Being Awesome at the VI-SPDAT

Everything You Need to Know
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.
Funnel of homeless services

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)

Not homogeneous
## In the Beginning...

<table>
<thead>
<tr>
<th>Vulnerability Index (VI)</th>
<th>Service Prioritization Decision Assistance Tool (SPDAT)</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Built upon the research of Drs. O’Connell and Hwang regarding medical vulnerability</strong></td>
<td><strong>Built upon review of 13 existing tools, client interviews, case manager interviews, academic panel, and 200+ published journal articles + other government reports + tools</strong></td>
</tr>
<tr>
<td>and risk of mortality within homeless populations</td>
<td><strong>Made popular through coordinated access and common assessment approaches for Housing First programs</strong></td>
</tr>
<tr>
<td><strong>Made popular first through Common Ground and then the 100K Homes Campaign</strong></td>
<td><strong>Made popular through coordinated access and common assessment approaches for Housing First programs</strong></td>
</tr>
<tr>
<td><strong>In place across more than 200 communities participating in the 100K Homes Campaign</strong></td>
<td><strong>In place in over 145 communities focused on prioritization for Housing First and Rapid Re-Housing programs, and/or system prioritization.</strong></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.
- Built into all major HMIS 2014.
Difference Between the Full SPDAT and VI-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...

<table>
<thead>
<tr>
<th></th>
<th>Has activities related to employment, volunteering, socio-recreation, etc. that provide fulfillment intellectually, socially, physically, emotionally, spiritually, etc., occupying most times of day and most days of the week, and which provide a high degree of personal satisfaction.</th>
</tr>
</thead>
<tbody>
<tr>
<td>0</td>
<td>Has some activities related to employment, volunteering, socio-recreation, etc. that provide some fulfillment intellectually, socially, physically, emotionally, spiritually, etc., occupying some times of the day and/or some days of the week, which provide a good degree of personal satisfaction.</td>
</tr>
<tr>
<td>1</td>
<td>Attempting activities that may provide fulfillment intellectually, socially, physically, emotionally, spiritually, etc. but not occupying most days or most parts of any given day, and not yet providing a good degree of personal satisfaction.</td>
</tr>
<tr>
<td>2</td>
<td>Discussing or in early stages of attempting activities that may provide fulfillment intellectually, socially, physically, emotionally, spiritually, etc. but not fully committed. At times disengaged from activities, and activities are not yet occupying most days, nor providing personal satisfaction.</td>
</tr>
<tr>
<td>3</td>
<td>Not engaged in any meaningful daily activities that provide fulfillment intellectually, socially, physically, emotionally, spiritually, etc. Very little to no personal satisfaction.</td>
</tr>
<tr>
<td>4</td>
<td></td>
</tr>
</tbody>
</table>

---

**Do you have any planned activities each day, other than just surviving, that bring you happiness and fulfillment?**

- Yes
- No
- Refused


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.

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.
Setting up the VI-SPDAT

• 10 minutes or less

• Yes, No or One Word Answers

• It is a survey

• Questions can be skipped or refused

• Clarity can be provided.

• Consent to information being captured and photo being taken

• Honesty is important
My name is Iain and I work for a group called OrgCode. I have a 10 minute survey I would like to complete with you. The answers will help us determine how we can go about supporting and housing you. Most questions only require a Yes or No. Some questions require a one-word answer. I’ll be honest, some questions are personal in nature, but know you can skip or refuse any question. The information collected goes into (DATA PRIVACY REQUIREMENTS).

Along the way if you do not understand a question or if I think maybe the question is being misunderstood, we can make sure you know what the question is about. If any question isn’t clear to you, just let me know.

One last thing that we should chat about. I’ve been doing this long enough to know that some people will tell me what they want me to hear rather than telling me - or even themselves - the truth. It’s up to you, but the more honest you are the better we can figure out how best to support you. If you are dishonest with me, really you are just being dishonest with yourself. So, please answer as honestly as you feel comfortable doing.
Wellness

Socialization & Daily Functions

Risks

History of Housing

Family Unit
<table>
<thead>
<tr>
<th>Interviewer’s Name</th>
<th>Agency</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>☐ TEAM  ☐ STAFF  ☐ VOLUNTEER</td>
</tr>
<tr>
<td>Date</td>
<td>Time</td>
</tr>
<tr>
<td>Location</td>
<td></td>
</tr>
</tbody>
</table>

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

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

<table>
<thead>
<tr>
<th>Nickname</th>
<th>Social Security Number</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>How old are you?</th>
<th>What’s your date of birth?</th>
<th>Has Consented to Participate</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td>☐ YES ☐ NO</td>
</tr>
</tbody>
</table>

If 60 years or older, then score 1.

