Sample Intake Script

1. “Welcome. I’m _______________ with [name of program]. Have you or anyone from your family been to our pantry before?

2. Do you remember if you have completed the new intake process yet?
   - If “Yes” or “I don’t know” Let me look for your name.
   - If you find their name and confirm it with their birthday, click on their name and ask if there is anything that they need to update, if not, go straight to the Services tab.
   - If “No,” still search for client name in database because they may still be in the network.

If the client is not currently in Link2Feed:

“As a partner of Gleaners Community Food Bank and/or Forgotten Harvest, we are uniting with our network partners to provide better services for you and for our community. Would you mind helping us by answering some basic questions about you and your household? It shouldn’t take more than five minutes.”

“The information you share with us today will not be viewed by anyone outside of our food distribution network. We’re asking you these questions today to help our organization better serve you and our entire community. Are you ok moving forward with our new system, Link2Feed?”

If the client says, “Yes” click on New Client to begin a new profile:

“Great, let’s get started! It consists of four parts. I will be asking some basic questions about you, your household, your income, and your dietary needs.

If you feel uncomfortable about answering any of these questions we can skip it and move on to the next question.”
**PERSONAL INFORMATION**

“The first question that I want to ask you is more of a historical question. Can you remember the month and year of the first time that you needed to access emergency food services? This information will help us to understand the long-term needs in our community better.”

*If they are unsure it is ok to guess or select Unknown.*

“The next portion of the intake asks more detailed questions about your household:

1. Can I start by getting an ID card so that I can spell your name correctly?” of “your first and last name?”
2. “What is your date of birth?”
   - If they don’t know you can estimate. Please use your best judgment and be sure to press “Yes” beside “Estimated DOB”
3. “What gender do you identify with?”
4. “What is your current marital status?”
   - If they provided an ID ask “is the address on your ID correct?” or “can you give me your street address, city and zip code”
   - If they do not have a current address select the No Fixed Address checkbox underneath the address fields.

**If your client is hesitant...**

*Client is concerned about the security of their information, try the following statement:*

“If I can try to reassure you, none of your personal information will be shared with anyone outside of our network. Protecting your information and privacy is our priority. All of your information is very secure and uses the same protection as online banks. Having some basic information about you will help us and our partner(s), Gleaners Community Food Bank and/or Forgotten Harvest, better understand the people we serve so that we can do our work better. Would you like to proceed?”

*Client is concerned that information provided will affect their current benefits (SNAP, etc):*

If your client is concerned that the information provided will affect any benefits from federal or state agencies, reassure them that we do not share this information with those agencies.

*Client is concerned that information provided or not provided will affect the services they receive today:*

Reassure the client that the information provided today will not affect the services they receive from your agency today.

*Client still says “No” to Link2Feed*

Continue by recording an Anonymous Visit
5. "What type of housing are you currently living in?"
6. "Do you have an email address that you would like to share?"
7. "What is a good phone number for us to reach you at?"
8. "How did you find about us?"
   - Select option from pull down menu if known or "Not Applicable"
9. "What language(s) do you speak in your home?"
   - Use the bar to search for their language. You can scroll through the list or start typing the language you are looking for.
10. "What Ethnicity do you identify as?"
    - If they don’t know, click N/A or if they do not wish to answer you can check off Undisclosed.
11. "You are almost done with this section of the intake. In this last question, please let me know if you self-identify as any of the following:
    - Refer to list on the screen
    - N/A = meaning non-applicability or none of the above
    - Undisclosed = skip/ do not want to answer.

**Additional Household Members**
1. “Now we will move on to answering a few questions about the other members in our household. How many people are currently living in your household? For each member I am going to ask a couple of questions.”
2. “Can I start with the name and birthday of the first member of your household other than yourself? If they do not know the date of birth, you can estimate and select a date accordingly.
3. “Do they identify as male, female, transgender or if you would not like to answer this question, I can mark undisclosed.”
4. “What is your relationship to this member of your household?”
5. “What is the ethnicity of this household member?”
6. “Does this member of your household self-identify as any of the following:
   - Refer to list on the screen
   - N/A = meaning non-applicability or none of the above
   - Undisclosed = skip/ do not want to answer.
7. “Let’s move on to the next member of your household.” (Repeat for each new member)
8. “That completes the general household information. We will complete the intake process with some brief information about your education, income and dietary needs.”
9. “Can you share the highest level of education you have completed?”
10. "What is your current employment status? 
11. “Who is the primary source of income in your household?”
12. “Do you receive any of the following assistance?”
13. “To conclude this intake, we are gathering information about our client’s health and dietary considerations. This applies to ALL members in the household and will help us to provide more relevant services in the future. Do you or anyone in the household have any of these dietary needs or health conditions?”
14. Read list of dietary considerations.