

Interview Needs Assessment

Private and Confidential

Name\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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| **Personal Details (all compulsory)** | |
| Title (Mr, Miss, Ms):  **Full Name:**  **Alias (Name otherwise known as):**  **Preferred First Name** | **D.O.B:**  **Age:**  **Marital Status:**  **National Insurance Number**  **Contact details:** |
| **Address:**  **If no fixed abode please state:**  **Since when:** | **Is the person in another support service? Yes / No**  **Name of service:**  **Contact**  **Name of service**  **Contact** |
| **Is the person in prison or a rehabilitation service?** Yes / No  **Details:**  **Benefits (please circle)**  Universal Credit ESA  JSA PIP DLA | **Payment frequency:** Fortnightly / monthly  **How much do you get Paid: £** |
| **Religion**  Is there anything we need to know to support you in your religious/cultural needs? |  |

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| **Personal History** | |
| **Family background** and support network;  - who supports them |  |
| **Accommodation history**  - previous tenancies  - rent arrears  - been in support previously  - currently on housing register? Yes / no  - have they done the bond scheme?Yes / no |  |
| **Substance misuse history**    - What substances misuse  - how long  - Are engaging in support if not are they wanting to engage in support |  |
| **Employment / education history**  - level of qualification  - last time worked  - where  - future aspirations  **Can the person read** yes / no  **Can the person write** yes / no |  |
| **Criminal record / history**  Violent offences  Sexual offences  Theft  Arson  Criminal damage  **Other :** | **Yes No Further information** |
| **Emotional & mental health history**  **-**  current mental health  - currently engaged in support from mental health team  - previous engagement with mental health  **Do you take any:**  **Prescribed medications:**  **Over the counter medications:**  **Physical health**  - any physical health conditions we need to be aware of  - okay with stairs |  |

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| **Current Support Needs** |
| **Budgeting money**  Can you budget for bills/food?  **Maintaining benefits**  Can you manage benefits?  **Managing your tenancy**  What do you need to be  Successful?  **Cooking and cleaning**  Can you cook and clean?  **Attending appointments**  Do you need help with this?  Access community  Activities (cultural/faith/interests)  What are you doing now?  What would you like to be doing?  **Is there anything that isn’t mentioned in the assessment that you would like to add?** |

I can confirm that I have been open and honest during my assessment interview and given an accurate description of my personal history and support needs.

**I understand that society support will conduct background checks and speak to agencies I work with, being dishonest could result in my application being declined.**

**Signed:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

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**Print Name\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Assessment conducted By:**

Signed\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Print Name \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Other professional present during assessment?**

Name\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Contact\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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| Comments and recommendations from support worker.  Please bear in mind the following questions when writing your comments.  How did they present? Did they engage in the assessment well? Anything you are concerned about?  Do you think they are suitable for a property? Are they suitable for shared accommodation?  **Signed \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**  Dated \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |