Intro to VI-SPDAT

Everything you need to know to be awesome at the triage tool.

A presentation by:
Iain De Jong
President & CEO
OrgCode Consulting, Inc.
So Why the SPDAT & VI-SPDAT?

• Need to function as a system to end homelessness.

• Need to objective in determining service.

• Need to move from waiting list mentality to a priority list operation.

• Need to move from just who is eligible to who needs the resource the most.

• Need to move away from luck and “first come, first served”.

• Need a tool that follows the person/family; not the person/family having to tell their story over and over again.
Length of Time Homeless & Acuity
Acuity determined through assessment

Higher Acuity
(Usually PSH/Housing First)

Moderate Acuity

Lower Acuity
(Lightest “touch” possible)

(Usually some time-limited financial and/or case management supports)

Funnel of homeless services

Not homogeneous
A Brief History Of The SPDAT
Born Out of Frustration

- Programs and housing development based upon emotion, not on evidence.
Development Process

- Review of 13 different tools.
- Focus groups and meetings with practitioners and persons with lived experience.
- Expert advisory panel.
- Academic research.
- Testing.
- Refining.
- Testing (again).
- Finalizing.
An Example: How Do Meaningful Daily Activities Impact Housing Stability?

• Does it matter if it purposely designed for formerly homeless people or more broadly in community?
• Does presence of mental illness or addiction impact participation?
• Is there any evidence that length of homelessness impacts ability to participate?
• Is quantity or is quality a more influencing factor?
• How do you determine if it is “meaningful”? 


Mental Health Commission of Canada (2012). Beyond housing: At Home/Chez Soi early findings report. Retrieved February 20, 2014 from: [http://www.mentalhealthcommission.ca/English/system/files/private/Housing_At_Home_Early_Findings_Report_Volume%202_ENG_0.pdf](http://www.mentalhealthcommission.ca/English/system/files/private/Housing_At_Home_Early_Findings_Report_Volume%202_ENG_0.pdf)


Yanos, Stefancic, & Tsemberis, (2012). Objective Community Integration of Mental Health Consumers Living in Supported Housing and of Others in the Community. Psychiatric Services, 63, 438-44.

Crafting the Component

- Acuity concepts outlined across five degrees from no issue to most extreme issue in the subject matter.
- In the example, this would range from having MDAs just as the person would like them occupying most days of week and time of day to having no MDAs at all of their choosing.
- Language tested and informed by practitioners and persons with lived experience.
- Working copy vetted through expert review panel.
Independent Review

- Experts in abuse and trauma
- Cultural sensitivity and competency
- Experts in domestic and intimate partner violence
- Policy experts
- Experts in homelessness
- People with lived experience
Independent Testing

• Strong inter-rater reliability.
• Positive summative evaluation.
• Positive outcome evaluation.
• Determined by government to be appropriate for various departments/ministries.
• Presented at peer-reviewed conferences by evaluators.
• Major independent data release May 2015.
Expansion

- In use in various ways in six countries - Canada, United States, New Zealand, Australia, Czech Republic, and UK.
- Several provinces and states have made it mandatory.
- Number of communities using it is over 1,300 by our best estimates.
- Built into all major HMIS platforms, including HIFIS.
Difference Between the Full SPDAT and VI-SPDAT
How Does the VI-SPDAT Relate to the SPDAT?

- The VI-SPDAT is a *prescreen* or *triage* tool. It is looking to confirm or deny the presence of more acute issues.

- The SPDAT is an *assessment* tool. It is looking at the depth or nuances of an issue and the degree to which housing may be impacted.
The Full SPDAT

• Provides baseline acuity at time of assessment and measures changes in acuity over time.
• Improves case management by providing a framework for the intervention.
• Helps indicate when housing may become unstable.
• Allows for graphing of changes over time.
• Improves system planning.
By Comparison

**IN THE SPDAT**

- **4** No planned, legal activities described as providing fulfillment or happiness
- **3** Discussing, exploring, signing up for and/or preparing for new activities or to re-engage with planned, legal activities that used to provide fulfillment or happiness
- **2** Attempting new or re-engaging with planned, legal activities that used to provide fulfillment or happiness, but uncertain that activities selected are currently providing fulfillment or happiness, or the individual is not fully committed to continuing the activities.
- **1** Has planned, legal activities described as providing fulfillment or happiness 1-3 days per week
- **0** Has planned, legal activities described as providing fulfillment or happiness 4+ days per week

