

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

Version 3

## **WORKBOOK**

May 2020



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# Introduction to the SPDAT Line of Products

The Service Prioritization Decision Assistance Tool (SPDAT) has been around in various incarnations for over a decade, before being released to the public in 2010. Since its initial release, the use of the SPDAT suite of tools has been expanding exponentially and is now used in over one thousand communities across the United States, Canada, and Australia. More communities using the tool means there is an unprecedented demand for versions of the SPDAT customized for specific client groups or types of users.

## VI-SPDAT Series

The Vulnerability Index – Service Prioritization Decision Assistance Tool (VI-SPDAT) was originally developed as a pre-screening tool that more quickly assessed client vulnerability where communities lacked the time or resources to conduct a full SPDAT assessment for every client. As a brief survey relying largely on self-reported responses, the VI-SPDAT can be conducted as an initial triage engagement to inform on what next steps could occur to assist a household to quickly resolve their housing crisis. The VI-SPDAT does not determine acuity, nor should it make decisions about what type of housing a household should get. The VI-SPDAT does assist with decisions to support an equitable access to limited resources.

### *The 2020 revision process generated the following updates:*

- VI-SPDAT Version 3.0 for Single Adults
- VI-SPDAT Version 3.0 for Families
- VI-SPDAT Version 2.0 for Transition Aged Youth
- VI-SPDAT Version 2.0 for Prevention/Re-Housing for Single Adults
- VI-SPDAT Version 2.0 for Prevention/Re-Housing for Families
- VI-SPDAT Version 2.0 for Justice Discharge for Single Adults
- Instruction webinar for VI-SPDAT Version 3.0 for Single Adults

All VI-SPDAT versions and guides are available online [here](#)

## SPDAT Series

Prior to the creation of the VI-SPDAT products, the Service Prioritization Decision Assistance Tool (SPDAT) was developed as an assessment tool for front-line workers at agencies that work with homeless clients to prioritize which of those clients should

receive assistance first. The SPDAT tools are also designed to help guide case management and improve housing stability outcomes. They provide an in-depth assessment that relies on the assessor's ability to interpret responses and corroborate those with evidence. As a result, this tool may only be used by those who have received proper, up-to-date training provided by OrgCode Consulting, Inc. or an OrgCode certified trainer.

***Current versions available:***

- SPDAT Version 5.0 for Single Adults
- F-SPDAT Version 3.0 for Families
- Y-SPDAT Version 2.0 for Youth

Information about all versions is available [here](#)

**SPDAT Training Series**

To use any products within the SPDAT assessment series, training by OrgCode Consulting, Inc. or an OrgCode certified trainer is required. We provide training on a wide range of topics over a variety of mediums. The half-day webinar as well as the full-day in-person SPDAT training provides you the opportunity to bring together as many community partners and practitioners as you want to be trained for one fee.

The training gives you the workbook, case studies, application to current practice, a history of the research, evidence-based practices, various contributors, guidance on the expected service orientation for practitioners, a review of each component of the tool, conversation guidance with prospective participants and more!

More information about SPDAT training, including pricing, is available online at

[www.orgcode.com](http://www.orgcode.com)

# A Brief History of How We Got Here

## In the beginning...

...there was no VI-SPDAT (Vulnerability Index – Service Prioritization Decision Assistance Tool). There was a VI (Vulnerability Index) that was created and made popular by Common Ground prior to the advent of Community Solutions. There was the SPDAT (Service Prioritization Decision Assistance Tool) and SPDAT Prescreen that were created and made popular by OrgCode Consulting, Inc. (“OrgCode”).

In the summer of 2013, Community Solutions and OrgCode put their brains together to mesh the best parts of the VI with the SPDAT Prescreen, thus creating VI-SPDAT V.1. As a backdrop, the 100,000 Homes Campaign was in full swing at the time, and the VI-SPDAT became the primary tool of choice used in the Campaign. Also, as a backdrop, the US Department of Housing and Urban Development was signaling the future of Coordinated Entry which would require communities to use tools for prioritization. The confluence of these two situations resulted in many communities choosing to use the VI-SPDAT.

## Starting in Autumn 2014...

...we started a feedback cycle to gather input from communities that were using the VI-SPDAT. We got direct feedback from more than 60 communities across North America, including large and smaller communities, from large metropolitan areas to rural locations. A number of these communities also sent OrgCode and Community Solutions anonymized data from VI-SPDAT surveys that had been completed and, where available, information on housing disposition after engagement with the VI-SPDAT.

