

Guide to Conducting the Coordinated Access for Adults and Families Assessment

What are the VI-SPDAT & F-VI-SPDAT?

The Vulnerability Index – Service Prioritization Decision Assistance Tool (VI-SPDAT) and Family VI-SPDAT (F-VI-SPDAT) are tools created by Community Solutions and OrgCode Consulting, Inc. to help determine the vulnerability of households experiencing homelessness and direct them to appropriate resources. The Department of Housing and Urban Development (HUD) requires communities to use a comprehensive and standardized assessment tool as part of coordinated access. These tools meet that requirement and help us prioritize the most vulnerable households for limited housing resources. They are used in communities across the country for this purpose.

What is the purpose of this guide?

Acknowledging that these tools include deeply personal and potentially triggering questions, this guide provides strategies for conducting them in a way that is more trauma-informed and responsive to the person you're working with. This is a living document—we plan to develop it over time based on lessons learned and the expertise and experiences of those engaging with the tool. With questions, feedback and suggestions, please reach out to coordinated access staff at the Joint Office of Homeless Services (<mailto:adultca@multco.us>).

Strategies for a trauma-informed approach to these tools

This list of strategies is rooted in the principles of Assertive Engagement and trauma-informed care, and intended to support providers in thinking through how to conduct these assessments. This is an incomplete list—we invite you to help us develop it over time, and appreciate that strategies will vary across organizations and communities.

Throughout the process

- **Act like you have all day** – Be present during the assessment process and work to connect with the participant empathetically. If you act like you have all day, you can often get through the process more quickly and in a way that helps to develop rapport and trust.
- **Find a safe and confidential space** - Conduct the assessment in a private, confidential space (whatever that looks like in the particular work space or environment). Check in with the participant to ask whether they're comfortable completing it in that space, or would rather complete it elsewhere.
- **Check in throughout** – Check in with the participant about how they are doing throughout the process (e.g. ask if they would like a break, water, etc.).

Before the assessment

- **Take three minutes** - Spend time (even if it's only 3 minutes) before the assessment just checking in with and listening attentively to the participant.
- **Ask for permission** – Ask for permission to conduct the assessment before starting the process.

- **Be upfront and transparent** - Inform the participant about what the tool is (i.e. used for coordinated access process), what kinds of questions are included, and why these questions are being asked. Give them a heads up that the assessment includes some really personal questions, that they can stop at any time, and that they can skip a question if they don't want to answer it. Walk the person through the Release of Information and explain what will be shared with others and why.
- **Offer translation when needed** - Learn about the resources available at your organization and in the community to provide translation, and provide a translator for the assessment process if needed. Whenever possible, offer to connect the participant with a provider that speaks their language and can conduct the assessment. The tool is available in Spanish, Russian, Chinese and Vietnamese at ahomeforeveryone.net/coordinatedaccess.

During the assessment

- **Adjust the questions** - Think about making small adjustments to the way that some of the questions are asked, while maintaining the intent of the questions. There are examples of what this could look like included in this document.
- **Avoid asking the same question twice** – If the participant has already provided an answer to the specific question, you can refer back to that. For example, the assessment asks about the number of times someone has been homeless in the past three years, and the same question is asked as part of the pre-screen before the assessment.
- **Skip questions when appropriate** – Remind the participant that they do not have to answer a question if they demonstrate discomfort. You can also consider skipping questions after the participant has gotten the point for the section. Use this strategy with care – it's important that you understand how scoring works so that the participant isn't disadvantaged, and in general it's important to complete as many of the questions as possible as the information is also used to inform the process of matching people to appropriate housing resources (in particular the questions included in the Wellness Section).
- **Demonstrate non-judgment** - Remind the participant throughout that it's okay to be as open and honest as possible and that you aren't there to judge. Demonstrate non-judgment and empathy through listening, body language, acknowledging the participant as the expert in their own life, etc.

After the assessment

- **Be upfront and transparent** - Explain what will happen next and be upfront about the fact that there is no guarantee of a housing resource from this process.
- **Ask-Offer-Ask** - Ask the person if they are interested in learning about other coordinated access processes or specific resources they may be eligible for and if they are, use the assessment as an opportunity to provide some of that information.
- **Update over time** – Ask the participant to let you know if there is any significant change to their situation, or if their contact information changes. Update the assessment as you learn more about the participant that may impact their eligibility.

Overview of assessment questions

This table includes many of the pre-screen questions along with the questions included on the VI-SPDAT and F-VI-SPDAT. The second column provides some examples of alternative ways to ask the question, and the third column provides important details about the intent of the question. Questions that appear in both the adult and family tool are written as found on the adult tool (the questions on the family tool are the same, but with language that includes the family in addition to the person being assessed). Questions that are only found on the family tool are also included. ***Bolded questions are especially challenging or sensitive questions, so please pay attention to these questions, same alternatives, and notes/context.**

Basic household and eligibility questions (pre- VI-SPDAT / F-VI-SPDAT)		
Question	Sample alternatives	Notes/Context
US Military Veteran	Have you ever served in the United States Armed Forces (Army, Navy, Air Force, Marine Corps, or Coast Guard) or been called into active duty by the National Guard or as a Reservist?	People who have served may not identify as Veterans. We've found the alternative way of asking the question more effective.
Gender	<p>What is your gender?</p> <p>How do you identify your gender?</p> <p>Note: participants can select one or more gender identities (i.e. a transgender female can select both "transgender" and "female" or just one)</p>	<p>Cisgender: gender identity corresponds with the sex the person was assigned at birth</p> <p>Transgender: gender identity does not correspond to the sex assigned at birth</p> <p>Non-binary, genderfluid, agender, culturally specific gender: gender identify that does not correspond to masculine or feminine gender norms</p> <p>Questioning: a process of discovery and exploration about their gender identity, gender expression, or a combination thereof.</p>
<p>Notes on asking gender identity (taken from FY 2022 HUD HMIS Data Standards Manual)</p> <p>HMIS Users and data entry staff should be sensitive to persons who do not identify as a female, or as a male, or as transgender.</p> <p>Staff observations should never be used to collect information on gender. Provide all options to every client. Even if staff thinks they can guess a client's gender, every client must be asked for their self-reported information. If they refuse to give it or say they don't know, do not make a selection other than "Client doesn't know" or "Client refused" on the client's behalf. <i>Gender</i> does not have to match legal documents and clients may not be asked about medical history or other information to try to determine the person's gender. Simply asking, "Which of these genders best describes how you identify?" is appropriate and focuses on the person's own internal knowledge of their gender.</p> <p>If a client does not understand what a particular gender response may mean, the definitions below can be provided. The availability of these options is</p>		

not intended to indicate that transgender individuals are expected to disclose their status; each response is provided as an option in case an option (or more than one option) are better suited to a client’s preferred terminology, needs, or situation. Clients may select as many responses to the Gender field as they would like to, with up to a total of five options possible for a client's preferred identity, need or situation. However, a response of 'Client doesn't know' should not be used interchangeably with the response option 'Questioning.' 'Questioning' is about exploring one’s gender identity. 'Client doesn't know' should only be selected when a client does not know their gender from the options available, including 'Questioning.' Additionally, 'Client doesn't know,' 'Client refused,' and 'Data not collected' are not valid in conjunction with any other response.

If a client discloses being transgender, staff should ask if the client prefers to have the HMIS record reflect the client’s transgender status. For instance, if a client identifies as a transgender male but they do not want their transgender identity recorded in the HMIS, the staff person would select ‘Male’ instead of both 'Male' and 'Transgender.’

When enrolling a client who already has a record in the HMIS, verify that gender information is complete and accurate -- and correct it if it is not. Clients may report different gender identities or present different gender expressions at different projects within the same CoC. This may be because their gender identity has changed or because they experience a different sense of safety at different projects. If staff are working with a client who reports a gender identity that differs from the HMIS record, staff should ensure that the client understands and is comfortable with their information being updated across all projects prior to making any changes. Clients decide to which projects they will disclose potentially sensitive information. Project staff should enter the self-reported information as directed by the client.

Race	What is your race? How do you identify your race? Note: participants can select one or more races	
Ethnicity	What is your ethnicity? How do you identify your ethnicity?	

Notes on asking racial and ethnic identity (taken from FY 2022 HUD HMIS Data Standards Manual)

When enrolling a client who already has a record in the HMIS, verify that race/ethnicity information is complete and accurate and correct it if it is not. Staff observations should never be used to collect information on race/ethnicity. Provide all options to every client. Even if staff believes they can guess a client's race/ethnicity, every client must be asked for their self-reported information. No documentation is required to verify a client's response.

"Client doesn't know," "Client refused," and "Data not collected" are explanations for missing race data. None of these three responses are valid in conjunction with any other response.

This data element can be challenging to separate from ethnicity. As one example, some people of Latin American descent often indicate their race is "Hispanic," and would not be referred to in casual conversation or seen in their communities or by themselves as "White" or "Black, African American, or African," as an example. Unless the person is from an original people's group that is indigenous or American Indian, in which case they would select that option, the staff will have to ask follow-up questions to ascertain the best response for *Race*. Staff may ask something like "do you know if your ancestors were originally from a country like Spain, somewhere in Africa, or are you part of an indigenous group?" The response is tied to where their

ancestors came from, not necessarily where they were born or lived during their lifetime.

By the time clients get to data element 3.05 Ethnicity, they may have already responded to *Race* with something like 'Hispanic,' 'Guatemalan,' or 'Latino,' so staff should be able to clearly distinguish between these two data elements and select responses accordingly, even if the answers are provided out of order.

Projects are cautioned against providing a default answer. It is important to ask about all household members' race and identity because it is impossible to tell just based on a person's appearance or name. If the client does not know their race or ethnicity, or refuses to disclose it, use "Client doesn't know" or "Client refused," rather than making an appearance or name-based assumption.

Is anyone in the household pregnant		This question is worth one point and is a local point
Number of people in household	Number of people in household or family unit	A household is generally defined by the person being assessed. This question is intended to help identify if there will be other people living with the person if/when they are placed into a housing program.
Of those, number under age 18?		
Residence prior to program entry date	Where did you stay last night?	You can think of the “program” as the assessment itself.
Length of stay	How long have you been staying there?	
Approximate date homelessness started	How long have you been homeless? When was the last time you were staying in a house/apartment (either yours or someone else’s)?	This question refers to the person’s most recent episode of literal homelessness (i.e. doubled up not included here). It’s really important that you answer this question, even if it’s not exact and just a best guess. The answer informs wait list prioritization.
Number of times on street/shelter in past 3 years	Have you been homeless before this instance? If so, when? Since (insert date equal to three years ago), how many times have you been housed and then homeless?	HUD does not establish a minimum number of days that each occasion must total and instead defines the end of an occasion as a break of at least 7 nights where the individual or head of household is <i>not</i> residing in street/shelter or is residing in a place meant for human habitation (e.g. with family/friends, etc.)

Total number of months in street/shelter in past 3 years		It's really important that this question is answered, even if it's not exact and just a best guess. The answer informs wait list prioritization.
Disabling condition	Do you have any kind of disabling condition? It doesn't have to be diagnosed, and could include a physical disability, chronic illness, substance use, mental health, or developmental disability.	HUD's definition of disabling condition is broader than the one used for other programs like Social Security. Also, while the person will eventually need to have the disability verified, it does not need to be diagnosed at time of assessment. Sometimes people may not identify as having a disabling condition, when they actually do have a condition that would qualify. If someone says no to this question, it may still be worth going through the assessment process to see if their answers to any of the assessment questions indicate that they may have a qualifying condition. If that's the case, ask the person if you can go back and change the answer to this question.

VI-SPDAT / F-VI-SPDAT questions		
Question	Sample alternatives	Notes/Context
<i>General information – family tool only</i>		
Total number of children under the age of 18 that are currently with the head(s) of household (or planning to be a part of the household).	You don't need to ask this question – you can base it on answer to the question above (“of those, number under age 18?”)	
How many children under the age of 18 are not currently with your family, but you have reason to believe they will be joining you when you get housed?		
Is any member of the family currently pregnant?		Only ask this question if there is at least one female head of household, and/or if there is at least one female child 13 years of age or older.
<i>History of housing and homelessness</i>		
1. What is the total length of time you have lived on the streets or in shelters?	You can expand this question to something like – What is the total length of time you have lived on the streets, in shelters, on someone's couch, or anything like that?	This question refers to all episodes of homelessness (not just the current one) and includes staying in a car, outdoors, in transitional housing or shelters, doubled up, couch surfing, and

		periods of homelessness while in an institution (e.g. jail, prison, hospital, etc.). The answer in ServicePoint is limited to “less than two years” or “two or more years”, so you don’t need to get more precise than that with this question.
2. In the past three years, how many times have you been housed and then homeless again?	You don’t need to ask this question - you can base it on the answer to the question above (“number of times on street/shelter in past 3 years”).	
<i>Risks</i>		
3. In the past six months, how many times have you been to the emergency department/room?	Have you gone to the ER at all in the past 6 months? If so, how many times?	
4. In the past six months, how many times have you had an interaction with the police?	Have you had any police contact in the last 6 months? If so, how many times?	This would include any interaction for the purpose of law enforcement including reporting something, being asked to move along, having your camp swept, being arrested, etc.
5. In the past six months, how many times have you been taken to the hospital in an ambulance?	Have you been taken to the hospital in an ambulance in the past 6 months? If so, how many times?	
6. In the past six months, how many times have you used a crisis service, including distress centers or suicide prevention hotlines?	Have you used any crisis services in the past 6 months? For example, the county crisis line, Project Respond, Call to Safety or UNICA? If so, how many times?	211 is not considered a crisis service
7. In the past six months, how many times have you been hospitalized as an in-patient, including hospitalizations in a mental health hospital?	Have you been hospitalized at all in the past 6 months? If yes, how many times?	
8. Have you been attacked or beaten up since becoming homeless?	Since becoming homeless, have you been beaten up or attacked at all? Since becoming homeless, have you experienced any violence?	
9. Threatened to or tried to harm yourself or anyone else in the past year?	Have you tried to hurt yourself in the past year? Have you tried to hurt someone else in the past year?	
10. Do you have any legal stuff going on right now that may result in you being locked up or having to pay fines?		This includes any type of legal matter such as being without documentation, having an outstanding warrant, moving violation, pending charges, being

		on a registered offender list, involved in CPS and DHS, etc.
11. Does anybody force or trick you to do things that you do not want to do?	Does anyone try to get you to do things you do not want to do? Do you feel manipulated by others to do things you do not want to do? Do people encourage you to do things, even after you say no? Examples: things that could get you in trouble legally, things that put you/your health/your safety/sobriety at risk?	Give examples of ways people may have to do things to protect themselves and to cope with living outside.
12. 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 really know, share a needle, or anything like that?	Sometimes we need to do things that we otherwise wouldn't do, just to get by. Do you ever do things that may be considered to be risky? (we don't need any details, but give examples if it helps respondents understand what may be considered 'risky')	
13. I am going to read types of places that people sleep. Please tell me which one that you sleep at most often.	Where do you usually sleep?	The purpose of this question is to give a point to someone who is sleeping in a place not meant for human habitation (i.e. street, car, park, etc.). If the person is doubled up, skip this question.
<i>Socialization and daily functions</i>		
14. Is there anybody that thinks you owe them money?	Do you owe money to anyone?	
15. Do you have 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?	Do you have any regular income? This could include a job, working under the table, a government benefit, or anything like that.	If reading the question as is, remove binning or bottle collecting. We decided locally not to include this.
16. Do you have enough money to meet all of your expenses on a monthly basis?	If answer above is no, mark no for this question.	It may be helpful to explain that rent/housing costs count as a monthly expense.
17. Do you have planned activities each day other than just surviving that bring you happiness and fulfillment?	Do you have regular planned activities that make you feel happy and fulfilled?	Ask about things that are regular activities solely for joy and pleasure and not just for survival (things that they like to do and not things that they have to do)

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?	Is there anyone you spend time with out of necessity or survival, who you otherwise would rather not be around? Is there anyone in your life that you would choose not to have in your life if your situation were different?	
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?	Does anybody in your life get you to do things you don't really want to do, or make you feel obligated to do things you don't really want to do? Does anyone in your life ever take things from you (examples as needed), or get you to do things you really don't want to do?	
20. Adult tool only: SURVEYOR -- Do you detect signs of poor hygiene or daily living skills?		
<i>Wellness- Medical</i>		
21. Where do you usually go for healthcare or when you're not feeling well-- hospital; clinic; VA; other (please specify); does not go for care	When you're sick or not feeling well, do you go somewhere for care? Where do you go?	Do not mark "does not go for care" if the person talks about primary care providers, recent diagnoses, etc. Seeking care at the emergency room counts as seeking medical care.
22 – 33. Do you have or have you had... list of health conditions.	I'm going to read a list of health conditions. Let me know if you have any of these now, in the past, or if a healthcare provider has ever told you that you have any of them.	
34. Adult tool only: SURVEYOR -- Do you observe signs or symptoms of a serious health condition?		
<i>Wellness – Substance Use</i>		
35. Have you ever had problematic drug or alcohol use, abused drugs or alcohol, or told you do?	Have you ever had problems with drugs or alcohol? Has anyone told you that you do?	
36. Have you consumed alcohol and/or drugs almost every day or everyday for the past month?	Have you recently used drugs or alcohol? If yes – how often would you say you use them?	
37. Have you ever used injection drugs or shots in the last six months?	If yes to drugs above – what about injection drugs or shots in the last six months?	

38. Have you ever been treated for drug or alcohol problems and returned to drinking or using drugs?	Have you ever done inpatient or outpatient treatment for drugs or alcohol? If yes – have you used drugs or alcohol since then? Have you ever been through substance related treatment and ended up relapsing?	
39. Have you ever used non-beverage alcohol like cough syrup, mouthwash, rubbing alcohol, cooking wine, or anything like that in the past six months?	Have you misused substances like cough syrup, mouthwash, rubbing alcohol, cooking wine, or anything like that in the past six months?	
40. Have you blacked out because of your alcohol or drug use in the past month?	Only ask if reported using.	
41. Adult tool only: SURVEYOR -- Do you observe signs or symptoms or problematic alcohol or drug abuse?		
<i>Wellness – Mental Health</i>		
42. Ever been taken to the hospital against your will for a mental health reason?	Has anyone ever forced you to go to the hospital because of mental health symptoms? Have you ever been to a hospital or emergency room for a mental health reason?	
43. Gone to the emergency room because you weren't feeling 100% well emotionally or because for your nerves?	Have you ever gone to the ER because you weren't feeling well emotionally or were feeling anxious or stressed out?	
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?	In the last 6 months, have you spoken with a psychiatrist or other mental health professional?	
45. Had a serious brain injury or head trauma?		
46. Ever been told you have a learning disability or developmental disability?	Have you ever been told that you have a developmental disability? What about a learning disability?	
47. Do you have any problems concentrating and/or remembering things?		
48. Adult tool only: SURVEYOR-- do you detect signs or symptoms of severe, persistent mental illness or severely compromised cognitive functioning?		

<i>Wellness – Other</i>		
49. Have you had any medications prescribed to you by a doctor that you do not take, sell, had stolen, misplaced, or where the prescriptions were never filled?	Have you had medications prescribed to you that you haven't taken for whatever reason?	
50. Yes or No - Have you experienced any emotional, physical, 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?	Have you experienced any kind of abuse or trauma which you have not sought help for or which caused your homelessness?	
<i>Family unit – family tool only</i>		
51. What is the total number of times adults in the family have changed in the family over the past year because of things like new relationships or a breakdown in the relationship, prison, military deployment, or anything like that?		
52. What is the total number of times that children have been separated from the family or returned to the family over the past year?		
53. Right now or at any point in the last six months have any of your children been separated from you to live with a family member or friend?		
54. Has there been any involvement with any member of your family and child protective services in the last six months – even if it was resolved?		
<i>Local questions</i>		
Are you caring for a parent or other elder adult in your household?		Opportunity to award points for multi-generational households
Are you in immediate danger?	Let the participant know that you will be asking sensitive questions about risk of assault, abuse, and domestic violence. All information will be kept confidential. They can choose to not answer and they do not have to provide any names or identifying information.	This question is to help assess domestic violence risk and whether to also refer to the DV system You can refer to the Domestic Violence system by calling Call to Safety (503.235.5333) or, for Spanish, Project UNICA (503-232- 4448), or visiting the Gateway Center (10305 E Burnside St).
Is someone hurting you or your children?		This question is to help assess domestic violence risk and whether to also refer to the DV system
Abuser relationship	They will have to identify the abuser relationship to get the DV point, but they can select “other” and do not have to provide any identifying information.	Ask to identify abuser relationship if answer to previous question was yes.

Has somewhere to go tonight to be safe from this person?		This question is to help assess domestic violence risk and whether to also refer to the DV system
Do you think culturally specific services might help you overcome your housing challenges?	A helpful follow up question: what specific services are you looking for in culturally specific services?	This question is to address racial disparities in homelessness in our community by prioritizing our communities of color for the limited culturally specific services. If people do not list any services, they should not receive these points.
Have you or an immediate family member ever experienced racial discrimination in housing?		This is a proxy question to address racial disparities in homelessness.
<i>(Adult only)</i> Have you or any of your ancestors (including parent, guardian, or grandparent) ever lived in North or Northeast Portland?		This is to help prioritize for permanent supportive housing projects that fall under the City's Preference Policy and will be filled through Coordinated Access for Adults. People can self-identify having been displaced from N/NE or as having a parent, guardian, or grandparent (alive or deceased) who were displaced.
<i>(Adult only)</i> If yes, have you applied for affordable housing through the City's Preference Policy?		You can connect participants to the City's Preference Policy by calling 503.823.4147. This is a separate housing process than Coordinated Access. It is not required that you help connect participants, but you may do so. You can find more information on the Preference at portland.gov/phb/nnehousing/preference-policy
Do you need an ADA accommodation?	Are you living with any mobility issues or accessibility needs related to a disability that would be helpful for us to know in matching you with housing options (i.e. needs elevator, has service animal low noise, etc.)?	ADA = Americans with Disabilities Act. Read more at ada.gov .