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**IN THE VI-SPDAT**

13. Do you have planned activities, other than just surviving, that make you feel happy and fulfilled?  □ Y  □ N  □ Refused
A Brief History Of The VI-SPDAT
<table>
<thead>
<tr>
<th>Vulnerability Index (VI)</th>
<th>Service Prioritization Decision Assistance Tool (SPDAT)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Built upon the research of Drs. O’Connell and Hwang regarding medical vulnerability and risk of mortality within homeless populations</td>
<td>Built upon review of 13 existing tools, client interviews, case manager interviews, academic panel, and 300 published journal articles + other government reports + tools</td>
</tr>
<tr>
<td>Made popular first through Common Ground and then the 100K Homes Campaign</td>
<td>Made popular through coordinated access and common assessment approaches for Housing First programs</td>
</tr>
<tr>
<td>In place across more than 200 communities participating in the 100K Homes Campaign</td>
<td>In place in over 130 communities focused on prioritization for Housing First and Rapid Re-Housing programs, and/or system prioritization.</td>
</tr>
</tbody>
</table>
**Some Differences**

<table>
<thead>
<tr>
<th>VI</th>
<th>SPDAT</th>
</tr>
</thead>
<tbody>
<tr>
<td>Medical vulnerability (risk of morbidity) amongst chronically homeless people of primary concern.</td>
<td>Medical vulnerability is an element, but considered along with other proven risk factors.</td>
</tr>
<tr>
<td>Administered primarily as a survey, often through street-based registry weeks.</td>
<td>Administered primarily as an assessment for intake to a support and housing program.</td>
</tr>
<tr>
<td>Doesn’t prioritize, especially for those who need a moderate intervention.</td>
<td>Designed to prioritize for all types of housing interventions, including when no intervention is recommended.</td>
</tr>
<tr>
<td>Doesn’t have a version specifically for families.</td>
<td>Has a version specifically for families.</td>
</tr>
</tbody>
</table>
The Merger

• Combining the VI with the SPDAT began early in 2013.
• VI elements meshed with other SPDAT prescreen components.
• Survey tested in California, Louisiana, Michigan and Alberta in May and June 2013.
• Release of first draft at NAEH Conference.
• Further tested and revised with amended tool released October 2013.
• Release of Version 2 May 2015 after extensive testing throughout North America.
Organizing in Domains
Risks

- Involvement in High Risk/Exploitive Situations
- Legal Issues
- Interactions with Emergency Services
- Managing Tenancy
- Harm to Self or Others
Socialization & Daily Functions

- Social Relations and Networks
- Meaningful Daily Activities
- Personal Administration & Money Management
- Self-Care & Daily Living Skills
Family Unit

- Parental Engagement
- Size of Family
- Needs of Children
- Stability/Resiliency of Family Unit
- Involvement with Children's Services/Family Court
VI-SPDAT
<table>
<thead>
<tr>
<th>Interviewer’s Name</th>
<th>Agency</th>
<th>Survey Date</th>
<th>Survey Time</th>
<th>Survey Location</th>
</tr>
</thead>
</table>

DD/MM/YYYY  _____/_____/_____

____ : ____ AM/PM
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

<table>
<thead>
<tr>
<th>First Name</th>
<th>Nickname</th>
<th>Last Name</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

In what language do you feel best able to express yourself? _______________________________________

<table>
<thead>
<tr>
<th>Date of Birth</th>
<th>Age</th>
<th>Social Insurance Number</th>
<th>Consent to participate</th>
</tr>
</thead>
<tbody>
<tr>
<td>DD/MM/YYYY</td>
<td><em><strong>/</strong></em>/___</td>
<td>___</td>
<td>______________________</td>
</tr>
</tbody>
</table>

IF THE PERSON IS 60 YEARS OF AGE OR OLDER, THEN SCORE 1.
A. History of Housing and Homelessness

1. Where do you sleep most frequently? (check one)
   - Shelters
   - Transitional Housing
   - Safe Haven
   - Outdoors
   - Other (specify):
   - Refused

IF THE PERSON ANSWERS ANYTHING OTHER THAN “SHELTER”, “TRANSITIONAL HOUSING”,
OR “SAFE HAVEN”, THEN SCORE 1.

SCORE:

2. How long has it been since you lived in permanent stable housing?
   _________  □ Refused

3. In the last three years, how many times have you been homeless?
   _________  □ Refused

IF THE PERSON HAS EXPERIENCED 1 OR MORE CONSECUTIVE YEARS OF HOMELESSNESS,
AND/OR 4+ EPISODES OF HOMELESSNESS, THEN SCORE 1.

SCORE:
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

IF THE TOTAL NUMBER OF INTERACTIONS EQUALS 4 OR MORE, THEN SCORE 1 FOR EMERGENCY SERVICE USE.

