

16/17 Joint Homelessness Assessment Tool

Young Persons Details

Name	
DOB	
Phone number	
MOSAIC number	
Current Address	
Previous Address	

Parent details

Name/Relationship/PR	
Phone number	
Address	
Accommodation details	
Who else lives at the address	

Parent details

Name/Relationship/PR	
Phone number	
Address	
Accommodation details	
Who else lives at the address	

Use this page to complete a three Generation Genogram with the Young Person

Record the contact details of family members identified through the genogram here

Name/Relationship	
Address	
Phone Number	

Name/Relationship	
Address	
Phone Number	

Name/Relationship	
Address	
Phone Number	

Name/Relationship	
Address	
Phone Number	

Name/Relationship	
Address	
Phone Number	

Name/Relationship	
Address	
Phone Number	

What lead up to the young person become at risk of being homeless

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Additional Factors to consider	Check MOSAIC and discuss with YP/Parent
Drug or Alcohol use	
Mental Health	
Exploitation/CSE/CCE	
Domestic abuse	
Disability	
Other	

Where could they stay tonight?

Friends

Family

**Share information form about Advocacy Service and information leaflet form advocacy Service
Record completed**

What would the young person like to happen now?

Has your assessment so far identified any safeguarding concerns?

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Any reason the YP should not live with family

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Alongside this form you should also gather information for a Single Assessment

Please seek consent to share from both the Young Person and someone with Parental Responsibility

Conversation with Parent

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Conclusion

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Completed By:

Name:

Role:

Name:

Role:

Date: