

Individual/Family Members Name:

Date of Scale Completion:

Scale Type: (Initial / Interim / Exit)

Please circle the item that best describes your/family situation.

Domain	1	2	3	4	5
Food	I/we or my family do not have enough food to last today and we do not have enough money to buy food.	l/we regularly miss a meal because of a lack of money.	I/we get enough food stamps or outside help to meet our food needs.	l/we can provide three meals a day from our income.	I/we are able to buy the food we need without food stamps or other help and we can eat out when we choose to do so.
Housing	I/we have no place to stay, or have an eviction or utility shut off notice.	I/we do not have a permanent place or temporarily stay with others, and often must move to a different place or I/we are living in an unsafe home.	l/we are renting a home with the help of either temporary or permanent rent assistance.	l/we are in rental housing that is safe and affordable with no rental assistance.	l/we own or are buying a safe home or renting a home of my choice.
Energy & Water/ Utilities	My utilities are shut off or I/we have a shut off notice.	My utility bills are high and/or past due with notice of termination within the last 6 months.	My utilities are current and/or I am receiving energy assistance.	My utility bills are current with a history of late payments.	My utility bills are current and paid on time without a history of late payments.

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<b>Transportation</b> (Answer from perspective of family)	I/we have no means of transportation other than walking.	I/we rely on friends or family or public transportation, but my transportation is not always reliable, or I have no valid driver's license.	I/we are able to get transportation that meets my needs.	l/we have at least one reliable vehicle available.	I/we have sufficient number of vehicles to meet household transportation needs.
Health Insurance	l/we have no health insurance coverage.	All members of household do not have health insurance or have limited coverage.	l/we are covered by health insurance at high cost or enrolled in (Medicaid.)	l/we covered by health insurance at affordable cost.	My Employer pays for health insurance with low to no cost, out of pocket and prescriptions are covered or enrolled on Medicare.
Child Care (All children in familyif childcare is not available for one child or not affordable for even one of the children then answer accordingly)	l/we cannot obtain or afford childcare, and this is making it hard to keep employment or enroll in education or training classes.	l/we have childcare provided by friends or family.	l/we receive financial help to enroll my child in safe childcare.	l/we are able to pay for safe, affordable satisfactory childcare that meets my need.	I/we have childcare provided in a licensed day care or early child education center that is affordable and easy to get to.
Child & Youth Development	My child has been identified with a behavioral/developmental issue and is not receiving assistance.	Child has identified behavioral or developmental issues and is receiving assistance and/or child is failing more than one class or dropped out of school.	Child has no identified behavioral diagnosis or children with identified behavioral issue has a 504 plan.	Child(ren) have passing scores and meeting all development milestones (Mark if true for any one child in the family).	Children are exceeding developmental or academic milestones (Mark if true for any one child in the family).

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Home/Family Environment	I/we have multiple sources of stress creating unsafe situations, and/or chaos, and/or instability for our family.	l/we have a particular source of stress that causes varying safety and/or stability issues for our family.	I/we provide a consistent, safe, and stable home environment with positive relationships for our family.	I/we have the capacity to weather stressful situations and provide a consistent, safe, and stable home environment with positive relationships for our family.	I/we weather stressful situations and maintain family relationship that protect the children and boost all family members' well-being, emotional support, and confidence.
Education/ Job Skills	l/we do not have a High School Diploma or a GED and no marketable job skills.	l/we have a HS Diploma or GED but lack marketable job skills.	I/we have a HS Diploma or GED and enrolled in post- secondary education.	I/we have an associate's degree or vocational training or certification program.	My/our current education, certifications, or job skill sets are sustaining.
Employment/ Income	I/we are not employed and not receiving unemployment benefits or have disabilities that interfere with ability to gain employment.	I /we are seeking employment and or working part time or have 2 or more jobs or receiving SSI.	l/we are living on a fixed income, under employed, or employed without benefits.	I/we are employed 32+ hours a week with limited benefits.	I/we are employed 32+ hours a week with benefits and opportunities for advancement.
Financial Management	I/we regularly miss paying one or more monthly bills or I am receiving calls from a collection agency.	I/we are paying current bills but have no savings and are not able to payoff past debt or credit card.	I/we are paying current bills and the minimum required payments on existing debt/credit.	I/we are paying current bills and making regular payments to reduce debt and regularly paying into a savings.	I/we have a household budget and make regular payments on current bills, debt, and savings.
Credit Building	The only credit I can get is high interest loans or credit cards or I have had a bankruptcy, foreclosure, loan default in the past 7 years.	I/we do not have a credit history and/or are unable to obtain a bank loan or qualify for a credit card.	I /we are able to obtain a loan with a cosigner or secure credit card.	I/we are able to get a loan on my own and secure a credit card.	I/we have access to credit and loans at competitive market rates, and a clean credit history.

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Asset Building	I/we have no savings, no equity in a home.	I/we have a savings account but make irregular payments when I can.	I/we make regular payments into a savings account, maintain a savings balance of at least \$500 and/or are buying a house with existing mortgage.	I/we own a home with mortgage and maintain savings of \$500.	I /we own a home and are current on mortgage payments and have a retirement fund (not SSA).
Legal	I/we have current outstanding tickets, warrants, or pending legal action or non-compliance with probation or parole.	l/we have current charges, or a trial pending.	I/we are fully compliant with probation/parole terms and have applied for expungement.	I/we have successfully completed probation/parole within the past 12 months, no new charges filed and expungement of criminal charges.	l/we have no criminal justice involvement.
Support/Social Networks	I/we have no family or friends to call on for support, help, or assistance.	My/our friends and family are accessible but are unreliable and show only occasional support.	I/we have at least 3 friends or family who are reliable during emergencies and we can develop new relationships.	I/we have at least 5 friends or family who are reliable and supportive in many ways.	I/we have over 5 friends and family who are reliable, supportive, and available whenever needed and we maintain positive relationships with each other.
Community Involvement	I/we feel unsafe or unwelcome in my community.	I/we do not know what opportunities exist and/or I do not have the means for my family to participate in community events and activities.	I/we are able to participate in a limited amount of community events and feel safe and welcome.	I/we are aware of opportunities for my family members to participate and feel welcome and encourage them to do so whenever we can.	My family participates in community events and activities.