5. Have you been attacked or beaten up since you’ve become homeless? □ Y □ N □ Refused
6. Have you threatened to or tried to harm yourself or anyone else in the last year? □ Y □ N □ Refused

IF “YES” TO ANY OF THE ABOVE, THEN SCORE 1 FOR RISK OF HARM.
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? □ Y □ N □ Refused

**IF “YES,” THEN SCORE 1 FOR LEGAL ISSUES.**

8. Does anybody force or trick you to do things that you do not want to do? □ Y □ N □ 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? □ Y □ N □ Refused

**IF “YES” TO ANY OF THE ABOVE, THEN SCORE 1 FOR RISK OF EXPLOITATION.**

SCORE:
C. Socialization & Daily Functioning

10. Is there any person, past landlord, business, bookie, dealer, or government group like the IRS that thinks you owe them money?  
   □ Y  □ N  □ 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?  
   □ Y  □ N  □ Refused

**IF “YES” TO QUESTION 10 OR “NO” TO QUESTION 11, THEN SCORE 1 FOR MONEY MANAGEMENT.**

12. Do you have planned activities, other than just surviving, that make you feel happy and fulfilled?  
   □ Y  □ N  □ Refused

**IF “NO,” THEN SCORE 1 FOR MEANINGFUL DAILY ACTIVITY.**

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

**IF “NO,” THEN SCORE 1 FOR SELF-CARE.**

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

**IF “YES,” THEN SCORE 1 FOR SOCIAL RELATIONSHIPS.**
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. If there was space available in a program that specifically assists people that live with HIV or AIDS, would that be of interest to you? □ Y □ N □ Refused

18. 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

19. When you are sick or not feeling well, do you avoid getting help? □ Y □ N □ Refused

20. FOR FEMALE RESPONDENTS ONLY: Are you currently pregnant? □ Y □ N □ N/A or Refused

IF "YES" TO ANY OF THE ABOVE, THEN SCORE 1 FOR PHYSICAL HEALTH.
21. 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

22. 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.

23. 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

24. 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.

IF THE RESPONDENT SCORED 1 FOR PHYSICAL HEALTH AND 1 FOR SUBSTANCE USE AND 1 FOR MENTAL HEALTH, SCORE 1 FOR TRI-MORBIDITY.
25. Are there any medications that a doctor said you should be taking that, for whatever reason, you are not taking? □ Y □ N □ Refused

26. 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.

27. YES OR NO: 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

IF “YES”, SCORE 1 FOR ABUSE AND TRAUMA.
## Scoring Summary

<table>
<thead>
<tr>
<th>DOMAIN</th>
<th>SUBTOTAL</th>
<th>RESULTS</th>
</tr>
</thead>
<tbody>
<tr>
<td>PRE-SURVEY</td>
<td>/1</td>
<td></td>
</tr>
<tr>
<td>A. HISTORY OF HOUSING &amp; HOMELESSNESS</td>
<td>/2</td>
<td></td>
</tr>
<tr>
<td>B. RISKS</td>
<td>/4</td>
<td><strong>Score:</strong> 0-3: no housing intervention</td>
</tr>
<tr>
<td>C. SOCIALIZATION &amp; DAILY FUNCTIONS</td>
<td>/4</td>
<td><strong>Recommendation:</strong> 4-7: an assessment for Rapid</td>
</tr>
<tr>
<td>D. WELLNESS</td>
<td>/6</td>
<td>Re-Housing</td>
</tr>
<tr>
<td>GRAND TOTAL:</td>
<td>/17</td>
<td><strong>8+:</strong> an assessment for Permanent Supportive Housing/Housing First</td>
</tr>
</tbody>
</table>
Follow-Up Questions

<table>
<thead>
<tr>
<th>Question</th>
<th>Response</th>
</tr>
</thead>
<tbody>
<tr>
<td>On a regular day, where is it easiest to find you and what time of day is easiest to do so?</td>
<td>place: ____________________________ time: __ : ___ or Morning/Afternoon/Evening/Night</td>
</tr>
<tr>
<td>Is there a phone number and/or email where someone can safely get in touch with you or leave you a message?</td>
<td>phone: (____) ______ - ___________ email: ____________________________</td>
</tr>
<tr>
<td>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?</td>
<td>☐ Yes ☐ No ☐ Refused</td>
</tr>
</tbody>
</table>

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  
- children that may reside with the adult at some point in the future  
- safety planning
Things Not to Do
Stuff to Remember That You CANNOT Do

• Change questions
• Change order of questions
• Change scoring
• Complete it more than once (unless there are major life changes)
• Think it is perfect (it is a triage tool)
Needs of Populations
Different Populations Benefit From Different Tools (that talk to each other)

- VI-SPDAT for single adults
- SPDAT for single adults
- F-VI-SPDAT for families
- F-SPDAT for families
- Next Steps for youth
- Youth SPDAT
- Coming soon…
- Hospital discharge VI-SPDAT
- Justice discharge VI-SPDAT
The Leadership Academy on Ending Homelessness

October 20-22, 2015
Stonewall Resort, WV

Stay in touch: WAITING LIST ONLY!!!
academy@wvceh.org

@orgcode

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