Often people use a variety of names, including legal names, married/maiden names, nicknames, assumed names, traditional names, etc. Even small differences in recording—such as the difference between Thomas and Tom—can make record linkage impossible. To minimise discrepancies in the recording and reporting of name information, staff should ask the person for their full (formal) given name and family name. These may be different from the name that the person may prefer the agency or establishment workers to use in personal dealings. Agencies or establishments may choose to separately record the preferred name that the person wishes to be used staff. In some cultures it is traditional to state the family name first. To overcome discrepancies in recording/reporting that may arise as a result of this practice, agencies or establishments should always ask the person to specify their first given name and their family or surname separately. These should then be recorded as given name and family name as appropriate, regardless of the order in which they may be traditionally given.

Sex of Client (Check Box)

Sex is the distinction between male and female, as reported by a person or as determined by an interview.

Asking the sex of a client is usually unnecessary and may be inappropriate, or even offensive. It is usually a simple matter to infer the sex of the client through observation, or from other observations such as the relationship of the person(s) accompanying the respondent, or the first name.

A person's sex may change during their lifetime as a result of procedures known alternatively as sex change, gender reassignment, transsexual surgery, transgender reassignment for sexual reassignment. Throughout this process, which may be over a considerable period of time, sex could be recorded as either Male or Female.

Date of Birth (dd/mm/yyyy)

The date of birth of the client. If the client's date of birth is not known or cannot be obtained, age can be estimated by using the following method: estimate the client's age, and subtract the number of years from the current calendar year.

The date and month should be recorded as '0101' as the default.

DOB is estimate (Check Box)

Whether the Date of Birth of the client is an estimate.

Address – Current / Postal (Check Box)

Record the client's contact or postal address and indicate in appropriate check box. The current address may or may not be the person's usual address. The contact address may also be any other address nominated by the client, for example, a young person may wish to nominate the address of a friend rather than their own address. A postal address is where the client will be able to collect mail.

ID/HCC Sighted (Check Box)

Confirmation of identification of the client, preferably from a health care card. Other sources of identification that can be used include:

Drivers licence
Medicare Card

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Emergency Contact

Name, Relationship & Phone

Name, relationship and phone contact details of a person nominated by the client as an emergency contact. An emergency contact would be used in a situations such as if a client was no longer able to speak on the phone and the worker was concerned for their safety or well being.

Phone Numbers

Home

A current phone number at the premises the client is residing and the client can be contacted.

Work

A current work phone number on which the client can be contacted.

MOB

A current mobile phone number on which the client can be contacted.

Other

Any other phone number on which the client can be contacted.

Permission to call (Check Box)

Permission has been given by the client for a return call to be made to any of the above contact numbers. Particularly relevant for clients with family violence or safety issues.

OK to leave Message (Check Box)

Permission has been given to leave a message for the client on any of the above numbers. Particularly relevant for clients with family violence or safety issues.

Best time to call

A preferred time given by the client to call any of the above numbers. Particularly relevant for clients with family violence or safety issues.

Other Personal Details

Country of Birth

The country in which the person was born.

Main Language Spoken

The main language spoken by the client to communicate with family and friends.

Cultural Identity

The primary cultural group with which the client identifies. It is important that this question is answered from the client's perspective (not the staff member's). If the client identifies with more than one culture, record only the primary cultural group.

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Legal Residency Status

Residency or visa status includes Temporary Protection Visa, Permanent Residency and Assurance of Support.

Interpreter/Communication Required (Check box)

The client's self-assessed need for an interpreter. This may include a sign language interpreter.

Aboriginal/Torres Strait Islander Status/Origin

Indigenous status is a measure of whether a person identifies as being of Aboriginal or Torres Strait Islander origin.

The following definition, commonly known as 'The Commonwealth Definition' was given in a High Court judgement in the case of Commonwealth v Tasmania (1983) 46ALR 625.

'An Aboriginal or Torres Strait Islander is a person of Aboriginal or Torres Strait Islander descent who identifies as an Aboriginal or Torres Strait Islander and is accepted as such by the community in which he or she lives'.

The standard question for Indigenous Status is as follows:

Are you of Aboriginal or Torres Strait Islander origin?

This question must always be asked regardless of interviewers perceptions based on appearance or other factors.

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Client Consent

The client consent form must be printed and completed at this point. There are two areas that the client may provide consent -

Client Consent for disclosure of information

The client may consent for his or her information to be collected and made available to workers from WAYSS, Peninsula Youth & Family Services, Hanover South East, Springvale Community Aid & Advice Bureau, Windermere Child & Family Services and Good Shepherd, so that the client does not need to repeat information as they proceed through the Outer Southern Metropolitan Region homelessness system and to allow current client information to be available for workers.

