Accommodation and safety arrangements

Purpose: to screen for consumer’s accommodation risk of homelessness and their safety needs, including family violence and personal emergency planning.

Consumer
Name:
Date of Birth: dd/mm/yyyy / /
Sex:
UR Number: 
or affix label here

Accommodation

<table>
<thead>
<tr>
<th>Accommodation</th>
<th>Code:</th>
</tr>
</thead>
<tbody>
<tr>
<td>Comments on accommodation:</td>
<td></td>
</tr>
<tr>
<td>Is the consumer homeless (nowhere to stay tonight) Code:</td>
<td></td>
</tr>
<tr>
<td>Is the consumer in housing/accommodation that is:</td>
<td></td>
</tr>
<tr>
<td>At risk (for example eviction, behind in their rent)</td>
<td></td>
</tr>
<tr>
<td>Yes ☐ No ☐ Not stated/unknown</td>
<td></td>
</tr>
<tr>
<td>Unsafe (for example family violence, physical danger or other threats)</td>
<td></td>
</tr>
<tr>
<td>Yes ☐ No ☐ Not stated/unknown</td>
<td></td>
</tr>
<tr>
<td>Insecure (for example, temporarily staying with friends/family or using other temporary accommodation)</td>
<td></td>
</tr>
<tr>
<td>Yes ☐ No ☐ Not stated/unknown</td>
<td></td>
</tr>
<tr>
<td>If yes to any of the above, refer the consumer to the homelessness support service in their area or specialist family violence service, via <a href="http://www.dhs.vic.gov.au/for-individuals/crisis-and-emergency/crisis-accommodation/homelessness-and-family-violence-getting-help">www.dhs.vic.gov.au/for-individuals/crisis-and-emergency/crisis-accommodation/homelessness-and-family-violence-getting-help</a></td>
<td></td>
</tr>
</tbody>
</table>

Safety

Family violence

Is the consumer afraid of someone close to them who controls, hurts, insults or threatens them, or who prevents them from doing what they want?
☐ Yes ☐ No ☐ Not stated/unknown
If yes, proceed with the following questions:

Who is the consumer afraid of? (including the relationship to the consumer) 

What form does the abuse take? 

Is the abuse becoming worse or happening more often or both?
☐ Yes ☐ No ☐ Not stated/unknown

Are any children involved experiencing the abuse or violence directly or by hearing or seeing it?
☐ Yes ☐ No ☐ Not stated/unknown

Is the consumer very scared for themselves or any children?
☐ Yes ☐ No ☐ Not stated/unknown

Has a safety plan been prepared with the consumer?
☐ Yes ☐ No ☐ Not stated/unknown

For women experiencing family violence — refer to the Women’s Domestic Violence Crisis Service on 1800 015 188.

For men experiencing family violence — refer to the Victims of Crime Helpline on 1800 819 817.

For older people experiencing elder abuse — contact Seniors Rights Victoria on 1300 368 821

Personal emergency planning

Does the consumer have a personal emergency plan in case of fire, heat wave or flood?
☐ Yes ☐ No ☐ Not stated/unknown
If no, encourage people living in high bushfire or other risk areas to develop personal emergency plans.

Does the consumer have a working smoke alarm in the house?
☐ Yes ☐ No ☐ Not stated/unknown
If no, and the person is unable to do this themselves, discuss options for assistance from families, friends, neighbours.

Living arrangements:

| Comments on living arrangement: |
| Code: |

Other relevant information: