NY-508 Coordinated Entry Prevention / Diversion Screening Tool

Date of Screening Interview: ________/__________/__________
Name: ________________________________________________________
Birthdate: ____________________
Location: _____________________
Staff completing interview: _____________________________________

Pre-Screen Questions

1. Do you believe you will become homeless in the next 2 weeks?
   __Yes __No
1a. Are you homeless or do you believe you will become homeless in the next 3 days?
   __ Yes __ No

HUD Category 1: living in a place not meant for human habitation, in emergency shelter (including domestic violence shelter), in transitional housing, or exiting an institution where they temporarily resided for up to 90 days and were in shelter or a place not meant for human habitation immediately prior to entering that institution.

HUD Category 2: At imminent risk of homelessness within 14 days.

Are you currently residing with, or trying to leave, an intimate partner who threatens you or makes you fearful?
__ Yes __ No

*If yes to Question 2, clients are referred to DV resources and referred to crisis housing.
DO NOT PROCEED WITH THIS ASSESSMENT. Call 211 for DV resources. Call Erie County's 24 hour hotline at 716.862.4357 or for shelter call 716.884.6000

3. Where did you sleep last night? __________________________________________________________

4. Was it a safe location? __ Yes __ No

If no, ask “What made the location unsafe?” “Is there another place you can think of where you feel safe and could stay for a couple of nights?” If unsafe due to domestic violence, refer to DV services / crisis housing.
PREVENTION/DIVERSION QUESTIONS

5. Why did you have to leave the place you stayed last night?

__________________________________________________________________________

6. Could you stay tonight at the same location? __ Yes __ No
   If no, skip to Question 9

7. What would you need to help you stay where you stayed last night again?

__________________________________________________________________________

Examples: (Landlord mediation, Conflict resolution, Rental assistance, Utility assistance, etc.)

8. Would it help if I contacted the person you stayed with? What is the best way to contact that person?
   Name ___________________________ Phone _________________________

9. Is there anyone else you (and your family) could stay with? Friends, family, co-workers?
   __ Yes __ No
   If no, skip to Question 12

10. What would you need to help you stay there?

__________________________________________________________________________

Examples: (Landlord mediation, Conflict resolution, Rental assistance, Utility assistance, etc.)

11. Would it help if I contacted that person you can stay with? What is the best way to contact that person?
    Name ___________________________ Phone _________________________

12. Were you able to successfully divert this person(s) via homeless prevention or other community resources, without enrollment in FET or CE assessment?
    __ Yes __ No
If the client’s housing situation is now resolved, the client has been successfully diverted.

If no and the client will become literally homeless or is currently literally homeless and cannot be diverted, continue with Coordinated Entry Assessment (referral to crisis housing, 211, and/or conduct TAY-VI-SPDAT).

If a client can resolve their housing at the moment but is still at imminent risk of homelessness, enroll in Family Engagement Team.

Outcome of Screening: