

## BRIDGE PROGRAM GOAL ASSESSMENT

Today's Date:
Program Participant Name: Date of Birth:
Financial and Economic Stability
Bank Account  ☐ I have a bank account.  ☐ I have a payee.  ☐ I do not want to have a bank account or payee.  ☐ GOAL: I would like to open a bank account or sign up for a payee to handle my finances.
Credit Score  ☐ I have acceptable or good credit.  ☐ I do not know if I have good credit. I have never checked my credit.  ☐ GOAL: I have bad credit, and I need help improving my credit score and handling debt.
Tax Filing  ☐ I have already filed my tax return for 2020.  ☐ I do not need assistance with filing my tax return for 2020.  ☐ GOAL: I would like help with filing my tax return for 2020.
Driver's License or California I.D.  ☐ I have a driver's license or other form of identification.  ☐ GOAL: I need to obtain a driver's license or other form of identification.
Birth Certificate  ☐ I have a copy of my and my minor child's birth certificate.  ☐ GOAL: I need to obtain a copy of my or my minor child's birth certificate.
Employment  ☐ I am employed.  ☐ I am unable to work at this time because  ☐ GOAL: I would like to seek employment.
Employment Readiness – Skills Training and/or Clothing  ☐ GOAL: I'd like to get education or training to improve my ability to get a job.  ☐ I do not need to seek education or training at this time.  ☐ GOAL: I would like help in creating a resume.  ☐ GOAL: I need to acquire clothing that is suitable for employment.

Bridge Program Goal Assessment (pre-intake) Name:
Housing  ☐ I have a valid Housing Choice voucher or Permanent Supportive Housing certificate.  ☐ I am on the waiting list for a Housing Choice voucher.  ☐ I am enrolled in a Housing Support Program through CalWorks.  ☐ I am enrolled in the Veteran's Affairs Supportive Housing program.  ☐ I have enough income to afford roughly \$1,000 per month in rent.  ☐ GOAL: I need assistance in securing housing assistance through an ongoing housing subsidy program.  Any additional goals related to Financial and Economic Stability?
Physical and Emotional Wellness
Primary Medical Care  ☐ I have been to see a medical provider within the last year.  ☐ GOAL: I have not been to see a medical provider in a very long time, and I need to seek care.
Health Insurance  ☐ I am enrolled in Medi-Cal (Partnership HealthPlan) and I have a copy of my health insurance card.  ☐ I am enrolled in MediCare and I have a copy of my health insurance card.  ☐ I am enrolled in other health insurance:  ☐ GOAL: I don't know if I am still enrolled in Medi-Cal, and I need to find out.  ☐ GOAL: I need a new Medi-Cal card.
CalFresh  ☐ I am enrolled in CalFresh and I have my EBT card.  ☐ I am not eligible for CalFresh.  ☐ GOAL: I am enrolled in CalFresh but I need a replacement EBT card.  ☐ GOAL: I am not enrolled in CalFresh and I need to apply.
Dental Care  ☐ I have been to see a dentist within the last year.  ☐ GOAL: I need to go see a dentist.
Vision Care  ☐ I wear glasses and I have been to see an optometrist within the last three years.  ☐ I am certain that I do not need glasses. I have great vision.  ☐ GOAL: I have not been to see an optometrist in years and I think I need glasses.
Social Support – Family and Friends  ☐ I feel like I have positive relationships with enough friends and family.  ☐ GOAL: I could use some help with figuring out how to re-connect with a friend or family member.
Substance Use  ☐ I feel comfortable with my substance use. ☐ GOAL: I would like to enroll in an outpatient substance use treatment program. ☐ GOAL: I could use support in maintaining sobriety.

Bridge Program Goal Assessment (pre-intake)

Bridge Program Goal Assessment (pre-intake)  Name:
Extra Support  ☐ I would like to see a mental health therapist.  ☐ I am interested in attending social or therapeutic activities in a group or individual setting.
Any additional goals related to Physical and Emotional Wellness?
Miscellaneous
Literacy  ☐ I can read and write well.  ☐ I cannot read and write well, but I am not interested in learning to read or write at this time.  ☐ GOAL: I would like someone to help teach me to read or write well.
Phone  ☐ I have a cell phone and the ability to pay for a monthly service plan.  ☐ GOAL: I need a cell phone.
Mail  ☐ I have a post office box or a reliable place to receive mail.  ☐ GOAL: I do not have a reliable address for receiving mail.
Transportation  ☐ I have a car and a valid driver's license.  ☐ I don't want a car and/or I cannot drive.  ☐ GOAL: I need to take a driver's test in order to get my license.  ☐ GOAL: I would like to buy and own a car.
Criminal Justice System  ☐ I have outstanding warrants for previous criminal activity. ☐ I might have outstanding warrants, but I am not sure. ☐ I have an upcoming court date and I feel comfortable that I am prepared for it. ☐ GOAL: I could use some support in figuring out what I need to do to handle my criminal justice issues. ☐ I do not have any outstanding business to take care of related to the criminal justice system.
Child Support  ☐ I do not owe child support.  ☐ I owe child support and I am comfortable with my plan to pay it.  ☐ GOAL: I need help in resolving issues that I have with child support.
Faith Community  ☐ I am a member of a church/faith community.  ☐ I do not wish to join a church/faith community at this time.  ☐ GOAL: I would like to connect to a church/faith community.
Volunteer  ☐ I am a volunteer. I volunteer at:  ☐ I do not wish to volunteer at any organizations at this time.  ☐ GOAL: I would like to volunteer in my community.

Any additional goals not listed in this document?
Children and Family – (Only for Households with Children)
Children - Primary Medical Care  ☐ My children have had their annual Child Wellness Visits within the past year.  ☐ GOAL: My children have not been to see a medical provider in more than one year. I need to make an appointment.
Children – Dental Care  ☐ My children have seen a dentist within the past year.  ☐ GOAL: My children have not been to see a dentist in more than one year. I need to make an appointment.
Day Care  ☐ My children are enrolled in preschool or day care.  ☐ GOAL: I would like to enroll my children in preschool or day care.  ☐ GOAL: I need to find a babysitter so that I can go to work or school.
Schooling  ☐ My children are doing well in school.  ☐ GOAL: I'm worried about how well my children are doing in school. I would like to access more help from their school.
Children's Mental Health  ☐ My children seem happy and content.  ☐ GOAL: I'm worried about my children's emotional health and well-being.
Parenting  ☐ I feel confident in my parenting skills.  ☐ GOAL: I could use some help with figuring out new strategies for parenting my children.
Any additional goals related to your children?

Name:\_

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