DHS Housing Stabilization Services Coordinated Entry Document

Client Name: Client HMIS ID:

This document shows that a person has an assessed need and housing instability for Housing Stabilization Services, which represent part of the eligibility requirements for these services.

Client Information

Date of Birth:

Phone Number where you can be reached or where a message can be left:

Email where you can be reached or where a message can be sent:

Eligibility Questions

The following series is required to help determine eligibility for DHS Housing Stabilization Service. Based on your experience with the person you have assessed for Coordinated Entry, review the following 5 questions and use your professional judgement when selecting your responses.

	Question	Explanation	Answer
1.	Housing Instability: Is the person experiencing housing instability?	 Yes indicates person has reported their current housing situation as one of the following: Homeless (the person lacks a fixed, adequate nighttime residence) At risk of homelessness (the person is faced with a situation that may cause them to become homeless) Transitioning or recently transitioned from an institution, licensed, or registered setting 	Yes No Unsure/ Unable to answer
2.	Communication:		
	Does this person need	Yes indicates you observe at least one of the following:	Yes
	support	Person is difficult for most listeners to understand	No
	communicating their	Person struggles to understand most speakers	Unsure/
	needs to help with	• Person uses non-speech method (e.g., sign language, symbols, gestures) to communicate	Unable to
	housing?		answer

	Question	Explanation	Answer
3.	Mobility: Does this person need support getting around to help with housing?	 Yes indicates you observe at least one of the following: Person needs assistance or supervision to use transportation Person walks with physical assistance from another person Person does not typically walk Person requires assistance from another person to complete tasks requiring fine motor skills such as reading, writing, or maintaining personal care Person cannot walk for long periods without taking breaks 	Yes No Unsure/ Unable to answer
4.	Decision Making: Does this person need support in decision making related to their housing?	 Yes indicates you observe at least one of the following: Person has reported significant short-term memory issues or confusion retaining or recalling recent events, experiences, skills, or information Person shows confusion or disorientation when asked about themselves Person cannot weigh positives and negatives of issue in order to make appropriate decision Person is easily coerced into decisions that may not benefit them 	Yes No Unsure/ Unable to answer
5.	Managing Challenging Behaviors: Does this person need support managing challenging behaviors to help with housing?	 Yes indicates you observe at least one of the following: Person exhibits behaviors that may require supports to prevent/mitigate breaking the law Person would have difficulty to identify and problem-solve to take appropriate action without assistance in a potentially harmful situation Person requires the availability of an identified/dedicated person to safely direct own activities and manage personal responsibilities 	Yes No Unsure/ Unable to answer

If yes to the question regarding housing instability, and yes to any of the remaining questions, the individual meets the Assessed Need and Housing Instability observations for DHS Housing Stabilization Services.