

	THE CORPORATION OF THE COUNTY OF LAMBTON			
	Department:	Homelessness Prevention and Children's Services		
	Topic:	<i>Operations' Policy & Procedure</i>	Section A11	Policy # 224
	Subject:	Homelessness Coordinated Access System, Triage & Assessment Policy		
	Effective Date:	December 20, 2022	<i>Approved By:</i> Ian Hanney	
	Revision Date:	N/A		

- *Disclaimer: If there is a discrepancy between this electronic policy and the written copy held by the policy owner, the written copy prevails.*

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1 SUBJECT

Homelessness Coordinated Access System, **Triage & Assessment Policy**, in the Homeless Individuals and Families Information System (HIFIS).

2 PURPOSE

The purpose of this policy is to establish and clearly define the common triage and assessment protocols used in Lambton County. The information will help guide the type of support and housing intervention options that may be the most beneficial to improve long term housing outcomes for individuals who are or at risk of homelessness.

3 POLICY STATEMENT

The County of Lambton is committed to preventing and ending Homelessness using the principles of “Housing First”. As part of this commitment, the Triage & Assessment Policy is a critical component of maintaining Lambton County’s real-time By-Name List (LCBNL) and a robust Coordinated Access System for households experiencing homelessness or at immediate risk of homelessness.

The standardized triage and assessment/data collection tools described in this policy are part of a Coordinated Access best practice approach to assess the current situation of the household, including level of acuity, needs, vulnerabilities, and referral/matching resource options.

4 SCOPE

The outlined procedures will be followed by agencies within the Lambton County Homelessness System of Care (LCHSC) on a regular basis. This applies to all clients accessing services within the LCHSC.

5 DEFINITIONS

5.1 Acuity Scale

An acuity scale is used to determine the appropriate level, intensity, and frequency of case managed supports to sustainably end a person's homelessness. Overall, a higher number represents more complex, co-occurring issues that may impact overall housing stability.

5.2 By-Name List (BNL)

A BNL is a real-time, person-specific list of all people known to be experiencing homelessness in our community. Each household has provided consent to be on Lambton County's BNL.

5.3 By-Name Priority List (BNPL)

The BNPL is a key component to the Coordinated Access System, and it is a subset of the BNL. As part of the matching and referral process, the BNPL is used to prioritize persons and families based on their need level using standardized process and common assessment tools. Overall, the BNPL helps community partners know every person experiencing homelessness by name, understand their unique needs, and then prioritize them for the most appropriate and available supports and housing.

5.4 Chronic Homelessness

Chronic homelessness refers to individuals who are currently experiencing homelessness AND who meet at least one of the following criteria:

- Have a total of at least 6 months (180 days) of homelessness over the past year;
- Have recurrent experiences of homelessness over the past 3 years, with a cumulative duration of at least 18 months (546 days)

5.5 Client

A client is a consumer of a service provider's resources; this excludes HIFIS users and staff members.

5.6 Community Access Points (CAPs)

CAPs are identified agency locations in Lambton County who have regular contact with those experiencing or at risk of homelessness. Community Access Points ensure that anyone experiencing homelessness in Lambton County has equitable access to available housing and supports that are appropriate to their needs.

5.7 Employee

An "employee" is defined in this policy as someone who is working for or affiliated with the County of Lambton, Homelessness Prevention and Children's Services Department. All employees shall comply with this policy and all applicable privacy legislation as it relates to their particular employment responsibilities.

5.8 HIFIS

The Homeless Individuals and Families Information System (HIFIS) is a comprehensive data collection and case management system designed to better understand what is happening in our community and to work collaboratively. *Note: It is a type of Homelessness Management Information System (HMIS).* See, <https://www.canada.ca/en/employment-social-development/programs/homelessness/hifis.html>

5.9 HMIS

The Homeless Management Information System (HMIS) is a local information technology system used to collect client-level data and data on the provision of housing and services to homeless individuals, families, and persons at risk of homelessness.

5.10 Homelessness

Homelessness describes the situation of an individual, family or community without stable, safe, permanent, appropriate housing, or the immediate prospect, means and ability of acquiring it. See, [Canadian Definition Of Homelessness](#)

5.11 Homelessness Service Provider

Homelessness Service Providers are organizations in the Lambton County Homelessness System of Care that have staff who directly interact with clients to help them address their housing challenges.

