



# **Vulnerability Index - Service Prioritization Decision Assistance Tool (VI-SPDAT)**

## **Prescreen Triage Tool for Single Adults**

CANADIAN VERSION 2.0

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## Administration

|   |                                     |                            |
|---|-------------------------------------|----------------------------|
| <b>Interviewer's Name</b>                 | <b>Agency</b>                       | Team<br>Staff<br>Volunteer |
| <b>Survey Date</b><br>DD/MM/YYYY ___/___/ | <b>Survey Time</b><br>___:___ AM/PM | <b>Survey Location</b>     |

## Opening Script

Every assessor in your community regardless of organization completing the VI-SPDAT should use the same introductory script. In that script you should highlight the following information:

the name of the assessor and their affiliation (organization that employs them, volunteer as part of a Point in Time Count, etc.)

the purpose of the VI-SPDAT being completed

that it usually takes less than 7 minutes to complete

that only "Yes," "No," or one-word answers are being sought

that any question can be skipped or refused

where the information is going to be stored

that if the participant does not understand a question or the assessor does not understand the question that clarification can be provided

the importance of relaying accurate information to the assessor and not feeling that there is a correct or preferred answer that they need to provide, nor information they need to conceal

## Basic Information

|  |                 |                      |                  |                               |
|--|-----------------|----------------------|------------------|-------------------------------|
| <b>First Name</b>  | <b>Nickname</b> | <b>Last Name</b>     |                  |                               |
| <b>In what language do you feel best able to express yourself?</b> |                 |                      |                  |                               |
| <b>Date of Birth</b>   | <b>Age</b>      | <b>Social Number</b> | <b>Insurance</b> | <b>Consent to participate</b> |
| DD/MM/YYYY ___/___/  |                 |                      |                  | Yes      No                   |

**IF THE PERSON IS 60 YEARS OF AGE OR OLDER, THEN SCORE 1.**

**SCORE:**

## A. History of Housing and Homelessness

|  |  |                                       |
|--|--|---------------------------------------|
| 1. Where do you sleep most frequently? (check one)   | Shelters<br><b>Couch Surfing</b><br><b>Outdoors</b><br><b>Other (specify):</b><br><br><b>Refused</b> |                                       |
| <b>IF THE PERSON ANSWERS ANYTHING OTHER THAN "SHELTER", THEN SCORE 1.</b>  |  | <b>SCORE:</b><br><input type="text"/> |
| 2. How long has it been since you lived in permanent stable housing?   |  | Refused                               |
| 3. In the last year, how many times have you been homeless?  |  | Refused                               |
| <b>IF THE PERSON HAS EXPERIENCED 6 OR MORE CONSECUTIVE MONTHS OF HOMELESSNESS, AND/OR 3+ EPISODES OF HOMELESSNESS, THEN SCORE 1.</b> |  | <b>SCORE:</b><br><input type="text"/> |

## B. Risks

|   |  |         |
|---|--|---------|
| 4. In the past six months, how many times have you...   |  |         |
| a. Received health care at an emergency department/room?  |  | Refused |
| b. Taken an ambulance to the hospital?  |  | Refused |
| c. Been hospitalized as an inpatient?   |  | Refused |
| d. Used a crisis service, including sexual assault crisis, mental health crisis, family/intimate violence, distress centers and suicide prevention hotlines?                              |  | Refused |
| e. Talked to police because you witnessed a crime, were the victim of a crime, or the alleged perpetrator of a crime or because the police told you that you must move along?             |  | Refused |
| f. Stayed one or more nights in a holding cell, jail or prison, whether that was a short-term stay like the drunk tank, a longer stay for a more serious offence, or anything in between? |  | Refused |

|  |          |          |         |                      |
|--|----------|----------|---------|----------------------|
| <b>IF THE TOTAL NUMBER OF INTERACTIONS EQUALS 4 OR MORE, THEN SCORE 1 FOR EMERGENCY SERVICE USE.</b> |          |          |         | <b>SCORE:</b>        |
|  |          |          |         | <input type="text"/> |
| 5. Have you been attacked or beaten up since you've become homeless?                                 | <b>Y</b> | <b>N</b> | Refused |                      |
| 6. Have you threatened to or tried to harm yourself or anyone else in the last year?                 | <b>Y</b> | <b>N</b> | Refused |                      |
| <b>IF "YES" TO ANY OF THE ABOVE, THEN SCORE 1 FOR RISK OF HARM.</b>                                  |          |          |         | <b>SCORE:</b>        |
|  |          |          |         | <input type="text"/> |

