

ELAHP At Risk Assessment

Client: _____

Check ALL that apply to client, even if questions are similar.

Date: _____

Weighted Risk Factors

- Previous Evictions
- Past History of Addictions (if active, check this AND next box)
- Active Addictions (Substance Abuse, Gambling, etc.)
- Inability or Unwillingness to Pay Rent (any reason)
- Previously Homeless (if chronic, check this AND next box)
- History of CHRONIC homelessness
- Inability to Understand Medical situation/needs
- Mental Illness/Dementia/Head Injury (treated or untreated)
- Current Lease Violations
- Hoarding

<u>Point Scale</u>
Below 15 Low Risk
15 to 20 Moderate Risk
21 to 30 High Risk
Above 30 Imminent Risk

Total number checked, MULTIPLIED BY 5 →

Additional Risk Factors

- Physical Disability
- Inability to get and/or prepare food (any reason)
- Rent more than 1/3 of income
- Inability to pay bills (lack of funds or other reasons)
- 3 or more trips to ER in the last year
- Empty or nearly empty Refrigerator
- Empty or nearly empty food cupboard
- Inappropriate Storage of Food
- Social isolation
- No Regular Family Involvement or Detrimental Family Involvement
- Conflict with Neighbors
- Conflict with Landlord or Building Management/Staff
- Infestation (Roaches, Mice, Lice and/or Bed Bugs)
- Debt (any amount)
- Illiteracy or Other Language Barrier
- Domestic Discord
- Inadequate Furniture

Total number checked. ENTER NUMBER →

Total of both boxes =