By October 2014, a draft of VI-SPDAT Version 2 was being tested in a number of Canadian and American communities. Input from frontline staff and persons with lived experience was extensively sought. In the process of updating the tool, there was also contact with the US Department of Housing and Urban Development, the United States Interagency Council on Homelessness, and the National Alliance to End Homelessness. OrgCode also participated in a convening by HUD and the NAEH on assessment tools in December, with leading academics in homelessness from across the United States and Australia.

Based upon concerns regarding knowledge of specific health conditions, accuracy of self-reporting of those health conditions, and some Fair Housing questions in the US,

further amendments were made to the VI-SPDAT in the Wellness Section. Other improvements in other areas of the tool were also considered and added. For example, with the help of experts in trauma, a new question about past experiences of abuse or trauma and the impact on homelessness were added.

## **2015 Was a Watershed Year**

In 2015, Version 2 of the VI-SPDAT was released. It was also the year that the Family Versions of the tool were updated for mass release, and the development and release of the Next Steps Tool for Youth (aka the Youth VI-SPDAT), thanks to a partnership with the Corporation for Supportive Housing and the University of Southern California.

2015 also kick-started the engagement and research process for developing and releasing the Justice Discharge VI-SPDAT (which was made available in 2016) and the Prevention and Diversion VI-SPDAT (which was made available in 2017).

The Version of the tool as most communities throughout the United States, Canada and Australia know it today, is a result of the 2015 release of Version 2.

## **In 2018 the Update Process Began Again**

Data from the Next Steps Tool for Youth went through considerable analysis by Chapin Hall at the University of Chicago and the University of Southern California. Their groundbreaking analysis is found [here](#).

A large dataset from communities using the VI-SPDAT was assembled from across the US. You can examine and conduct your own analysis on the dataset which is available [here](#). The California Policy Lab at UCLA also completed their own analysis on the dataset in October 2019, which is available [here](#).

In 2018, OrgCode again released a survey open to any community using VI-SPDAT V.2. We received 178 responses. This information was used to create a beta-version of the new VI-SPDAT. This was then tested in 10 communities and engaged almost 800 people experiencing homelessness. Each of these communities participated with a Non-Disclosure Agreement, which you can see [here](#).

Each of the surveyors were asked to make note of the following:

- Prescreen Score
- Length of time to complete the survey
- Where the interview was conducted (shelter, outreach, drop-in, other)
- Race/ethnicity of person being surveyed
- Whether the participant identifies as LGBTQ2+
- Whether there were any questions that were difficult to understand
- If yes (a question was difficult to understand), what could be done to improve the question
- Overall impression of the survey by the participant (Excellent, Good, Average, Poor, Terrible)

Each surveyor of the test-tool was asked to provide similar feedback on their impression as someone administering the tool.

The race/ethnicity breakdown of those who were engaged in the beta-testing process in 2018 and 2019 is as follows:

Testing Site	Race/ Ethnicity							TOTAL
	Caucasian	African American	LatinX	Indigenous	Asian	Pacific Islander	Other/ Unknown	
A	3 (11%)	26 (89%)	0	0	0	0	0	29
B	26 (21%)	43 (34%)	41 (33%)	8 (6%)	2 (2%)	0	5 (4%)	125
C	35 (20%)	49 (28%)	53 (31%)	9 (5%)	9 (5%)	4 (2%)	13 (8%)	172
D	23 (26%)	27 (30%)	32 (36%)	1 (1%)	3 (3%)	0	3 (3%)	89
E	14 (23%)	18 (29%)	11 (18%)	9 (15%)	5 (8%)	1 (2%)	4 (6%)	62
F	14 (56%)	7 (28%)	2 (8%)	0	0	0	2 (8%)	25
G	16 (44%)	7 (19%)	0	8 (22%)	1 (3%)	0	4 (11%)	36
H	6 (21%)	6 (21%)	0	0	6 (21%)	8 (29%)	2 (7%)	28
<b>TOTAL USA</b>	<b>137 (24%)</b>	<b>183 (32%)</b>	<b>139 (25%)</b>	<b>35 (6%)</b>	<b>26 (5%)</b>	<b>13 (2%)</b>	<b>33 (6%)</b>	<b>566</b>
I	81 (40%)	43 (21%)	0	63 (32%)	4 (2%)	0	11 (5%)	202
J	9 (33%)	2 (7%)	0	13 (48%)	0	0	3 (11%)	27
<b>TOTAL CANADA</b>	<b>90 (39%)</b>	<b>45 (19%)</b>	<b>0</b>	<b>79 (34%)</b>	<b>4 (2%)</b>	<b>0</b>	<b>14 (6%)</b>	<b>232</b>
<b>OVERALL TOTAL</b>	<b>227 (28%)</b>	<b>228 (29%)</b>	<b>139 (17%)</b>	<b>114 (14%)</b>	<b>30 (4%)</b>	<b>13 (2%)</b>	<b>47 (6%)</b>	<b>798</b>

Across the test sites, results further showed the following:

- Average time of completion of 8.5 minutes per person

- 13% of respondents identified as LGBTQ2+
- 6 questions were identified as requiring further refinement
- 53% of respondents indicated the survey was excellent; 37% indicated it was good; 8% indicated it was average; 1% said it was poor; 1% said it was terrible

In addition, focus groups happened throughout 2018 and parts of 2019 with frontline staff administering the tools, as well as persons with lived experience. In total, 7 focus groups were completed with 29 frontline staff and 5 focus groups were completed with people who were experiencing homelessness comprised of 64 different single adults experiencing homelessness. An additional 17 one-on-one interviews were completed with single adults experiencing homelessness. Altogether, the demographics of people with lived experience engaged in the focus group and interview process are as follows:

Focus Group and Interviews	Race/ Ethnicity							TOTAL
	<i>Caucasian</i>	<i>African American</i>	<i>LatinX</i>	<i>Indigenous</i>	<i>Asian</i>	<i>Pacific Islander</i>	<i>Other/ Unknown/ Don't Want to Disclose</i>	
	18	35	11	9	4	0	4	81
	Age Range							
	<25	25-34	35-44	45-54	55-64	66-74	75+	
	4	8	27	21	11	7	3	

Why is this important? Two reasons: 1. We believe in ensuring the voice of lived experience is not only heard, but incorporated directly into the phrasing and words used in the tool; 2. 2018 and 2019 brought with it a number of comments associated with racial equity concerns regarding the tools. While the national dataset does not support these claims, it was nonetheless disheartening to see individual communities conduct racial equity analysis in Coordinated Entry only to find that people of color were seemingly negatively impacted either by the tool, the way the tool was administered, systemic racism, flawed policies, or a combination thereof.

We heard feedback specifically related to the completion of the survey and people who are Indigenous. In 2019, we specifically engaged with Indigenous persons and leaders across several communities to gather their insights on how to ensure the tool is culturally appropriate for Indigenous Peoples. While engagement with Indigenous groups was used in developing Version 2 of the tool, the process of seeking feedback was much more comprehensive and engaging for the development of Version 3. While we have developed a guidance document for completing the VI-SPDAT with Indigenous Persons (which you can find [here](#)), we acknowledge that communities will need to complete more work in continuing to coach surveyors and develop processes on how best to complete the VI-SPDAT with Indigenous Peoples in a culturally safe manner.





We also have had several conversations with policymakers in government about the tools, their expectations regarding Coordinated Entry/Access, and ensuring integrity of the tools in the context of Coordinated Entry/Access.

**AND IN 2020...**

...the release of the new versions of the tools!

# VI-SPDAT: Let's Set the Record Straight

- If ever you have a question about the VI-SPDAT, the best source of information is us. You are welcome to email [info@orgcode.com](mailto:info@orgcode.com) with your question. We will do our best to answer within a timely fashion.
- The VI-SPDAT is free. If you want to improve your use of it or better understand how to apply it within your Coordinated Entry processes you can hire us to provide a webinar or in-person training. If you just want to understand the basics, there is a video that we encourage you to watch which can be accessed [HERE](#).
- Communities choose to use the VI-SPDAT and are welcome to do so. Naturally, communities that chose to use the VI-SPDAT in the past are welcome to switch to another tool at any time.
- The VI-SPDAT is a *triage* or *prescreen* tool. Acuity cannot be determined by self-report alone. If you want to go deeper in assessing needs and developing support plans for those needs, as well as better understanding the strengths of the person you are engaging, we recommend you get the full SPDAT and the required training to go with it.
- The user of the VI-SPDAT assumes all risks associated with its use.
- The VI-SPDAT does not make decisions such as program eligibility for any specific housing resource. As just one method of gaining insights into the participants' housing and support realities, this triage tool informs decisions. It's what the "DAT" part of VI-SPDAT stands for: *decision assistance tool*.
- The VI-SPDAT is not a wizard, brain-reader, or decision-maker. Human beings will always play a role in gathering the information from other human beings. Human beings interpret and use the information that comes from the tool, often through conversation with other human beings.
- The VI-SPDAT is not perfect. It is the best tool we could develop with the resources available to us. Future versions, and any input you provide in that regard, will make the tool better.

