

Staffing Form

<u>Client Name</u> <input type="checkbox"/> Intake <input type="checkbox"/> Annual Update <input type="checkbox"/> Case Staffing	<u>Date</u>	<u>Staff in Attendance</u> Use this section to identify staff present.
<input type="checkbox"/> Pro. 1 <input type="checkbox"/> Pro. 2 <input type="checkbox"/> Pro. 3 Change in Provider? <input type="checkbox"/> Yes (attach audit form*) <input type="checkbox"/> No		
<u>Presenting Problems</u> Use this section for staffing new participants or for discussing clients that you are needing help with.	<u>Client Strengths</u> Examples: support systems, income, benefits, employment history, social strengths, health condition, etc.	
<u>Client-Identified Goals</u> (in order of importance) Use this section to document what the client identified as their goals when asked in the intake/assessment process.	<u>Staff-Identified Goals</u> (in order of importance) Use this section to discuss what staff identified in discussion with client that seems to be importance to housing stability	
<u>Recommendations</u> Do not pre-fill this area. Leave it open and write in recommendations based on what is agreed up on in the staffing. This is really important!		
<u>Signature</u> All staff present signs the document after it is staffed.	<u>Title</u>	<u>Date</u>

*Anytime there is a change in provider (case manager or whoever is handling their file) an audit of the file should be completed by the supervisor to ensure any missing documents can be remedied ASAP.



Staffing Form

<u>Client Name</u> Jane Doe <input checked="" type="checkbox"/> Intake <input type="checkbox"/> Annual Update <input type="checkbox"/> Case Staffing	<u>Date</u> 7/20/17	<u>Staff in Attendance</u> Jerry Lewis Mickey Mouse Cindy Crawford
<input checked="" type="checkbox"/> RRH <input type="checkbox"/> PSH <input type="checkbox"/> PSH-2 Change in Provider? <input type="checkbox"/> Yes (attach audit form) <input checked="" type="checkbox"/> No		
<u>Presenting Problems</u> -Currently homeless, staying at XYZ Shelter -Only has 15 days left to stay -No income -3 prior evictions -Out of medication for anxiety -No primary care or mental health care	<u>Client Strengths</u> -Good employment history in food service -GED -Owns a car in working condition -Keeps all documentation from case management, housing providers, identification, etc. -Has \$190 SNAP (food stamp) benefits	
<u>Client-Identified Goals</u> (in order of importance) -"I need my anxiety meds, I think I'm going to lose it at the shelter" -"Please help me with a 2 bedroom so I can have a place for my son to stay" -"I'd like to get my CNA"	<u>Staff-Identified Goals</u> (in order of importance) -Obtain housing within 15 days -Assist with referral for doctor to get medication once in housing -Obtain income	
<u>Recommendations</u> -Housing Specialist to check with XYZ Property Management and Scott Jones for 2BRs -Housing Specialist to pull evictions off court website to see what pops up and how much money is owed -CM to reach out to XYZ Shelter and let them know we are working on a housing plan for RRH within 30 days in case a shelter extension is necessary -Provide her with information regarding Wellness Free Medical Clinic and let her know she can reach out now or CM can assist once in housing -Follow up Appointment next week on 7/27/17 to review housing options		
<u>Signature</u> Jerry Lewis Mickey Mouse Cindy Crawford	<u>Title</u> Housing Spec. RRH CM Housing Dir.	<u>Date</u> 7/20/17 7/20/17 7/20/17

