

# Housing Support Needs Self Assessment Form

## Guidance Notes

If you are applying for Housing with Support (sometimes called “sheltered housing’ or ‘supported housing’), then you **must** fill in this form along with our Housing Application Form.

‘Housing Support’ services aim to facilitate and enable people to live independently in their own home. This can include advice and assistance with maintaining your home, using domestic appliances, checking and advising on general health and safety matters, dealing with bills, daily living and budgeting.

Margaret Blackwood’s Support Service provides housing support through:

- Housing with Support, linked to tenancies in certain housing developments;
- Outreach or ‘floating’ support, available to tenants who are referred by social services, who self refer, or who are referred by one of our housing officers.

This service is available in:

Aberdeen                      Glasgow                      Uddingston  
Dundee                         Greenock  
Edinburgh                      Stirling

**Costs:** Housing support services are provided under the local authorities’ Supporting People programme and are subject to Supporting People service charges. Tenants who receive housing benefit will normally be exempt from these charges. Others may need to pay part or all of the charge.

**Filling in this form:** The questions on this form relate to everyone on your application form. Each question has two parts. Firstly, we ask if you, or anyone included in your application needs specific support. Secondly, we ask if you, or the person in your household, are getting the support you need. You could be getting advice and support formally, from social services, or informally from family or friends, or you may not be getting help with the support you need.

Applicant’s Name	
Joint Applicant’s Name	
Name of person requiring support	
Current address	
For official use: Ref. No.	

# Housing Support Needs

## 1. Keeping safe in your home

Do you need advice or help to be safe and secure in your home, for example locking up at night, controlling access to your home, fire safety, using appliances safely, moving around indoors?

Yes

No

If 'Yes', do you currently receive this advice or help?

Yes

No

Please give details:

## 2. Living independently

Do you need advice or help in preparing or storing food, using domestic appliances or equipment, dealing with correspondence, making appointments or getting on with neighbours?

Yes

No

If 'Yes', do you currently receive this advice or help?

Yes

No

Please give details:

## 3. Looking after your home

Do you need any advice or help with doing or arranging minor repairs in the house, or to service household equipment or to keep the house clean?

Yes

No

If 'Yes', do you currently receive this advice or help?

Yes

No

Please give details:

# Housing Support Needs

## 4. Managing money

Do you need advice or help to budget, pay bills, manage banking, manage debt or apply for benefits?

Yes

No

If 'Yes', do you currently receive this advice or help?

Yes

No

Please give details:

## 5. Getting out and about

Do you need any help with going shopping, or using other services such as the bank, post office, library or chemist?

Yes

No

If 'Yes', do you currently receive this advice or help?

Yes

No

Please give details:

## 6. Socialising

Do you need help to maintain regular social contact with family and /or friends or do you need help to have more companionship?

Yes

No

If 'Yes', do you currently receive this advice or help?

Yes

No

Please give details:

# Housing Support Needs

## 7. General welfare and communication

Do you need advice or help to communicate with other people or do you need someone to check on your well-being regularly?

Yes  No

If 'Yes', do you currently receive this advice or help?

Yes  No

Please give details:

## 8. Moving on or settling in to a new home

Do you need advice and help with making practical arrangements when you move to a new home? Do you need advice or help to learn new skills in preparation for a move to a new home?

Yes  No

If 'Yes', do you currently receive this advice or help?

Yes  No

Please give details:

## 9. Social Worker and other details

If you have a social worker, occupational therapist, doctor or other person who helps with assessing your support needs, please provide details:

Name:
Job Title:
Address:
Tel No:

If this form is being completed by someone who is acting on your behalf, please provide details:

Name:
Relationship to you:
Address:
Tel No:
Legal status (if applicable):