

# Spokane Universal Assessment Tool

## SALA

### Minors Pre-Screen Section

(Not scored or asked Unless 13-17 years of age)

- A. Can we talk about the last two weeks?
- B. Do you have anyone you can safely/comfortably stay with right now? (No=1pt **Youth**)
  - ☐ Yes
  - ☐ No
- C. Are your current physical needs being met? (No=1pt **Youth**)
  - ☐ Yes
  - ☐ No
- D. Do you have professional and natural support systems in place? (No=1pt **Youth**)
  - ☐ Yes
  - ☐ No

### Assessment Section

- 1. Are you **currently**,
  - In physical or emotional danger? (Yes=1pt)
    - ☐ Yes
    - ☐ No
  - Experiencing or fleeing Domestic Violence? (Yes=2pt)
    - ☐ Yes
    - ☐ No
  - Experiencing or fleeing Drug/Human Trafficking? (Yes=1pt)
    - ☐ Yes
    - ☐ No
- 2. Have you ever had a barrier regarding housing that was due to any of the following: (One point per selection with a total of 8 points total)
  - ☐ Race (1pt)
  - ☐ Gender (1pt)
  - ☐ Sexuality (1pt)

- ☐ Religion (1pt)
- ☐ Limited English Proficiency (1pt)
- ☐ Preschool aged children not in childcare (1pt)
- ☐ Criminal History-felony (1pt)
- ☐ Eviction in the last 3 years (1pt)

3. Have you received services from or been in any of the following systems: (One point per selection with a total of seven points)

- ☐ Foster Care (1pt)
- ☐ Inpatient mental health (1pt)
- ☐ CPS (1pt)
- ☐ Jail/Detention (1pt)
- ☐ Criminal/Juvenile Justice (1pt)
- ☐ Adult Family Home (1pt)
- ☐ Inpatient Substance abuse Treatment (1pt)

4. Family Specific:

- Do you have any minors in your care, pregnant, or anticipate reunification? (Yes=1pt **Family**)
  - ☐ Yes
  - ☐ No
- Is your family household size 5 or more? (Yes=1pt **Family**)
  - ☐ Yes
  - ☐ No

5. Educational experience:

- Did you or do you currently receive educational support? (Yes=1pt)
  - ☐ Yes
  - ☐ No
- What is your highest level of education completed? (less than high school=1pt)
  - ☐ College/Vocational School
  - ☐ Some College/Vocational School
  - ☐ High School
  - ☐ GED
  - ☐ Some high school
  - ☐ Less than high school

- Has homelessness affected your ability to attend school regularly?  
(Yes=1pt **Youth**)

☐ Yes

☐ No

6. Do you have any of the following?

- Cognitive disability that impacts daily living. (Yes=1pt)

☐ Yes

☐ No

- Physical disability that impacts daily living. (Yes=1pt)

☐ Yes

☐ No

- Chronic health condition that impacts daily living. (Yes=1pt)

☐ Yes

☐ No

- Substance Use Disorder that impacts daily living. (Yes=1pt)

☐ Yes

☐ No

- Mental Health Disorder that impacts daily living (Yes=1pt)

☐ Yes

☐ No

7. What is your current living situation?

- Housing category (1pt for either Cat 1/ Cat 4) or (1pt for youth if cat 3)

☐ Cat-1- Literally Homeless

☐ Cat-2- Imminent risk of homelessness

☐ Cat-3- Homeless under other federal statutes (McKinney Vento)

☐ Cat-4- Fleeing/Attempting to flee domestic violence

8. Have you experienced chronic homelessness?

- Chronic homelessness? (Yes to either or both=1pt)

☐ Have you been homeless or stayed in a shelter continuously for more than a year?

☐ In the past 3 years have you had 4 or more experiences with homelessness?

## Scoring Matrix

Question	Available Points
A.	0
B.	1 (Youth)
C.	1 (Youth)
D.	1 (Youth)
1.	4 (All)
2.	8 (All)
3.	7 (All)
4.	2 (Family)
5.	2 (All) 3 (Youth)
6.	5 (All)
7.	1 (All) 1 (Youth)
8.	1 (All)

	Youth (13-17)	Singles (18+)	Families (HH2+)
Total Possible Score	32	28	30
Score			