Consent for referral

The client may consent for certain information to be provided to other services or organisations for the purposes of providing another service. The client must consent in the form of initials to each information referral.

Consent will only last for 90 days and must be renewed with the client prior to accessing information on the CHAP system.

Your Information—must be printed and provided to the client in every case. A hyperlink to the brochure is provided and copies are available in most CALD languages.

Client Consent (Check Box)

Whether the client gave consent for the referral of information collected.

Remember: Clients have the right to:

- o Be told why the information is being collected.
- o Be told how the information will be used.
- o Be told who will have access to the information and
- o Refuse to have information collected without affecting their right to receive services.

If consent is not given a referral can still proceed but the client will be required to provide the same or similar levels of information to the next service.

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Persons Involved

Persons Involved (Check box)

Number of people requiring assistance. If more than one person requires assistance, household details should be completed.

Record details of the client's children under the age of 18 years whether they are accompanying the client or not.

Household Details

Household Type (NDCA)

The composition of the group receiving assistance from a homelessness agency, based on the relationship between members of the group.

- o **Lone person** refers to a single person presenting alone.
- o **Person with children** includes parents with children of any age (including adopted or fostered children), where at least one child accompanies the parent/guardian or is provided with assistance as a consequence of their parent/guardian's support. Guardians include legal guardians and people caring for children on a temporary basis.
- o **Couple without children** includes a married or defacto couple presenting together without children or other family members.
- o **Couple with children** includes couples where both parent or guardians are receiving assistance and at least one child accompanies the couple or is provided with assistance as a consequence of their parent's/guardian's support.
- o **Group of unrelated persons** includes a group of two or more unrelated adults.
- o **Other** includes any other groups that do not fit under the above categories. For example other family configurations.

Persons receiving assistance defines the type of group receiving assistance from a homelessness agency and should not be confused with the family or household type the person was living in prior to receiving assistance. For example, a married woman escaping a violent situation who receives crisis supported accommodation is considered a 'lone person' rather than 'couple'.

Adults Full Name

Record all family members over the age of 18 years who are accompanying the client or will be residing with the client.

Sex

Sex of the persons being recorded (see earlier information on Sex)

DOB

Date of Birth of the persons being recorded (see earlier information on DOB)

Relationship

The relationship the client has with the family member for example, partner, stepchild, child.

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Main Income Source (Drop down Box)

The source by which this person derives most (equal to or greater than 50%) of his/her income.

- No income
- Registered/awaiting benefit
- Newstart allowance
- Youth allowance
- Community Development Employment Project (CDEP)
- ABSTUDY
- Disability support pension
- Age Pension
- Parenting payment
- Department of Veterans Affairs payment (pension or support)
- Other type of government allowance or benefit
- Workcover/compensation
- Maintenance/child support
- Wages/salary/own business
- Spouse/partner's income
- Other (Please specify)
- Don't know/no information
- Other Information

Separate CHART? (Check Box)

Indicate that a CHART will be completed for each accompanying adult who requires support.

Childrens Full Name

Record all children or young persons under the age of 18 years who are accompanying the client or may be residing with the client.

Sex

Sex of the person being recorded (see earlier information on Sex)

DOB

Date of Birth of the persons being recorded (see earlier information on DOB)

Relationship

The relationship the client has with the child or young person for example, stepchild, child.

Custody Status

Indicate if the child or young person is living with or has access rights with the client.

Current Child Protection Involvement

Indicate if the child or young person has current or active child protection involvement

Pets

The type of pet the household has, for example, dog, cat, bird.

Transport (Check Box)

The type of transport the client most commonly utilises or has access to for travel.

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School/Kindergarten/Creche

Record the name of the School/Kindergarten/Creche and the suburb it is located, for each child. Record the name of any appropriate contact people at the school for example, a welfare coordinator if they are currently involved in assisting the child/client.

Accompanying Children's Needs

Accompanying and/or assisted children:

- Are under 18
- Have parents/guardians who are SAAP or THM clients;
- Can accompany their parents/guardians, or be assisted at any time during their parents/guardians support period.

Accompanying children must accompany the parent or guardian and may or may not receive assistance.

Assisted children receive assistance from a SAAP or THM agency and may or may not accompany the parent/guardian during the support period.

Immediate Crisis Needs identified or requested

Identification of the child/s immediate needs, for example, protection, food vouchers, clothing, immediate medical attention and details of those needs which have been met or partially met.

There is room for further identification of children's general and ongoing needs/support under the section Accompanying Children's Need notes section.

Other requirements for accompanying children (NDCA)

Dropdown list indicating requirements of accompanying children which have been identified but not addressed. This will assist an agency accepting any referral or interim case worker.

School liaison/child care

- o Kinder/school liaison
- o Child care

Personal support

- o Help with behavioural problems
- o Sexual/physical abuse support
- o Skills education
- o Structured play/skill development

General support/advocacy

- o Access arrangements
- o Advocacy

Specialist services

- o Specialist counselling
- o Culturally specific support
- o Health/medical services

Basic support and other services

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- o Meals
- o Showers/hygiene
- o Recreation
- o Transport

Accompanying Childrens Needs

Free text area to indicate any needs which have been met and any additional needs of each child or young person

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CLIENT NEED

Client Need

Source of Referral (NDCA List)

The party (person or agency) responsible for the referral of a client to the homelessness agency.

Shows the source of referral/information used to show the formal way the client was referred to the assessing service or how the client found out about the assessing service.

- o Self
- o Family/friends
- o School/other educational institution
- o DHS
- o Legal unit/correction institution
- o Health services
- o Psychiatric unit
- o Housing Information and Referral agency
- o Other homelessness agency
- o Other government department
- o Other non-government organisation
- o Other (Please specify)
- o Don't know/no information

Referring Agency Name

Name of the Agency or Service who has referred the client.

Main Presenting Reasons for Seeking Housing Assistance (Assistance requested by the client) (Check Box)

Main housing reason for which the client has entered the assessing service.

The information is separated into issues that will require further assessment and assistance and issues requiring HEF. If HEF issues are required, there may not be any need to continue the assessment but vulnerability factors should be considered. HEF application should be completed.

Crisis & Transitional Accommodation / Support Issues

- Nowhere to stay
- Eviction / Asked to leave
- Released from custody
- Short term emergency accommodation
- Exiting other institution
- Family / Relationship breakdown
- Other

HEF related issues

- Rent in advance
- Rent in arrears
- Other HEF related issue

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Vulnerability Factors

The dictionary definition of vulnerable is “The state of being susceptible to physical or emotional injury”.

As soon as possible within intake and assessment the identification of the safety or vulnerability of a client needs to be determined. Including threat from others, risk to self, risk to others, suicidality.

Identified factors which impact on the client’s vulnerability include –

- o Safe place last night or in a safe place tonight
- o Family / relationship breakdown or family violence
- o Dependants that also require assistance
- o Health issues
- o Mental Health issues
- o Drug and/or alcohol problem
- o Suicide risk
- o First experience with homelessness
- o Significant legal issues
- o Disabilities

As vulnerability factors are identified, relevant information should be recorded within the appropriate section on CHART. The worker bases information collected on information disclosed by the client and observations. The worker is not expected to enter an unqualified clinical or professional opinion in relation to any matter. This information will assist when referring to other services or for ongoing case management. This section should be completed with the client. Further observations and notes can be entered into the case notes and/or summary pages.

The list above is not a definitive list and any other vulnerabilities that the worker may identify should be considered. If any of the above is suspected or identified the section Risks & Impacting Factors - Escaping Violence will further assist in identifying immediate risk factors.

Family Violence

If Family Violence is identified and the client requires immediate assistance the worker must immediately make an assisted referral to the appropriate family violence service.

Housing History

Why & When is the client leaving current accommodation

Reason leaving

The reason/s the client is leaving their current accommodation. This may also include when they are intending leaving or when they left.

When leaving

Record any deadlines/dates the client may have for vacating the property they are currently in. This date may vary from when they are leaving.

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Accommodation History

Record the 5 most recent addresses the client has resided or those within the last 12 months.

How long

Record how long the client resided in each accommodation as listed.

Why no longer there

General text as to why the client had to leave the previous accommodation such as arrears, conflict, safety, relationship breakdown etc.

Office of Housing debts (Check Box)

Indicate if, and the type, of OoH debt the client may have.

Private rental debts (Check Box)

Indicate if the client has any private rental debts.

Rental References (Check Box)

Indicates if the client has current rental references.

Black Listed (Check Box)

Indicates if the client is blacklisted and may not be eligible to apply for private rental through Real Estate Agents utilising the database.

Key Supports

Name of Support Agency

The party (agency or service) from whom the client is receiving a service. This may include doctors, specialist health services, counselling services, etc.

Name of Support Person

Name of the person at the agency/service or an individual who is providing a service or support to the client or who can be contacted regarding support for the client.

Contact Numbers

Contact number of the agency/service or person from whom the client is receiving a service.

Potential Housing Options

Name of Person or Organisation

The name of an individual or an organisation who may provide accommodation to the client in the short or long term.

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Relationship to the client

The relationship that the potential accommodation provider has to the client.

Address

The address of the potential accommodation.

Contact Number

Contact number of the person or organisation who may provide the client with accommodation.