|  |          |          |         |                      |
|--|----------|----------|---------|----------------------|
| 7. Do you have any legal stuff going on right now that may result in you being locked up, having to pay fines, or that make it more difficult to rent a place to live?                                   | <b>Y</b> | <b>N</b> | Refused |                      |
| <b>IF "YES," THEN SCORE 1 FOR LEGAL ISSUES.</b>  |          |          |         | <b>SCORE:</b>        |
|  |          |          |         | <input type="text"/> |
| 8. Does anybody force or trick you to do things that you do not want to do?  | <b>Y</b> | <b>N</b> | Refused |                      |
| 9. Do you ever do things that may be considered to be risky like exchange sex for money, run drugs for someone, have unprotected sex with someone you don't know, share a needle, or anything like that? | <b>Y</b> | <b>N</b> | Refused |                      |
| <b>IF "YES" TO ANY OF THE ABOVE, THEN SCORE 1 FOR RISK OF EXPLOITATION.</b>  |          |          |         | <b>SCORE:</b>        |
|  |          |          |         | <input type="text"/> |

### **C. Socialization & Daily Functioning**

|   |          |          |         |  |
|---|----------|----------|---------|--|
| 10. Is there any person, past landlord, business, bookie, dealer, or government group like the CRA that thinks you owe them money?      | <b>Y</b> | <b>N</b> | Refused |  |
| 11. Do you get any money from the government, a pension, an inheritance, working under the table, a regular job, or anything like that? | <b>Y</b> | <b>N</b> | Refused |  |

|  |   |   |         |                      |
|--|---|---|---------|----------------------|
| <b>IF "YES" TO QUESTION 10 OR "NO" TO QUESTION 11, THEN SCORE 1 FOR MONEY MANAGEMENT.</b>  |   |   |         | <b>SCORE:</b>        |
|  |   |   |         | <input type="text"/> |
| 12. Do you have planned activities, other than just surviving, that make you feel happy and fulfilled?   | Y | N | Refused |                      |
| <b>IF "NO," THEN SCORE 1 FOR MEANINGFUL DAILY ACTIVITY.</b>  |   |   |         | <b>SCORE:</b>        |
|  |   |   |         | <input type="text"/> |
| 13. Are you currently able to take care of basic needs like bathing, changing clothes, using a restroom, getting food and clean water and other things like that?                      | Y | N | Refused |                      |
| <b>IF "NO," THEN SCORE 1 FOR SELF-CARE.</b>  |   |   |         | <b>SCORE:</b>        |
|  |   |   |         | <input type="text"/> |
| 14. Is your current homelessness in any way caused by a relationship that broke down, an unhealthy or abusive relationship, or because family or friends caused you to become evicted? | Y | N | Refused |                      |
| <b>IF "YES," THEN SCORE 1 FOR SOCIAL RELATIONSHIPS.</b>  |   |   |         | <b>SCORE:</b>        |
|  |   |   |         | <input type="text"/> |

## D. Wellness

|   |   |   |                |  |
|---|---|---|----------------|--|
| 15. Have you ever had to leave an apartment, shelter program, or other place you were staying because of your physical health?  | Y | N | Refused        |  |
| 16. Do you have any chronic health issues with your liver, kidneys, stomach, lungs or heart?  | Y | N | Refused        |  |
| 17. Do you have any physical disabilities that would limit the type of housing you could access, or would make it hard to live independently because you'd need help? | Y | N | Refused        |  |
| 18. When you are sick or not feeling well, do you avoid getting help?   | Y | N | Refused        |  |
| 19. <i>FOR FEMALE RESPONDENTS ONLY:</i> Are you currently pregnant?   | Y | N | N/A or Refused |  |

**IF "YES" TO ANY OF THE ABOVE, THEN SCORE 1 FOR PHYSICAL HEALTH.**

**SCORE:**

|  |   |   |         |  |
|--|---|---|---------|--|
| 20. Has your drinking or drug use led you to being kicked out of an apartment or program where you were staying in the past? | Y | N | Refused |  |
| 21. Will drinking or drug use make it difficult for you to stay housed or afford your housing?                               | Y | N | Refused |  |

**IF "YES" TO ANY OF THE ABOVE, THEN SCORE 1 FOR SUBSTANCE USE.**

**SCORE:**

|  |   |   |         |  |
|--|---|---|---------|--|
| 22. Have you ever had trouble maintaining your housing, or been kicked out of an apartment, shelter program or other place you were staying, because of: |   |   |         |  |
| a. A mental health issue or concern?   | Y | N | Refused |  |
| b. A past head injury?   | Y | N | Refused |  |
| c. A learning disability, developmental disability, or other impairment?   | Y | N | Refused |  |
| 23. Do you have any mental health or brain issues that would make it hard for you to live independently because you'd need help?                         | Y | N | Refused |  |

