Registration Intake

These are yes/no observations and questions to support registration staff in identifying and obtaining assistance and supplies for shelter residents.

Observations

1. Does the client or a family member appear to be in need of immediate medical attention, appear too overwhelmed or agitated to complete registration, or is a threat to themselves or others? **Yes** ☐ **No** ☐

*If **Yes**, **STOP** the registration process and do one of the following:*

- *If situation is critical and no support is available, call 911 if available.*
- *Contact Health Services and/or Mental Health worker on site.*
- *If no health or mental health resource on site, direct concern to Shelter Manager, or*

*If **NO**, continue the registration process.*

2. If the client has a service animal, uses a wheelchair/walker or demonstrates any other circumstance where it appears they may need help in the shelter, acknowledge their need and offer assistance this may include contacting a health services worker.

Contact Shelter Manager for additional support when needed.

Questions:

1. Is there anything you or a member of your family needs right now to stay healthy while in the shelter? **Yes** ☐ **No** ☐ If NO, is there anything you will need in the next 6-8 hours? **Yes** ☐ **No** ☐

2. Do you/family member have a health, mental health, disability, or other condition about which you are concerned? ☐ **Yes** ☐ **No**

If question #1, or #2 has a YES answer, Health Services and/or Mental Health services must be notified.

Priorities:

First: *Contact Health or Mental Health Services worker on site;*

OR if no health or mental health on site,

Second*: Contact Shelter Manager for follow-up*

OR

Third: *Make a list of clients who have a "yes" response and give the list to the health services volunteer when they arrive.*