Assessment of Housing need and accommodation requirements

Worker Assessment of Housing Outcome (NDCA List)

The worker's assessment of a client's need for housing assistance. This information is a useful summary measure for describing a client's need for assistance in relation to a housing outcome. In conjunction with information about the more detailed types of support this information builds a profile of client need, as assessed by the worker.

These categories describe a client's need for assistance related to a housing outcome, that is, whether support was needed to help the client:

- o Obtain accommodation or
- o Maintain accommodation.

It also describes the type of accommodation the client needs support to obtain or maintain (crisis, transitional or long term)

More than one of these categories may be recorded.

These categories describe the need for assistance to obtain or maintain housing; the actual need for the accommodation itself is implied.

In some cases, a client who is at risk of homelessness may need support to maintain their current (long-term) housing. In this situation 'assistance to maintain long-term housing could be recorded.

- o Assistance to obtain crisis accommodation
- o Assistance to maintain crisis accommodation
- o Assistance to obtain transitional accommodation
- o Assistance to maintain transitional accommodation
- o Assistance to obtain long term accommodation
- o Assistance to maintain long term accommodation
- o Client does not need a housing outcome

Specific Accommodation Requirements (Free text)

Records specific client needs in relation to housing options e.g location, size, disability access, proximity to pharmacotherapy etc

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Income details

Labour Force Status (NDCA)

The status of the client in relation to employment. Drop down list includes-

- o Employed full time
- o Employed part time
- o Unemployed (looking for work)
- o Not in labour force
- o Don't know
- o Not stated/inadequately described

Student Status (NDCA)

The status of the client in relation to studies. Drop down list includes-

- o Not a student
- o Primary/secondary school student
- o Post secondary student/employment training
- o Don't know
- o Not stated/inadequately described

Type of income (NDCA)

The type of income the client receives. Drop down list includes-

No income

- o No income
- o Registered/awaiting benefit

Government payments

- o Newstart
- o Youth allowance
- o Community Development Employment Project (CDEP)
- o ABSTUDY
- o Austudy payment for students aged 25 years and over
- o Disability support pension
- o Age pension
- o Parenting payment
- o DVA payment (pension or support)
- o Other type of government allowance or benefit

Other income

- o Workcover/compensation
- o Maintenance/child support
- o Wages/salary/own business
- o Spouse/partner's income
- o Don't know

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- o Other (please specify)
- o Not stated/inadequately described

Income amount per fortnight

This is the client's individual income per fortnight.

Household income per fortnight

What is the combined household income base on income received from other members of the household who would contribute to rent.

Date of next payment

What date is the next income payment is expected?

Debts

Record any debts which the client may disclose and the amount owed.

Worker Assessment of Client Issues

Interpersonal Relationships (NDCA)

List any interpersonal issues impacting on the client's ability to obtain or maintain housing.. Drop down list includes-

- o Time out from family/other situation
- o Relationship/family breakdown
- o Interpersonal conflict
- o Sexual abuse
- o Family violence
- o Physical/emotional abuse

Financial (NDCA)

List any financial issues impacting on the client's ability to obtain or maintain housing. Drop down list includes-

- o Gambling
- o Budgeting problems
- o Rent too high
- o Loss of income
- o Other financial difficulty

Accommodation (NDCA)

List any accommodation issues impacting on the client's ability to obtain or maintain housing. Drop down list includes-

- o Overcrowding issues
- o Eviction/asked to leave
- o Emergency accommodation ended

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- o Previous accommodation ended

Health (NDCA)

List any health issues impacting on the client's ability to obtain or maintain housing. Drop down list includes-

- o Mental health issues
- o Problematic drug/alcohol/substance use
- o Diagnosed psychiatric illness
- o Other health issue

Other (NDCA)

List any other issues impacting on the client's ability to obtain or maintain housing. Drop down list includes-

- o Gay/lesbian issues
- o Transgender issues
- o Recently left institution
- o Recent arrival to area with no means of support
- o Itinerant
- o Don't know/no information
- o Other (please specify)

Notes (Free Text)

The contact notes sections are divided into the following -

- o Housing Needs
- o Interpersonal Relationships
- o Financial
- o Accommodation
- o Health
- o Presenting Risk to others
- o Summary

The contact notes section is to record staff observations when completing the CHART. It is not designed to be completed for case management purposes, the Case Notes / Narrative section is to be used for this purpose

Other Support /Service Provided or Recommended

Issue

What client issues require referral or further assistance?

Service or Organisation

What service or organisation has the client been referred to for further assistance?

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Case Notes / Narrative Page

Case Notes / Narrative should be updated by the staff member at each contact within the homelessness sector.

Case notes should be thorough enough to allow subsequent workers to form a clear picture of client need and history and to enable adequate case planning into the future.