Shelter Rapid Needs Recognition Cards Instructions

Use the *Rapid Needs Recognition Cards* to make quick assessment of clients’ immediate needs at reception and as needed throughout the shelter. Provide every shelter worker with a card. In the reception area, workers refer to these cards to make observations and ask questions that help determine clients’ immediate needs. Throughout the shelter, workers refer to these cards to continue to make observations about the clients’ needs.

**Print cards double-sided, with observations on one side and questions on the other.**

This job tool should be used in conjunction with the following doctrine:
- Sheltering Standards and Procedures
- Job Tool: Operating a Shelter

**Use these cards following the steps below:**

1. **Make the following OBSERVATIONS:**
   a. Does the client or a family member appear to be in need of immediate medical attention, appear too overwhelmed or agitated to complete registration, or is a threat to themselves or others?
      o If YES, STOP the registration process, and do one of the following:
        ▪ If situation is critical call 9-1-1, and notify health services and the shelter manager;
        ▪ Contact health services and/or mental health worker on site;
        ▪ If no health or mental health resource on site, direct concern to shelter manager.
      o If NO, continue the registration process and/or no additional action is necessary.
   b. Does the client have a service animal, use a wheelchair/walker, or demonstrate any other circumstance where it appears they may need help in the shelter?
      o If YES, acknowledge their need and offer assistance. This may include contacting a health services worker. Contact shelter manager for additional support when needed.

2. **Ask the following QUESTIONS:**
   a. Is there anything you or a member of your family needs right now to stay healthy while in the shelter? If not, is there anything you know you will need in the next 6-8 hours?
   b. Do you/family member have a health, mental health, disability, or other condition about which you are concerned?
      o If YES to either question, continue registration process and/or do the following:
        ▪ Identify what assistance the client needs. Acknowledge their need and offer assistance.
        ▪ If their need is medical or mental health, or you need help providing assistance to the client:
          ▪ Contact health or mental health services worker on site;
          ▪ If no health or mental health workers on site, contact shelter manager for follow-up;
          ▪ If the shelter manager is not available, or if the shelter manager instructs you to, list clients who have a “yes” response on the [Shelter Referral Log](#);
          ▪ Give the [Shelter Referral Log](#) to health services, mental health, spiritual care, or shelter manager when they arrive.
Observations

1. Does the client or a family member appear to be in need of immediate medical attention, appear too overwhelmed or agitated to complete registration, or a threat to themselves or others?

2. Does the client have a service animal, use a wheelchair/walker, or demonstrate any other circumstance where it appears they may need help in the shelter?
Questions

1. Is there anything you or a member of your family needs right now to stay healthy while in the shelter? If not, is there anything you know you will need in the next 6-8 hours?

2. Do you/family member have a health, mental health, disability, or other condition about which you are concerned?

Questions

1. Is there anything you or a member of your family needs right now to stay healthy while in the shelter? If not, is there anything you know you will need in the next 6-8 hours?

2. Do you/family member have a health, mental health, disability, or other condition about which you are concerned?