# VI-SPDAT Version 3: Guidance for Implementation

## Introduction

Vulnerability Index-Service Prioritization Decision Assistance Tool Version 3 (VI-SPDAT Version 3) replaces Version 2 of the tool moving forward. Single Adults that have not previously had the VI-SPDAT completed should use Version 3. If Version 2 has already been completed, you do not need to conduct a new screening using Version 3, unless major changes in the person's life warrants an update.

## What the VI-SPDAT is and is not

VI-SPDAT Version 3 is a triage tool intended as an initial determination of potential housing and support needs for people currently experiencing homelessness. The VI-SPDAT Version 3 is not a full assessment. Organizations or communities interested in undertaking a full assessment with people should use the SPDAT in addition to the VI-SPDAT. The SPDAT is a full assessment tool and uses different methods of information capture that may be more complete than the VI-SPDAT. Specialized training is required to use the full SPDAT. Contact OrgCode ([info@orgcode.com](mailto:info@orgcode.com)) for more information on the SPDAT and associated training.

The VI-SPDAT does not identify eligibility to any particular program, nor does it make decisions about who should be matched with a particular housing resource or intervention.

## Important Disclaimer

OrgCode owns all of the intellectual property associated with the VI-SPDAT and SPDAT and related products. Communities and agencies may choose to incorporate these tools into their local service delivery. OrgCode Consulting, Inc. (OrgCode), however, cannot control the way in which the VI-SPDAT and SPDAT products will be used, applied or integrated by communities, agencies, or frontline staff. OrgCode assumes no legal responsibility or liability for the decisions that are made or services that are received in conjunction with the tools.

## At a high level, what is different in Version 3 compared to Version 2

Version 3 builds upon Version 2 and incorporates internal and external analysis of national and international data gleaned from the use of Version 2, as well as interviews and input from people with lived experience, service providers, and policy experts.

Some of the biggest differences:

- In addition to questions about episodes and length of homelessness related to the determination of chronic homelessness, American Version 3 also explicitly asks in the early stages, “*Do you have any diagnosed, documented, disabling conditions?*”
- Some questions in Version 2 had several concepts tied into the narrative of a single question. Those are now broken out into different possible answers to the question and in several instances, these concepts are expanded. For example:

- Version 2 Question on Legal Issues read as follows:

*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?*

- Version 3 Question on Legal Issues now reads as follows:

*Do you have any legal stuff going on right now that may result in any of the following:*

- a) Being locked up*
- b) Having to pay fines or fees that you cannot afford*
- c) Impact your ability to get housing*
- d) Impact where you could live in your housing*

- Version 3 addresses potential Fair Housing concerns raised with Version 2. Remember, how you implement the tools should also be aligned to federal legislations.

## When to conduct the VI-SPDAT

Diversion first! Efforts at diversion and rapid resolution of the housing crisis should be attempted prior to using the VI-SPDAT. It is our recommendation that the VI-SPDAT only be used when:

- The household is experiencing homelessness;
- A previous VI-SPDAT has not been completed, and if there has been a previous VI-SPDAT, there have been no major life changes since that event;
- Diversion and rapid resolution efforts have been employed and were unsuccessful;
- During street outreach, upon at least the third encounter with the person, they are interested in services, and a previous VI-SPDAT has not been completed;
- During sheltering, if it is their first shelter stay, a period of time (approximately 10-14 days) is spent working on resolving their homelessness and the person has been unable to get a plan in place to resolve their own homelessness, and the person is interested in receiving services to help them get access to housing; and
- During day services like a drop-in, upon at least their third visit, they are interested in services, and a previous VI-SPDAT has not been completed.

## Who should deliver the VI-SPDAT

The VI-SPDAT should only be delivered by people that:

- Have watched the video [VI-SPDAT V3](#);
- Conduct the administration of the tool properly;
- Are authorized within your community to complete the tool for the purposes of Coordinated Entry/Access.

The VI-SPDAT includes self-reports. Therefore, it must be recognized that ensuring that the service milieu supports non-judgemental and trauma-informed engagement is essential. While not always possible, it is highly recommended that administrators of the VI-SPDAT have had at least a minimum of training and education on best practices and theories of homelessness and working with vulnerable persons. This includes, but is not limited to, Housing First, Harm Reduction strategies, Stages of Change, Motivational Interviewing, Trauma Informed Care, and Cultural Competency.

## How to introduce the VI-SPDAT

The VI-SPDAT must be explained prior to implementation with any person. Communities are strongly encouraged to ensure that this is delivered consistently regardless of who is administering the survey. Having a standardized script across your community ensures that consumers are receiving consistent messaging about what the VI-SPDAT is and what it can, and cannot, do.

VI-SPDAT should always be introduced and administered in a manner that is sensitive to such issues of age, race, ethnicity, and gender identity, and in a manner that is trauma-informed. While not always possible, communities should consider population needs when determining who will be administering the tool.

You should only conduct the VI-SPDAT with people who have explicitly consented to participate. You should not make the completion of the tool mandatory for receiving services.

## What to do if you already know the answer to questions

There are some data elements included in the VI-SPDAT that may already be captured in your Homeless Management Information System (HMIS)<sup>1</sup>. For example, answers to questions within the administration section, current location of homelessness or length of stay in homelessness may already be known through initial HMIS data. You can transcribe existing answers to those questions from your HMIS or auto-populate the VI-SPDAT with that information from your HMIS.

Answers to other questions may already be known through the course of service delivery within your agency. So long as this information is factual, as opposed to opinion or conjecture, you can also pre-populate various answers in the VI-SPDAT.

In the course of completing the VI-SPDAT, if you are using HMIS data or other known facts to populate responses in the tool you MUST inform the person being surveyed that you have done so and what your responses are so that they can correct any information as necessary.

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<sup>1</sup> In Canada, many communities use the Homeless Individuals and Families Information System (HIFIS) from Employment and Social Development Canada as their HMIS.

## **What to do if someone does not understand a question or you suspect that the question is not understood**

The VI-SPDAT has been extensively tested to survey a variety of people in a variety of environments. However, the tool is not perfect. That said, there may be situations where someone indicates that they do not understand a question or you believe the question is not understood. Only in those situations should you rephrase a question in different ways or provide some examples to help the person understand the intent of the question.

While surveyors should promote a non-judgemental ‘honesty is the currency to success’ approach, we know and understand that persons who have experienced trauma may not feel completely comfortable with self-disclosure or may be too unwell to provide clarity to their current situation. It’s important that communities use the VI-SPDAT as part of a dynamic prioritization and do not penalize the consumer for not answering how we ‘think’ they should answer. Communities should also consider other ways of gathering information about a household – disability verification, housing history, consumer choice, etc. – when determining need and resources that may or may not be available.

## **Does Version 3 change how to serve people already surveyed?**

NO. The introduction of Version 3 should not result in revisiting results from Version 2. Version 3 improves your ability to gather information on the potential support and housing needs in a triage process. The recommended scoring ranges and potential courses of action are the same from Version 2 to Version 3.

## **Guidance for completing the VI-SPDAT with populations that may have unique needs**

Based upon evaluation and feedback on Version 2, we recommend:

- The Tool for Transition Aged Youth (sometimes referred to as the TAY-VI-SPDAT) is used for unaccompanied youth aged 16-24 with whom you are completing the survey.
- The VI-SPDAT for Families (F-VI-SPDAT) is used with households that have dependent children living with the head(s) of household.

- The Justice Discharge VI-SPDAT (the JD-VI-SPDAT) be used with those adults that have been incarcerated 31 or more days, and it is within 30 days of their release (either 30 days prior to release or within 30 days of being released).
- Working with Indigenous partners, OrgCode has generated a [Guidance Document](#). This document should be considered for implementation of the VI-SPDAT with people who identify as Indigenous.
- Cultural competence and racial equity training for all administrators of the VI-SPDAT.

While not always possible, we know that consumers feel safer when they are represented in the staff or surveyors working with them. When possible, have surveyors reflect the populations they are surveying.

### ***VI-SPDAT ASSISTS WITH DECISION-MAKING***

The VI-SPDAT does NOT make decisions. It helps inform decisions. It is ONE variable to be considered when determining how best to support a person within your community's finite services and resources. Any decision that is made on how best to support a person moving forward should consider dynamic prioritization and the local priorities established in your community.

### ***THE VI-SPDAT IS JUST ONE OPPORTUNITY TO INCREASE OUR UNDERSTANDING OF NEEDS***

The VI-SPDAT is one part of several pieces of information that will likely be necessary for having a comprehensive understanding of how best to serve, prioritize and match an individual/family to available programs and supports. Some of the other pieces of information you may find helpful include the following:

- Type of homelessness
- Length of time experiencing homelessness
- Military service history and nature of discharge
- Whether or not they have health insurance
- Accommodations that may be necessary as a result of a particular disability
- History of domestic, intimate partner and/or gender-based violence, especially safety considerations presently and for future housing match and services
- Income and employment information



- Barriers to housing
- Existing service connections
- Any other information that will inform you whether the individual/family is eligible for specific types of housing and support services in your community



# VI-SPDAT Version 3: A Question by Question Review

The intent behind each question and the difference between Version 2 and Version 3:

QUESTION	HOW IS THIS DIFFERENT FROM VERSION 2?	WHAT IS THE QUESTION GETTING AT?
<b>ADMINISTRATION</b>		
First name:	Same as Version 2.	The gathering of the person's name provides communities with the opportunity to follow-up beyond initial triage. It also allows the community to match the completion of the survey, when not completed directly in HMIS, to the person's record in HMIS if/when they have one.
Last name:	Same as Version 2.	
Date	Same as Version 2.	The date the VI-SPDAT is completed.
Race/Ethnicity	Many communities had this as a supplemental question to Version 2, but not an Administration question.	To continue to advance our understanding of improvements to better ensure racial equity and to allow for community analysis of results related to racial equity, this question is necessary.
Start Time	Same as Version 2.	Necessary for tracking how long it takes to complete the survey.
Gender Identity (Male, Female, Transgender, Other):	This data was not collected in Version 2.	Allows for household to self-identify gender identity. Understanding gender identity can assist with triage and referrals, and safety planning <sup>2</sup> and help improve refinements to future versions of the tools for specific populations.
End Time	Same as Version 2.	Necessary for tracking how long it takes to complete the survey.
Identifies as LGBTQ2+?	Many communities had this as a supplemental question to Version 2, but not an Administration question.	Understanding if the person identifies as Lesbian, Gay, Bisexual, Transgender, Queer or Two Spirited can help refine

<sup>2</sup> Transgender persons – especially youth – are at greater risk of homelessness, unemployment, and personal violence/victimization/exploitation within the broader homeless population simply because of their gender identity. As a surveyor, this should flag a specific pathway forward i.e. specific referrals, safety planning, etc.  
<https://transequality.org/issues/housing-homelessness>



		future versions of the tools for specialized populations.
Survey Location - Shelter, Outreach, Drop In, or Other (specify) Location:	This question was not asked in the Administration section of Version 2.	Communities have expressed a desire to better understand where/what access point is completing the VI-SPDAT to better pinpoint where additional training or services may be necessary.
Date of Birth	This information was collected in the Basic Information section in Version 2.	This information is collected in the Administration section in Version 2.
Previous VI-SPDAT completed?	This question was not part of Version 2.	This will help prompt staff to check previous records prior to completing a new VI-SPDAT. <u>Only</u> repeat the triage if major changes have occurred in participant's life.
Ever served in the military?	Many communities had this as a supplemental question to Version 2, but not an Administration question.	Understanding military service can help point people to housing resources and service interventions dedicated to this population and service intervention as well as highlight potential income and benefit options.
VI-SPDAT Score?	This question was not part of Version 2.	This will help better analyze differences in results from previous VI-SPDAT.
Pet(s)?	This was not part of Version 2 with the exception of a handful of communities that we are aware of that added it as a supplemental question.	Analysis has showed there may be a difference in the experience of people with pets from people without pets.
<b>SECTION ONE: PRESENTING NEEDS</b>		
<p>1. Most days can you:</p> <ul style="list-style-type: none"> <li>a. Find a safe place to sleep</li> <li>b. Access a bathroom when you need it</li> <li>c. Access a shower when you need it</li> <li>d. Get food</li> <li>e. Get water or other non-alcoholic beverages to stay hydrated</li> <li>f. Get clothing or access</li> </ul>	Many of these concepts were part of Q. 13. These have been separated into different discrete components and expanded. It has also been moved earlier in the survey to help identify more immediate needs that may benefit from being addressed more quickly.	This question provides information on common needs (most of them daily needs) for survival and wellness.

laundry when you need it g. Safely store your stuff		
<b>SECTION TWO: HOUSING HISTORY &amp; CHRONIC HOMELESSNESS DETERMINATION</b>		
2. How long has it been since you lived in stable, permanent housing?	Same as Version 2.	Necessary for getting an understanding of length of homelessness and chronic status.
3. In the last three years, how many times have you been homeless	Same as Version 2.	Necessary for getting an understanding the experience of homelessness and potential chronic status.
4. <b>IF THE ANSWER TO Q4 IS 4 OR MORE:</b> Thinking about the last three years, if you add up all the months you were homeless, what is the total length of time you have experienced homelessness?	This question was not part of Version 2.	Added to understand total length of time homeless, which is also helpful for determining potential chronic status.
5. Do you have any diagnosed, documented, disabling conditions?	This question was not part of Version 2.	Necessary for getting a preliminary understanding if the person is potentially chronically homeless.
6. Have you ever owned a home or had an apartment lease in your name?	This question was not part of Version 2.	This question helps inform housing history. Furthermore, research has shown that people of color, survivors of intimate partner violence, young people, and transgender-identified households are more likely to have not had ownership or a lease in their name in the past.
7. Have you ever been evicted?	This question was not part of Version 2.	This question helps inform housing history. Furthermore, research has shown that people of color, survivors of intimate partner violence, young people, and transgender-identified households are more likely to have not had ownership or a lease in their name in the past.

**SECTION THREE: VULNERABILITIES AND HOUSING SUPPORT NEEDS**

<p>8. In the last 6 months, how many times have you:</p> <ul style="list-style-type: none"> <li>a. Gone to the emergency room/department</li> <li>b. Taken an ambulance</li> <li>c. Been hospitalized as an inpatient</li> <li>d. Used a crisis service or hotline like suicide prevention or domestic violence</li> <li>e. Talked to police because you witnessed a crime, were the victim of a crime, were the alleged perpetrator of a crime, or because they asked you to move along because of loitering, sleeping in a public place or anything like that</li> <li>f. Stayed one or more night in jail, a holding cell or prison</li> </ul>	<p>Slight amendments to the wording of some of the options to be more straightforward.</p>	<p>To better understand service use, especially in identifying people who are likely frequent users of emergency services.</p>
<p>9. Since you have been homeless:</p> <ul style="list-style-type: none"> <li>a. Have you been beaten up or assaulted</li> <li>b. Have you threatened to harm yourself or harmed yourself</li> <li>c. Have you threatened to beat up or assault someone else</li> <li>d. Has anyone threatened you with violence and/or made you feel unsafe</li> <li>e. Has anyone tried to control you through violence or threats of violence whether that be a stranger, friend, partner, relative or parent</li> </ul>	<p>This is a variation on Q. 5 and Q. 6 of Version 2, with more possibilities added based upon feedback from Domestic and Intimate Partner Violence service providers.</p>	<p>Understanding harm to self or others, as well as threats that others pose to the individual.</p>



<p>10. Do you have any legal stuff going on right now that may result in any of the following:</p> <ul style="list-style-type: none"> <li>a. Being locked up</li> <li>b. Having to pay fines or fees that you cannot afford</li> <li>c. Impact your ability to get housing</li> <li>d. Impact where you could live in your housing</li> </ul>	<p>This is a variation on Q. 7 of Version 2. Several communities, especially service providers participating in re-entry programs indicated it would be helpful to have this question broken down into smaller pieces to help inform service planning.</p>	<p>To understand legal impacts on housing options and locations, and to help service providers plan for how to support people that have a history of incarceration.</p>
<p>11. Have you ever been convicted of a crime that makes it difficult to access or maintain housing?</p>	<p>This question was not part of Version 2.</p>	<p>To understand legal impacts on housing options and locations, and to help service providers plan for how to support people that have a history of incarceration. Furthermore, there is research to suggest people of color are more likely to have been negatively impacted because of mass incarceration.</p>
<p>12. Does anyone trick, manipulate, exploit, or force you to do things you do not want to do?</p>	<p>Similar to Q. 8 from Version 2, with some amendments based upon input from Domestic and Intimate Partner Violence service providers.</p>	<p>To understand the risks of exploitation and its impacts on accessing and maintaining housing. As a triage this can assist with offering supports, safety planning, and referral.</p>
<p>13. Where do you sleep most frequently?</p> <ul style="list-style-type: none"> <li><input type="checkbox"/> Shelters</li> <li><input type="checkbox"/> Transitional Housing</li> <li><input type="checkbox"/> Safe Haven</li> <li><input type="checkbox"/> Couch Surfing</li> <li><input type="checkbox"/> Outdoors</li> <li><input type="checkbox"/> Car</li> <li><input type="checkbox"/> Other</li> </ul>	<p>Same as Version 2 with the exception that “Car” has been added as a possible response, which was one of the most common “other” responses in Version 2. Moved question from housing history to vulnerabilities and housing support needs section.</p>	<p>It is important and necessary to understand where the person is sleeping to help understand their experience of homelessness and, in some instances, better address immediate needs, particularly related to safety and risk.</p>
<p>14. Do you ever do things that may be considered to be risky or harmful like run drugs, share a needle, do sex work, or anything like that?</p>	<p>Similar to Q. 9 from Version 2, with slight amendments to language based upon findings in focus groups and interviews with people with lived experience.</p>	<p>This question helps better understand vulnerabilities associated with involvement in higher risk behavior. Responses may also identify opportunities for referrals for specialized harm reduction services and initiate harm reduction discussions.</p>

15. Is there anybody that thinks you owe them money like a family member, friend, past landlord, business, bookie, dealer, bank, credit card company, utility company or anyone like that?	Similar to Q. 10 of Version 2 with some different examples based upon input from service providers and people with lived experience.	This question helps us understand money management issues and can also be helpful for service planning related to financial security and financial future.
16. Do you get any money from the government, a job, working under the table, day labor, an inheritance or a pension, or anything like that?	Similar to Q. 11 of Version 2 with some slightly different wording.	This question helps us understand personal administration and money management and can also be helpful for service planning related to financial security and financial future.
17. Do you ever gamble with money you cannot afford to lose or have debts associated with gambling?	This question was not part of Version 2.	This question helps us understand personal administration and money management and can also be helpful for service planning related to financial security and financial future.
18. Do you have planned activities, other than activities for survival, at least four days per week that make feel you happy and fulfilled?	Similar to Q. 12 of Version 2 with more intentional wording around the activities not being related to survival, and that they occur most days of the week.	This question reveals whether or not there are meaningful daily activities, aside from activities related to homelessness management or survival, which has a direct relationship with wellness for most people and can directly impact housing stability.
19. Do you have a collection of belongings that get in the way with your ability to access services or housing?	This question was not part of Version 2.	Collecting and/or hoarding behavior can have a direct impact on service access and planning housing supports. Lack of available storage in a community for belongings, even when there is not collecting or hoarding behavior can impact service access.
20. Would you say that your current homelessness was caused by any of the following: a. A relationship that broke down b. An unhealthy or abusive relationship	Similar to Q. 14 of Version 2 with the reasons separated out.	Helps understand social relationships and networks that may have contributed to homelessness, helps screen for Domestic and Intimate Partner Violence, and can be helpful for service planning and guest management moving forward.

c. Because family or friends caused you to lose your housing		
21. Do most of your family and friends have stable housing?	This question was not part of Version 2.	This question is better aligned to the SPDAT and research that shows that people with stably housed friends and family may have accommodation options outside the homelessness service delivery system. This question also gives insight into the households personal relationships and networks that may contribute to community integration and housing stability once housed.
22. Are you 60 years of age or older?	This question was identified from age and date of birth data provided in the administration section of Version 2.	People who are 60 years of age or older are more vulnerable than their younger counterparts.
23. Do you have any physical or mental health issues or other disabilities such that you would require assistance to access or keep housing?	This question condenses a complete section from Version 2.	Within Fair Housing expectations, it is okay to understand if people have physical or mental health issues or disabilities, but it is not legally okay to know about and prioritize based upon specific aspects of these issues.
24. Are you currently pregnant?	Same as Q. 20 of Version 2 although the 'For Female Respondents Only' has been removed.	Pregnancy increases medical vulnerability and knowing this information can help inform service planning and referrals.
25. Do you use alcohol or drugs in a way that it:  a. Impacts your life in a negative way most days b. Makes it hard to access housing c. Would require assistance to maintain housing	A variation on Q. 21 and 22 of Version 2.	Helps understand the impacts substance use may have on current life and future service planning needs to support harm reduction and housing stability.



<p>26. Are there any medications that, for whatever reason:</p> <ul style="list-style-type: none"> <li>a. A doctor said you should be taking but you are not taking</li> <li>b. You sell instead of taking</li> <li>c. You use in a way other than how it is prescribed</li> <li>d. You find impossible to take, forget to take or choose not to take</li> </ul>	<p>A variation on Q. 25 and 26 from Version 2.</p>	<p>Medication management can be helpful for improving housing stability and can be indicative of specific vulnerabilities related to health and wellness.</p>
<p>27. Has your homelessness been caused by any recent or past trauma or abuse?</p>	<p>A simplified take on Q. 27 from Version 2, improved through input with people with lived experience.</p>	<p>Abuse and trauma are specific and prevalent vulnerabilities that impact the trajectory into homelessness and the recovery from homelessness through trauma informed care and possible referral to trauma specific supports and services.</p>