**IF "YES" TO ANY OF THE ABOVE, THEN SCORE 1 FOR MENTAL HEALTH.**

**SCORE:**

**IF THE RESPONENT SCORED 1 FOR PHYSICAL HEALTH AND 1 FOR SUBSTANCE USE AND 1 FOR MENTAL HEALTH, SCORE 1 FOR TRI-MORBIDITY.**

**SCORE:**

|  |   |   |         |  |
|--|---|---|---------|--|
| 24. Are there any medications that a doctor said you should be taking that, for whatever reason, you are not taking?               | Y | N | Refused |  |
| 25. Are there any medications like painkillers that you don't take the way the doctor prescribed or where you sell the medication? | Y | N | Refused |  |

**IF "YES" TO ANY OF THE ABOVE, SCORE 1 FOR MEDICATIONS.**

**SCORE:**

|  |   |   |         |                                       |
|--|---|---|---------|---------------------------------------|
|  |   |   |         |                                       |
| 26. <b>YES OR NO:</b> Has your current period of homelessness been caused by an experience of emotional, physical, psychological, sexual, or other type of abuse, or by any other trauma you have experienced? | Y | N | Refused |                                       |
| <b>IF "YES", SCORE 1 FOR ABUSE AND TRAUMA.</b>   |   |   |         | <b>SCORE:</b><br><input type="text"/> |

## Demographic Information

|   |   |         |
|---|---|---------|
| 27. What gender do you identify with?   | <input type="checkbox"/> Male<br><input type="checkbox"/> Female<br><input type="checkbox"/> Transgender/Transsexual<br><input type="checkbox"/> Don't Know<br><input type="checkbox"/> Other (specify):  | Refused |
| 28. Do you identify as Aboriginal or do you have Aboriginal ancestry? (This includes First Nations, Metis, Inuit, Indian, Native, with or without Status) | <input type="checkbox"/> Yes<br><input type="checkbox"/> No<br><input type="checkbox"/> Don't Know<br><input type="checkbox"/> Refused  | Refused |
| 29. If yes, which do you identify as?   | <input type="checkbox"/> First Nations: off-reserve<br><input type="checkbox"/> First Nations: on-reserve<br><input type="checkbox"/> Inuit<br><input type="checkbox"/> Metis<br><input type="checkbox"/> Non-Status or have Aboriginal Ancestry<br><input type="checkbox"/> Unknown<br><input type="checkbox"/> Don't Know | Refused |
| 30. Are you a recent immigrant or refugee in Canada within the past 5 years?  | <input type="checkbox"/> Yes<br><input type="checkbox"/> No<br><input type="checkbox"/> Don't Know<br><input type="checkbox"/> Refused  | Refused |
| 31. Have you ever had any service in the Canadian military or RCMP?   | <input type="checkbox"/> Yes, Military<br><input type="checkbox"/> Yes, RCMP<br><input type="checkbox"/> No<br><input type="checkbox"/> Don't Know<br><input type="checkbox"/> Refused  | Refused |
| 32. Have you ever been in Foster Care?  | <input type="checkbox"/> Yes<br><input type="checkbox"/> No<br><input type="checkbox"/> Don't Know<br><input type="checkbox"/> Refused  |         |

|   |  |  |
|---|--|--|
| 33. Have you been in jail and/or prison in the past 6 months?     | <input type="checkbox"/> Yes<br><input type="checkbox"/> No<br><input type="checkbox"/> Don't Know<br><input type="checkbox"/> Refused |  |
| 34. Did you move to [community name] in the past year?            | <input type="checkbox"/> Yes<br><input type="checkbox"/> No<br><input type="checkbox"/> Don't Know<br><input type="checkbox"/> Refused |  |
| 35. Have you been homeless for 6 months or more in the past year? | <input type="checkbox"/> Yes<br><input type="checkbox"/> No<br><input type="checkbox"/> Don't Know<br><input type="checkbox"/> Refused |  |

## Scoring Summary

| DOMAIN                               | SUBTOTAL   | RESULTS       |  |
|--------------------------------------|------------|---------------|--|
| PRE-SURVEY                           | /1         |               |  |
| A. HISTORY OF HOUSING & HOMELESSNESS | /2         | <b>Score:</b> | <b>Recommendation:</b>                                       |
| B. RISKS                             | /4         | 0-3:          | no housing intervention                                      |
| C. SOCIALIZATION & DAILY FUNCTIONS   | /4         | 4-7:          | an assessment for Rapid Re-Housing                           |
| D. WELLNESS                          | /6         | 8+:           | an assessment for Permanent Supportive Housing/Housing First |
| <b>GRAND TOTAL:</b>                  | <b>/17</b> |               |  |



