Circle One: ENTRY EXIT

ServicePoint Client ID for Head of Household: _____

First and Last Name: _____

Date: _____

MSI PROGRESS UPDATE

INSTRUCTIONS:

• Using assertive engagement practices, the following Progress Update should be completed or updated for each household at regular intervals and during follow-ups:

Section A	Section B		
 Entry (within 60 days) Exit 	 Entry (within 60 days) Exit 		

- The entry Progress Update should be completed within 60 days of the intake date.
- Responses should be recorded in ServicePoint under the Head of Household's program entry by the 15th of the month following completion of the Progress Update. Please see the MSI ServicePoint Handbook for more detailed instructions or call the ServicePoint Hotline at 503-970-4408.

Section A

Monthly Household Income: \$	Is any adult in the household currently employed? □No □Yes		Receiving TANF? DNo DYes					
Current Savings: \$	Total Monthly Expenses: \$		Monthly Housing Cost: \$					
Is family engaged with any employment services? $\Box No \ \Box Yes$ If Yes, Specify below (check all that apply):								
 WorkSource Adult Basic Education/GED Career Exploration Computer/Software Literacy ESL 	Interviewing Skills		 Job Searching Skills/Assistance On-the-Job Training Resume-Writing Skills Writing/Typing/Communication Skills 					
			□ Other:					
Do all household members receive <u>HEALTH services</u> appropriate to their needs? (Note: This includes ALL modes of healthcare: culturally-specific, naturopath, alternative, etc.)								
Routine/Preventative Care (Adu Routine/Preventative Care (Chil	•	 Emergency Care Only Insufficient Care 						
Do all household members receive <u>DENTAL services</u> appropriate to their needs? (Note: This includes ALL modes of healthcare: culturally-specific, naturopath, alternative, etc.)								
 Routine/Preventative Care (Adu Routine/Preventative Care (Chil 	•	 Emergency Care Insufficient Care 	Dnly					

Section B

This page should be completed/updated at Entry and Exit.

First and Last Name:	Date:
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This information will help us work with you and your family better. This is not a test and there are no wrong answers. Your answers will NOT be used to decide whether you are eligible for our program.

Please tell us how much you agree or disagree with each statement.

	Strongly Disagree	Disagree	Neutral	Agree	Strongly Agree	N/A
My family's current housing situation meets our needs for size, health, safety and location.						
My current level of household income meets my family's needs for expenses and savings.						
My family has relationships or social networks that provide positive supports to each other.						
My family has relationships or social networks that reinforce our culture and values.						
My family's overall education or job training meets our vocational and life aspirations.						
In the last 3 months, my family had enough money for food and no one in our family had to cut the size of our meals or skip meals.						
All family members feel safe in our home.						
My children are able to be safe and successful in their family, school and community.						