<table>
<thead>
<tr>
<th>Pre-screen Score</th>
</tr>
</thead>
</table>

PRE-SCREEN GENERAL INFORMATION SUBTOTAL
History of Housing & Homelessness
## A. HISTORY OF HOUSING & HOMELESSNESS

<table>
<thead>
<tr>
<th>QUESTIONS</th>
<th>RESPONSE</th>
<th>REFUSED</th>
<th>Prescreen Score</th>
</tr>
</thead>
<tbody>
<tr>
<td>If the person has experienced two or more cumulative years of homelessness, and/or 4+ episodes of homelessness, then score 1.</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>1. What is the total length of time you have lived on the streets or in shelters?</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>2. In the past three years, how many times have you been housed and then homeless again?</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

**PRE-SCREEN HOUSING AND HOMELESSNESS SUBTOTAL**
Let’s Break it Down

Total length of time you have lived on the streets or in shelters.

• Cumulative, not consecutive.

• This is homelessness over a lifetime, not just the current episode of homelessness.

• You can add other types of homelessness after stating on the streets or in shelter.
Let’s Break it Down

In the past three years, how many times have you been housed and then homeless again.

• Count back the three years out loud.

• Count each episode of homelessness, including the present one.

• Housing needs to be “permanent” housing.
Risks

Harm to Self or Others

Legal Issues

Involvement in High Risk/Exploitive Situations

Managing Tenancy

Interactions with Emergency Services
B. RISKS

*SCRIPT*: I am going to ask you some questions about your interactions with health and emergency services. If you need any help figuring out when six months ago was, just let me know.

<table>
<thead>
<tr>
<th>QUESTIONS</th>
<th>RESPONSE</th>
<th>REFUSED</th>
<th>Prescreen Score</th>
</tr>
</thead>
<tbody>
<tr>
<td>If the total number of interactions across questions 3, 4, 5, 6 and 7 is</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>equal to or greater than 4, then score 1.</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>3. In the past six months, how many times have you been to the emergency</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>department/room?</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>4. In the past six months, how many times have you had an interaction</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>with the police?</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>5. In the past six months, how many times have you been taken to the</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>hospital in an ambulance?</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>6. In the past six months, how many times have you used a crisis service,</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>including distress centers or suicide prevention hotlines?</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>7. In the past six months, how many times have you been hospitalized as</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>an in-patient, including hospitalizations in a mental health hospital?</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>If YES to questions 8 or 9, then score 1.</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>8. Have you been attacked or beaten up since becoming homeless?</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>9. Threatened to or tried to harm yourself or anyone else in the last</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>year?</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
Let’s Break it Down

Put six months in context.

• Recall is more accurate when time is put into context.

• Count back six months ago out loud.

• For each question either state the date of six months ago or the event (e.g., Christmas) of six months ago that they may remember.
Let’s Break it Down

**Emergency department/room.**

- Is only concerned with the person being interviewed and the times they have sought health services at an emergency department/room.

- Visits for a purpose other than health care (for example, to warm up on a cold night) do not count.
Let’s Break it Down

**Interactions with police.**

- Has to be for the purpose of law enforcement:
  - They witnessed an event.
  - They were the victim of an event.
  - They are the alleged perpetrator.
- Casual engagement (for example, a simple greeting) does not count, but being asked to move along does.
Let’s Break it Down

Taken to the hospital in an ambulance.

• Is only concerned with the person receiving health care and being transported to an emergency department/room.

• Riding along with a friend or family member does not count.
Let’s Break it Down

Used a crisis service including a distress center or suicide prevention hotline.

• Any type of crisis service counts whether that is in person, over the phone, or even through chat features online with trained volunteers/professionals.

• Examples beyond distress centers or suicide prevention hotlines include rape crisis services, youth runaway services, bad date services, etc.
Let’s Break it Down

Hospitalized as an in-patient, including hospitalizations in a mental health hospital.

• Count the number of hospitalizations, not the length of hospitalizations.

• In some rare instances a person will be admitted and then go AWOL. Those count as hospitalizations.
Let’s Break it Down

Have you been attacked or beaten up since becoming homeless.

• Includes all instances of attacks (where the beating, assault, rape, robbery, etc. may have been unsuccessful) as well as those instances where violence has occurred.

• This question focuses on these events occurring while homeless.
Let’s Break it Down

Threatened to or tried to harm yourself or anyone else in the last year.

• Threats are any type of verbal or written presentation of possible harm.

• Includes all types of self-harming activities - whether it was an attempt or actual harm.

• Includes all types of attempted and actual harm to others.
<table>
<thead>
<tr>
<th>Question</th>
<th>YES</th>
<th>NO</th>
<th>REFUSED</th>
<th>Prescreen Score</th>
</tr>
</thead>
<tbody>
<tr>
<td>If YES to question 10, then score 1.</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>10. Do you have any legal stuff going on right now that may result in you being locked up or having to pay fines?</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
<td></td>
</tr>
<tr>
<td>If YES to questions 11 or 12; OR if respondent provides any answer OTHER THAN &quot;Shelter&quot; in question 13, then score 1.</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>11. Does anybody force or trick you to do things that you do not want to do?</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
<td></td>
</tr>
<tr>
<td>12. Ever do things that may be considered to be risky like exchange sex for money, run drugs for someone, have unprotected</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
<td></td>
</tr>
<tr>
<td>sex with someone you don’t really know, share a needle, or anything like that?</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>13. I am going to read types of places people sleep. Please tell me which one that you sleep at most often. (Check only one.)</td>
<td></td>
<td></td>
<td></td>
<td>☐ Shelter</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td>☐ Street, Sidewalk or Doorway</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td>☐ Car, Van or RV</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td>☐ Bus or Subway</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td>☐ Beach, Riverbed or Park</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td>☐ Other (SPECIFY):</td>
</tr>
</tbody>
</table>

**PRE-SCREEN RISKS SUBTOTAL**
Let’s Break it Down

Legal stuff going on right now that may result in you being locked up or having to pay fines.

• “Legal stuff” is a deliberate, all-encompassing term.

• Anyone with conditions of their release (sex offender registry, probation, parole) have legal issues.

• Key is that the legal issues would have to result in being incarcerated or having to pay fines.

• Minor offences that are likely to result in community service and not incarceration or fine payment do not count.
Let’s Break it Down

Force or trick you to do things you do not want to do.

- “Force or trick” may include force, threats of removing access to basic needs or loved ones, changing the conditions of an agreement, and/or setting people up in situations.

- Key here is that it was not of the persons own choosing to plan or participate in the activity that they are engaged in.
Let’s Break it Down

**Ever do things that may be considered to be risky... “or anything like that”**

- Deliberately does not say “risky things” or “things that are risky”

- This is the first instance where people are most likely to reveal more information than you are seeking. Pause the survey. Remind them you do not need specifics.

- Put intentional emphasis on “or anything like that” at the end of the question as a verbal cue that these are items that are linked together.
Let’s Break it Down

I am going to read types of places people sleep.

- Only read the ones that are relevant to your local context. For example, if you do not have a subway, do not read “subway” aloud.

- Everything other than shelter - including doubling up - is considered higher risk in this question.
### C. SOCIALIZATION & DAILY FUNCTIONS

<table>
<thead>
<tr>
<th>QUESTIONS</th>
<th>YES</th>
<th>NO</th>
<th>REFUSED</th>
<th>Prescreen Score</th>
</tr>
</thead>
<tbody>
<tr>
<td>If YES to question 14 or NO to questions 15 or 16, score 1.</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>14. Is there anybody that thinks you owe them money?</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>15. Do you have any money coming in on a regular basis, like a job or government benefit or even working under the table, binning or bottle collecting, sex work, odd jobs, day labor, or anything like that?</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>16. Do you have enough money to meet all of your expenses on a monthly basis?</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>If NO to question 17, score 1.</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>17. Do you have planned activities each day other than just surviving that bring you happiness and fulfillment?</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>If YES to questions 18 or 19, score 1.</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>18. Do you have any friends, family or other people in your life out of convenience or necessity, but you do not like their company?</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>19. Do any friends, family or other people in your life ever take your money, borrow cigarettes, use your drugs, drink your alcohol, or get you to do things you really don’t want to do?</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>OBSERVE ONLY. DO NOT ASK! If YES, score 1.</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>20. Surveyor, do you detect signs of poor hygiene or daily living skills?</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

**PRE-SCREEN SOCIALIZATION & DAILY FUNCTIONS SUBTOTAL**
Let’s Break it Down

Is there anybody that thinks you owe them money.

• This is intentionally a different question than “do you owe anybody money” as it is about risks of indebtedness.

• Whether a third party thinks the person being surveyed owes money is more important than whether the person being surveyed agrees with that claim.
Let’s Break it Down

Do you have money coming in on a regular basis like a job... “or anything like that”

- This is asking about formal and informal sources of income - the things one would tell the IRS about and the things that they would not.

- You can customize the language to local terms on activities.

- As stated previously, put particular emphasis on how you ask “or anything like that”.
Let’s Break it Down

Money to meet all your expenses on a monthly basis.

• This means right now, while homeless. It is not a question about whether they are hypothetically housed.

• There is intentionally no parameters on what constitutes an expense. An expense is what/how they see it, without distinction on the part of a surveyor of whether or not that is an essential use of money or not.
Let’s Break it Down

Planned activities each day other than just surviving that bring you happiness and fulfillment.

- Activities are not ad hoc in this situation.
- Each day means every day of the week.
- Happiness and fulfillment are self-defined.
- Broad understanding of fulfillment - spiritual, social, recreational, physical, intellectual, etc.
Let’s Break it Down

Friends, family or other people in your life out of convenience or necessity, but you do not like their company.

• These are not people out of their own choosing necessarily.

• The reason why they do not like their company can be broadly interpreted - victimization, abuse, threats, annoying, manipulative, boisterous, different interests, etc.
Let’s Break it Down

Friends, family or other people in your life ever take your money...or get you to do things you really don’t want to do.

• Examines impacts of friends, family and other people in the person’s life.

• The reason or purpose of why they get the person to do things they really don’t want to do is irrelevant.
Let’s Break it Down

**Surveyor, do you observe signs of poor hygiene of daily living skills.**

- If the person is not in person while the survey is being completed (over the phone) there are supplemental questions that can be used.

- If doing it in person, you are getting a sense of:
  - are clothes in a reasonable state of repair and appropriate for the season
  - is the person malodorous or otherwise in need of bathing
  - the state of their encampment if they are living outdoors
Wellness

Mental Health & Wellness and Cognitive Functioning

Physical Health & Wellness

Substance Use

Medication

Experience of Abuse/ Trauma
### D. WELLNESS

#### QUESTIONS

<table>
<thead>
<tr>
<th>If Does Not Go For Care, score 1.</th>
<th>RESPONSE</th>
<th>Prescreen Score</th>
</tr>
</thead>
</table>
| 21. Where do you usually go for healthcare or when you're not feeling well? | Hospital  
Clinic  
VA  
Other (specify) | | | |
| | | Does not go for care | |

For EACH YES response in questions 22 through 25 (Medical Conditions), score 1.

Do you have now, have you ever had, or has a healthcare provider ever told you that you have any of the following medical conditions:

<table>
<thead>
<tr>
<th></th>
<th>YES</th>
<th>NO</th>
<th>REFUSED</th>
<th>Medical Conditions</th>
</tr>
</thead>
<tbody>
<tr>
<td>22. Kidney disease/End Stage Renal Disease or Dialysis</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>23. History of frostbite, Hypothermia, or Immersion Foot</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>24. Liver disease, Cirrhosis, or End-Stage Liver Disease</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>25. HIV+/AIDS</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

If YES to any of the conditions in questions 26 to 34, then mark “X” in Other Medical Condition column.

<table>
<thead>
<tr>
<th></th>
<th>YES</th>
<th>NO</th>
<th>REFUSED</th>
<th>Other Medical Conditions</th>
</tr>
</thead>
<tbody>
<tr>
<td>27. Heart disease, Arrhythmia, or Irregular Heartbeat</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>28. Emphysema</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>29. Diabetes</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>30. Asthma</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>31. Cancer</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>32. Hepatitis C</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>33. Tuberculosis</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

**OBSERVATION ONLY – DO NOT ASK:**

<p>| | |</p>
<table>
<thead>
<tr>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>34. Surveyor, do you observe signs or symptoms of a serious health condition?</td>
<td></td>
</tr>
</tbody>
</table>
Let’s Break it Down

Where do you usually go for health care when you are not feeling well.

• We are most concerned with those that do not seek care.

• Pay attention to how they respond to “other” as the response may actually be indicating that they do not seek care.
Let’s Break it Down

Do you have now, have you ever had, or has a health care provider ever told you that you have any of the following medical conditions...

• These are the only medical conditions where the literature demonstrates increased risk of morbidity. Do NOT add other health conditions to this list.

• You may not know what a particular health condition is. If the person has it, they will know. You just need to know how to say it.

• The first four are each worth a point each. They are weighted higher than all other health conditions. The presence of each one of these increases the risk of morbidity.

• The remaining health conditions present risks for tri-morbidity, but are not a considerable concern in and of itself to score a point.

• Do NOT try to diagnose anyone.
Let’s Break it Down

**Surveyor, do you observe signs or symptoms of a serious health condition.**

- There are supplemental questions if you are doing the survey over the phone instead of in person.

- Examples of the sort of thing to observe:
  - Open wounds beyond superficial lacerations.
  - Blood and pus.
  - Exposed bones.
  - Rotting flesh.
  - Bracelet from a recent hospital admission.
  - Advanced medical apparatus like an oxygen tank.
<table>
<thead>
<tr>
<th>Question</th>
<th>YES</th>
<th>NO</th>
<th>REFUSED</th>
</tr>
</thead>
<tbody>
<tr>
<td>35. Have you ever had problematic drug or alcohol use, abused drugs or alcohol, or told you do?</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
</tr>
<tr>
<td>36. Have you consumed alcohol and/or drugs almost every day or every day for the past month?</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
</tr>
<tr>
<td>37. Have you ever used injection drugs or shots in the last six months?</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
</tr>
<tr>
<td>38. Have you ever been treated for drug or alcohol problems and returned to drinking or using drugs?</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
</tr>
<tr>
<td>39. Have you used non-beverage alcohol like cough syrup, mouthwash, rubbing alcohol, cooking wine, or anything like that in the past six months?</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
</tr>
<tr>
<td>40. Have you blacked out because of your alcohol or drug use in the past month?</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
</tr>
<tr>
<td><strong>OBSERVATION ONLY – DO NOT ASK:</strong></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>41. Surveyor, do you observe signs or symptoms or problematic alcohol or drug abuse?</td>
<td>☐</td>
<td>☐</td>
<td></td>
</tr>
</tbody>
</table>
Let’s Break it Down

Ever had problematic drug or alcohol use, abused drugs or alcohol, or told you do.

• Refers to the person’s entire lifetime.

• It does not matter who told them they have this issue.

• “Abused” in reference to substances occurs only in this one instance for all of the SPDAT materials.
Let’s Break it Down

Consumed alcohol and/or drugs almost every day or every day for the past month

• The last 30 day period is of interest.

• “Almost every day” should be interpreted liberally - more days per week using than not using.
Let’s Break it Down

**Used injection drugs or shots in the last six months.**

- This does NOT include injection medications unless using in a way other than how prescribed.
- Focus is on previous 180 day period.
Let’s Break it Down

Been treated for drug or alcohol problems and returned to drinking or using drugs.

• At any point in their lifetime.

• There is no prescribed definition of “treated”.
Let’s Break it Down

**Used non-beverage alcohol like... “or anything like that”**

- Includes any alcohol product not intended for human consumption.
- Place emphasis, as previously discussed, on “or anything like that”
Let’s Break it Down

Blacked out because of alcohol or drug use in the past month.

• “Blacked out” includes any type of involuntary sleep/consciousness.

• May also be referred to as “sleeping it off”.
Let’s Break it Down

**Surveyor, do you observe any signs or symptoms of problematic drug or alcohol use.**

- Supplementary questions can be used if doing this over the phone.

- If in person:
  - Morning shakes or morning intoxication.
  - Abscess or “track marks” around punctures/prick marks.
  - Blistering/sores on lips at the front with co-occurring blackening of the gums and teeth at the same part of the mouth.
  - Visibly seeing rig, cooker, needles, etc.
  - Visibly seeing considerable empties beyond what was collected for recycling.
<table>
<thead>
<tr>
<th>Question</th>
<th>YES</th>
<th>NO</th>
<th>REFUSED</th>
</tr>
</thead>
<tbody>
<tr>
<td>If any response is YES in questions 42 through 48, score 1 in the Mental Health Column.</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>42. Ever been taken to a hospital against your will for a mental health reason?</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>43. Gone to the emergency room because you weren’t feeling 100% well emotionally or because of your nerves?</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>44. Spoken with a psychiatrist, psychologist or other mental health professional in the last six months because of your mental health – whether that was voluntary or because someone insisted that you do so?</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>45. Had a serious brain injury or head trauma?</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>46. Ever been told you have a learning disability or developmental disability?</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>47. Do you have any problems concentrating and/or remembering things?</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>OBSERVATION ONLY – DO NOT ASK:</strong></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>48. Surveyor, do you detect signs or symptoms of severe, persistent mental illness or severely compromised cognitive functioning?</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

*If the Substance Use score is 1 AND the Mental Health score is 1 AND the Medical Condition score is at least a 1 OR an X, then score 1 additional point for tri-morbidity.*

<table>
<thead>
<tr>
<th>Question</th>
<th>YES</th>
<th>NO</th>
<th>REFUSED</th>
</tr>
</thead>
<tbody>
<tr>
<td>If YES to question 49, score 1.</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>49. Have you had any medicines prescribed to you by a doctor that you do not take, sell, had stolen, misplaced, or where the prescriptions were never filled?</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Question</th>
<th>YES</th>
<th>NO</th>
<th>REFUSED</th>
</tr>
</thead>
<tbody>
<tr>
<td>If YES to question 50, score 1.</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>50. Yes or No – Have you experienced any emotional, physical, psychological, sexual or other type of abuse or trauma in your life which you have not sought help for, and/or which has caused your homelessness?</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

**Pre-Screen Wellness Subtotal**
Let’s Break it Down

**Taken to a hospital against your will for a mental health reason.**

- Any involuntary transport to a hospital for mental health - regardless of who did it.

- Whether any treatment, engagement, diagnosis, or support was provided once at the hospital does not matter.
Let’s Break it Down

Gone to the emergency room because of your nerves or because you weren’t feeling 100% well emotionally.

- Any voluntary engagement with a hospital because of a perceived lack of mental wellness.
Let’s Break it Down

Spoken with a psychiatrist, psychologist…in the last six months…voluntary or because some insisted that you do so.

• Any type of mental health professional.

• Concerned with last 180 days. Counting back can help.

• Includes voluntary and involuntary engagement.

• Engagement has to be because of a mental health concern.

• Outcome of the engagement is irrelevant.
Let’s Break it Down

**Serious brain injury or head trauma**

- Any and all types of injuries to the head and brain.
- No assessment of what constitutes “serious” in this context.
Let’s Break it Down

Been told you have a learning disability or developmental disability

- Who told them this information is irrelevant at this point.

- Whether they agree with the assessment of what they were told is irrelevant.
Let’s Break it Down

Problems concentrating or remembering things

• The context within which they struggle to concentrate is irrelevant

• The length of time the memory is impacted (short term versus long term) is irrelevant.
Let’s Break it Down

Surveyor do you detect signs or symptoms of severe, persistent mental illness or compromised cognitive functioning

• Supplemental questions if doing this over the phone.

• Otherwise looking for:
  
  • Repeated questions/interruptions about what the survey is about after it has been explained numerous times.

  • Difficulty communicating in English (when it is known that they speak English)

  • Communicating with objects or persons not present during the survey

  • Bracelet from a recent hospital admission for a mental health purpose.
Let’s Break it Down

Medicines prescribed by a doctor that you do not take, did not fill, sell...

- Has to be prescribed by a medical professional to the person that is supposed to take the medication for the purpose it was prescribed.
Let’s Break it Down

Yes or No - Have you experienced any emotional, physical, psychological, sexual or other type of abuse or trauma in your life which you have not sought help for and/or which has caused your homelessness.

• You do NOT want any details.

• Written by experts in abuse and trauma. Trying to find out about the presence of an issue without re-traumatizing.

• Two different parts of the question:
  • Did they not seek help for it? AND/OR
  • Do they feel it caused their homelessness?
Can we add other questions?

• You can ask whatever else you want to ask, it just cannot impact the scoring.

• Examples of additional questions:
  
  • Safety screening up front for domestic and intimate partner violence.
  
  • Military service.
  
  • Mobility issues.
  
  • Present amount and source of income.
Dos and Don’ts

• **DO:**
  - Explain what the survey does.
  - Encourage people to be honest.
  - Provide clarification when/if requested.

• **DON’T:**
  - Tell people there is a number or refer to them as a number.
  - Try to serve or case manage while doing the survey.
  - Trick or coerce people to do the survey.
  - Promise anything as a result of the survey.
  - Lead people to believe there is a waiting list.
  - Change wording or scoring.
  - Change the order of questions.
  - Complete a survey without informed consent or knowledge or in her/his absence.