## Follow-Up Questions

|  |   |           |                |
|--|---|-----------|----------------|
| <p><b>On a regular day, where is it easiest to find you and what time of day is easiest to do so?</b></p>                                  | <p>place:<br/>time: __: __ or Morning/Afternoon/Evening/Night</p> |           |                |
| <p><b>Is there a phone number and/or email where someone can safely get in touch with you or leave you a message?</b></p>                  | <p>phone: (____) _____ -<br/>email:</p>                           |           |                |
| <p><b>Ok, now I'd like to take your picture so that it is easier to find you and confirm your identity in the future. May I do so?</b></p> | <p>Yes</p>  | <p>No</p> | <p>Refused</p> |

**Communities are encouraged to think of additional questions that may be relevant to the programs being operated or your specific local context. This may include questions related to:**

- military service and nature of discharge
- ageing out of care
- mobility issues
- legal status in country
- income and source of it
- current restrictions on where a person can legally reside
- safety planning

## Appendix A: About the VI-SPDAT

**In communities getting the results required to end chronic and episodic homelessness, the introduction of a coordinated access and common assessment approach has proven to be essential for success. Many communities have struggled to find evidence informed tools and strategies, which demands an investment of considerable time, resources and expertise. Others are making it up as they go along, using “gut instincts” in lieu of solid evidence. Communities need tools that enhance their ability to quickly implement an effective approach to access and assessment. The VI-SPDAT is a first-of-its-kind tool designed to fill this need, helping communities end homelessness in a quick, strategic fashion.**

### **The VI-SPDAT**

**The VI-SPDAT was initially created by combining the elements of the Vulnerability Index which was created and implemented by Community Solutions broadly in the 100,000 Homes Campaign, and the SPDAT Prescreen Instrument that was part of the Service Prioritization Decision Assistance Tool. The combination of these two instruments was performed through extensive research and development, and testing. The development process included the direct voice of hundreds of persons with lived experience.**

**The VI-SPDAT examines factors of current vulnerability and future housing stability. It follows the structure of the SPDAT assessment tool, and is informed by the same research backbone that supports the SPDAT - almost 300 peer reviewed published journal articles, government reports, clinical and quasi-clinical assessment tools, and large data sets. The SPDAT has been independently tested, as well as internally reviewed. The data overwhelmingly shows that when the SPDAT is used properly, housing outcomes are better than when no assessment tool is used.**

**The VI-SPDAT is a triage tool. It highlights areas of higher acuity, thereby helping to inform the type of support and housing intervention that may be most beneficial to improve long term housing outcomes. It also helps inform the order - or priority - in which people should be served. The VI-SPDAT does not make decisions; it informs decisions. The VI-SPDAT provides data that communities, service providers, and people experiencing homelessness can use to help determine the best course of action next.**

## **Version 2**

**Version 2 builds upon the success of Version 1 of the VI-SPDAT with some refinements. Starting in August 2014, a survey was launched of existing VI-SPDAT users to get their input on what should be amended, improved, or maintained in the tool. Analysis was completed across all of these responses. Further research was conducted. Questions were tested and refined over several months, again including the direct voice of persons with lived experience and frontline practitioners. Input was also gathered from senior government officials that create policy and programs to help ensure alignment with guidelines and funding requirements.**

**You will notice some differences in Version 2 compared to Version 1. Namely:**

- it is shorter, usually taking less than 7 minutes to complete;**
- subjective elements through observation are now gone, which means the exact same instrument can be used over the phone or in-person;**
- medical, substance use, and mental health questions are all refined;**
- you can now explicitly see which component of the full SPDAT each VI-SPDAT question links to; and,**
- the scoring range is slightly different (Don't worry, we can provide instructions on how these relate to results from Version 1).**

## **Appendix B: Where the SPDAT products are being used in Canada**

Since the VI-SPDAT is provided completely free of charge, and no training is required, any community is able to use the VI-SPDAT without the explicit permission of Community Solutions or OrgCode Consulting, Inc. As a result, the VI-SPDAT is used in more communities than we know of. It is also being used in the United States and Australia. A partial list of regions in Canada where we know SPDAT products are being used includes:

### Alberta

- Province-wide

### Manitoba

- City of Winnipeg

### New Brunswick

- City of Fredericton
- City of Saint John

### Newfoundland and Labrador

- Province-wide

### Northwest Territories

- City of Yellowknife

### Ontario

- City of Barrie/Simcoe County
- City of Brantford/Brant County
- City of Greater Sudbury
- City of Kingston/Frontenac County
- City of Ottawa
- City of Windsor
- District of Kenora
- District of Parry Sound
- District of Sault Ste Marie
- Regional Municipality of Waterloo
- Regional Municipality of York

### Saskatchewan

- Saskatoon