Workflow Diagram:

Intake and Case Management

INITIAL CONTACT Referral/Eligibility Determination

Call in Access Point Diversion Contact List

Role: istation Director

Intake Interview

Call back (Priority first) Phone Interview form Background Check Schedule Intake

Role: istation Director

Intake Assessment

Form Completion Rules and Expectations Clothing in Bug Baker Schedule with Case Mgr

Role: istation Director

Tour of Shelter and Bed Assignment

Laundry Kitchen Curfews Door locks

Role: istation Director

FamilyPromise We are Housing with Dignity!

Case Management and Assessments

Develop Case Plan VI - SPDAT

Evaluate: health, job, education, employment, housing opportunities

Discuss Plan B/Exit Date
Other concerns discussed

Role: Case Manager

Beyond Family Promise

Resource and Networking event Include other non - profits

Role: TBD, istation Director

EXIT INTERVIEW

Generally a phone call Provide additional resources Exit Forms Program Evaluation

Role: TBD, istation Director

No Housing Outcome

Provide additional resources
Explain 30 day policy
Schedule exit interview

Role: Case Manager

Positive Housing Outcome

Confirm housing was secured
Submit check request, if needed
Final budget
Schedule exit interview
Provide welcome baskets

Role: Case Manager

Weekly Case Management

Review goals and progress
Discuss Plan B/Exit Date
Follow up to reduce barriers
Check requests
Referrals
Other concerns
Following rules and doing blessings
Submit proof of housing and job searches

Role: Case Manager

Credit Counseling with Kaleb









INTAKE CHECKLIST

Staff Signature	Date
O Add information to 2023 Spreadsheet (Jenn	ifer and Callie)
O Put information into Clarity (Access Point en	nter/exit then FP program entry).
O Set up a Case Management appointment.	
O Make necessary copies and provide them to	guests.
O Remember to sign all documents in the staff	f signature.
O Put all incoming clothing items in the bed bu	ug baker for 4 hours (in house only)
O Set up new room code and provide to guest	/confirm room number for motel/hotel
O Read house and program expectations in the	eir entirety and confirm guests have no questions.
O Complete the entire paperwork, getting all p	pages signed and dated by every adult.
O Made a copy of ID (Must have before enrolli	ing as a guest, or else intake cannot be complete).







Name:		
Entry Date:		
Projected Exit Date:		

CASE MANAGEMENT CHECKLIST AND PLAN

WHAT DO YOU NEED?	YES	NO	N/A	Explanation
Employment Verification				
Pay Stubs				
Work Schedule				
Award Letter				<i>a.</i>
VA Linked				
SNAP				
Medical Insurance				
State ID or Driver's License				
Social Security Card (s)				15
Birth Certificate (s)				
Mental Health Referral				
Social Security (SSDI and SSI)				
Title XX Childcare				
Credit Report (s)				
PRC Application		9		
(Past) Utility Bill Statements				
Other:				
Other:			٠	

What do you consider your barriers to be in finding stable housing? (Examples: evictions, criminal history, lack of resources ect....) How will you overcome these barriers?

BUDGET

Income	\$ Amount
Earned Income	\$
Social Security	\$
Social Security Disability	\$ \$
TANF	\$
Child Support	\$
Other – Please Specify	\$
TOTAL INCOME	\$
Essential Monthly Expenses	
Shelter (rent, mortgage ect.)	\$
Utilities:	
Gas	\$
Water	\$
TV	\$
Internet	\$
Phone	\$
Transportation (car payment, bus, insurance, gas)	\$
Insurance (other than automobile)	\$
Food	\$
Household Supplies	\$
Clothing	\$
Personal Needs (haircuts, laundry ect.	\$
Medicine	\$
Baby Formula/Diapers	\$
Childcare	\$
School Supplies	\$
Recreation/Community Activities	\$
Cigarettes	\$
Other – Specify	\$
Other - Specify	\$
TOTAL MONTHLY EXPENSES	\$
(Subtract monthly expenses from income)	
TOTAL	\$

In most cases you will be required to earn at least 3x the amount of rent in income, for you that would be:

/3 = \$ roughly a month

Monthly rent divided by 3 = monthly amount







Name:	d and a second a second and a second a second and a second a second and a second and a second a second a second a second and a second and a second a second a second a second a second and	

Contact Date	Contact Type	Position	Company/Location	Action
	In-personOnlinePhoneOther			Application Resume Interview Other
-	In-person Online Phone Other			Application Resume Interview Other
1	In-person Online Phone Other			Application Resume Interview Other
	In-person Online Phone Other		,	Application Resume Interview Other
	In-person Online Phone Other	•		Application Resume Interview Other

Case Notes

Name:	
Date:	
Entry Date:	
Exit Date:	



Entry Date:					
Exit Date:					
Status: E	mployed (Full – time Par	rt – time)	Soc	ial Security	Unemployed
Progress on Goals:					
Have you complete this week?	ed 15 housing searches				
How many applica	tions have you submitted?				
What is your Plan	B?				
How much money	have you saved?				g.
Have you contacte	d Legal Aid?				
Do you need any o	ther resources?				,
Concerns or Comm	nents				
Are you currently a	dhering to Promise House a	nd Impact Si	tation rules and	l expectations?	

Completing assigned chores without enforcements or reminders
Participating in case management, completing tasks, and submitting proper documentation when
asked?

Comments:



Wings – Support and Recovery

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www.wingsenrichment.org

Wings Services Referral Form

Date of Birth	
	Zip:
	1
d For:	
	ST:

This program partially funded by:



United Way of Union County