5.12 VI-SPDAT

The Vulnerability Index – Service Prioritization Decision Assistance Tool (VI-SPDAT) is a short, self-reported triage/pre-screening tool used to quickly determine a client’s acuity. It is used to evaluate the individual or family’s depth of need (acuity), prioritize their housing and/or support services' needs, and help match them with available housing focused interventions. This tool is appropriate for trained front-line staff to use when serving homeless individuals and families.

6 BACKGROUND

To prevent and end homelessness, Lambton County must know the current scope of challenges and potential gaps in service to resolve. Quality-driven, reliable data enables goal setting with corresponding action since outputs, outcomes, and impacts can be measured using data points.

HIFIS is a comprehensive data collection and case management system designed to better understand what is happening in our community and to enhance collaboration between service providers. In Lambton County, HIFIS is used by agencies within the LCHSC.

The LCHSC is composed of various community organizations who provide services to persons who are experiencing homelessness or at-risk of homelessness. The LCHSC includes agencies such as the County of Lambton, emergency shelter providers, transitional housing providers, and street outreach providers.

A Unique Identifier List (also known as a By-Name List or BNL) is a real-time list of all known people experiencing homelessness in our community. It includes a robust set of data points that support coordinated access and prioritization at a household level and an understanding of homeless inflow and outflow at a system level. <https://bfzcanada.ca/by-name-lists/>

7 RESPONSIBILITIES

All Employees and Homelessness Service Providers are responsible to comply with this policy and all applicable policies, laws, and regulations regarding the Homelessness Coordinated Access System.

7.1 Community Entity (CE) - County of Lambton

The Community Entity (County of Lambton) is required to document and make available a policy for standardized triage and assessment protocols across the Coordinated Access System. It is the responsibility of the CE to support agencies with the appropriate understanding of how to process common triage and assessment tools in alignment with the implementation of HIFIS and Coordinated Access.

7.2 Homelessness Service Provider

The Homelessness Service Provider is accountable to ensure trained workers use the standardized triage and assessment protocols.

7.3 Homelessness Front-Line Staff / User

- Be aware of all of the triage/assessment tools and their appropriate application.
- Complete standardized triage and assessment protocols with clients providing consent at defined frequencies.
- Update standardized triage and assessment protocols information in HIFIS on a regular and ongoing basis.

7.4 Homelessness System Coordinator – County of Lambton

- Update standardized triage and assessment protocols in HIFIS for both HIFIS and non-HIFIS Service Providers with clients providing consent, as required.
- Monitor accuracy and completeness of the standardized triage/assessment protocols.
- Notify relevant staff or agencies if any information is inaccurate and/or incomplete.
- Extract data quality reports from HIFIS on a regular basis for distribution to Management or Staff, as assigned.

7.5 Staff as Assigned - County of Lambton

- Monitor accuracy and completeness of the standardized triage/assessment protocols.
- Notify relevant staff or agencies if any information is inaccurate and/or incomplete.
- Extract data quality reports from HIFIS on a regular basis for distribution to Management or Staff as assigned.

8 PROCEDURE for the VI-SPDAT

8.1 VI-SPDAT Overview

The VI-SPDAT has different versions for specific populations. Information collected in the triage assessment tool include categories of:

- Wellness (e.g., mental, physical health/abuse, substance use)
- Risks (e.g., harm to others or themselves, legal involvement)
- Socialization and daily functioning
- Housing history

The appropriate version of the VI-SPDAT is to be used by referral sources based on the individual being assessed, as outlined by below.

The Single Youth VI-SPDAT is a tool designed for youth aged 24 and under. Note: If a youth was assessed using a Single Youth VI-SPDAT but ages to 25 or 25+ before being referred to permanent housing with supports, a Single Adult VI-SPDAT must be completed.

VI-SPDAT Version	Description	Version #	Appendix #
Single Youth	Youth, aged 16 - 24	Youth VI-SPDAT v. 1.0	Appendix A
Single Adult	Single Adults, aged 25+	Single Adult VI-SPDAT v. 2.0	Appendix B
Families	Families (an adult or youth-headed client with dependent children under age 18 or dependent adults)	Family VI-SPDAT v. 2.0	Appendix C

8.2 Client Choice

Homelessness staff will offer all available services based on the client's eligibility. Withdrawing or limiting consent, including the completion of the VI-SPDAT, does not make a client ineligible for services and supports. Clients are encouraged to exercise choice about what services and housing they believe will be best suited to meet their needs, and their self-determination will be honoured.

8.3 Reassessment

A VI-SPDAT reassessment may be completed if there has been any significant life change in the client's life since the last VI-SPDAT or if an individual re-enters the homelessness system and it has been more than six (6) months since their VI-SPDAT was originally completed.

8.4 Significant Life Change

Some examples of significant life change events that would require a new VI-SPDAT being done include, but are not limited to, the following:

- **A New Episode of Homelessness after being housed**
 - New event of homelessness after several months of being housed
 - Leaving a jail, hospital, or institution after 90 days
- **Changes in the Family Unit**
 - The death of a family member or divorce or separation
 - The birth of a child or return of another child
 - Dependent leaving or returning to jail, school, or other institution
- **Significant Changes in Health**
 - The brain injury impacting one's ability to live alone
 - An incident causing disability, *not a disability status change*
 - An individual or family member develops an original and severe substance use issue that was not present during first assessment

8.5 Timeframe

Daily

- All community organizations within the LCHSC will ensure that client updates in HIFIS are completed daily, within 24 hours of changes. (e.g., Intake, Triage/Assessment)
- Triage/Assessment updates should be entered directly in HIFIS via the VI-SPDAT menus. (e.g., VI-SPDAT Youth, v1)

14 Days

- ❖ All Community Access Points (CAPs) will use the VI-SPDAT to assess individuals who have been experiencing homelessness for 14 days or more.

This threshold of engagement was determined based on community data and research on homeless intervention best practices. In order to efficiently support people, it is recommended that front-line staff allow individuals or families to conduct a self-directed housing search and self-resolve their homelessness for the first two (2) weeks.

- ❖ If there is an individual or family known to the system, and suspected high acuity, front-line staff may complete the assessment earlier. Front-line staff may also use discretion when administering the VI-SPDAT to supplement responses through conversations and observations with the client. *(This flexibility helps to ensure the VI-SPDAT is accurately reflecting a client's circumstance in order to match them with the most appropriate housing or program opportunity.)*

** Refer to Appendix D for a list of current Community Access Points.*

- ❖ All HIFIS Front-Line Staff/Users will ensure that the triage/assessment tools (e.g., VI-SPDAT) is completed with a client within 14 days of intake.

Monthly

- The Homelessness System Coordinator (HSC), Social Planners, and Program/Data Analysts verify client information and service provider information monthly.

As Needed

- The HSC, Social Planners, Program/Data Analysts and BNL Leadership connect with HIFIS Front-Line Staff / Users / Service Providers on an as needed basis.
- The HSC, Social Planners, and Program/Data Analysts share the relevant priority lists that qualify for individual programs with Leadership, assigned Case Management teams, and respective Service Providers, as needed.

8.6 VI-SPDAT Acuity Scoring Chart

Single Youth & Single Adults	Low Acuity	Mid Acuity	High Acuity	Very High Acuity
VI-SPDAT	0-3	4-7	8-13	14-17

Families	Low Acuity	Mid Acuity	High Acuity	Very High Acuity
VI-SPDAT	0-3	4-8	9-15	16-22

While individual programs and services in the LCHSC may hold inclusionary or exclusionary criteria related to acuity score, below describes the level and type of support generally offered to households by acuity score.

- Low score (0-3)**
No Formal Housing Intervention: Individuals who do not require intensive supports, but may still benefit from access to affordable housing, housing listings and community level resources to resolve their own homelessness.
- Medium Score (4-7)**
Rapid Re-Housing: Individuals or families with moderate health, mental health and/or behavioral health issues, but who are likely to be able to achieve housing stability with short-term to medium access to financial and/or support services.
- High Score (8-13)**
Permanent Supportive Housing: Individuals or families who need permanent housing with ongoing access to services and case management to remain stably housed.
- Very High Score (14+)**
Permanent Supportive Housing: Individuals or families who need permanent housing with ongoing access to services and supports (possibly 24/7) and case management to remain stably housed.

9 DOCUMENTATION

Documentation is confidential and all records shall be maintained by the Service Providers and County of Lambton staff.

10 EVALUATION

As part of Quality Improvement, the Homelessness Prevention and Children's Services Department may conduct regular reviews of the Triage/Assessment process to focus on key indicators and potential gaps in service.

11 ASSOCIATED DOCUMENTS

- a) A11.222 Coordinated Access – Timely and Accurate Data in HIFIS
- b) A11.223 Coordinated Access – Intake Policy
- c) Lambton County's - Homelessness Services Coordinated Access System - Process Guide
- d) County of Lambton Housing and Homelessness Plan, 2020-2024
- e) Lambton County's Quality By-Name List (BNL)

12 POLICY HISTORY

<i>Revised By</i>	<i>Date</i>	<i>Prepared By</i>
<ul style="list-style-type: none">• Policy created.	<ul style="list-style-type: none">• December 20, 2022	<ul style="list-style-type: none">• Nancy Kalbfleisch

Appendix A - VI-SPDAT for Single Youth, v1

NEXT STEP TOOL FOR HOMELESS YOUTH

SINGLE YOUTH CANADIAN VERSION 1.0

Administration

Interviewer's Name	Agency	<input type="checkbox"/> Team	
		<input type="checkbox"/> Staff	
		<input type="checkbox"/> Volunteer	
Survey Date	Survey Time	Survey Location	
DD/MM/YYYY	__/__/__ AM/PM		

Opening Script

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

- the name of the assessor and their affiliation (organization that employs them, volunteer as part of a Point in Time Count, etc.)
- the purpose of the VI-SPDAT being completed
- that it usually takes less than 7 minutes to complete
- that only "Yes," "No," or one-word answers are being sought
- that any question can be skipped or refused
- where the information is going to be stored
- that if the participant does not understand a question that clarification can be provided
- the importance of relaying accurate information to the assessor and not feeling that there is a correct or preferred answer that they need to provide, nor information they need to conceal

Basic Information

First Name	Nickname	Last Name
In what language do you feel best able to express yourself?		
Date of Birth	Age	Social Insurance Number
DD/MM/YYYY	__/__/__	____-____-____
		Consent to participate
		<input type="checkbox"/> Yes <input type="checkbox"/> No

IF THE PERSON IS 17 YEARS OF AGE OR LESS, THEN SCORE 1. SCORE:

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NEXT STEP TOOL FOR HOMELESS YOUTH

SINGLE YOUTH CANADIAN VERSION 1.0

A. History of Housing and Homelessness

1. Where do you sleep most frequently? (check one)

Shelters Outdoors Other (specify):
 Couch surfing Refused

IF THE PERSON ANSWERS ANYTHING OTHER THAN "SHELTER", THEN SCORE 1. SCORE:

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

3. In the last year, how many times have you been homeless? Refused

IF THE PERSON HAS EXPERIENCED 6 OR MORE CONSECUTIVE MONTHS OF HOMELESSNESS, AND/ OR 3+ EPISODES OF HOMELESSNESS, THEN SCORE 1. SCORE:

B. Risks

4. In the past six months, how many times have you...

a) Received health care at an emergency department/room? Refused

b) Taken an ambulance to the hospital? Refused

c) Been hospitalized as an inpatient? Refused

d) Used a crisis service, including sexual assault crisis, mental health crisis, family/intimate violence, distress centers and suicide prevention hotlines? Refused

e) Talked to police because you witnessed a crime, were the victim of a crime, or the alleged perpetrator of a crime or because the police told you that you must move along? Refused

f) Stayed one or more nights in a holding cell, jail, prison or juvenile detention, whether it was a short-term stay like the drunk tank, a longer stay for a more serious offence, or anything in between? Refused

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

5. Have you been attacked or beaten up since you've become homeless? Y N Refused

6. Have you threatened to or tried to harm yourself or anyone else in the last year? Y N Refused

IF "YES" TO ANY OF THE ABOVE, THEN SCORE 1 FOR RISK OF HARM. SCORE:

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NEXT STEP TOOL FOR HOMELESS YOUTH

SINGLE YOUTH CANADIAN VERSION 1.0

7. Do you have any legal stuff going on right now that may result in you being locked up, having to pay fines, or that make it more difficult to rent a place to live? Y N Refused

8. Were you ever incarcerated when younger than age 18? Y N Refused

IF "YES" TO ANY OF THE ABOVE, THEN SCORE 1 FOR LEGAL ISSUES. SCORE:

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

10. Do you ever do things that may be considered to be risky like exchange sex for money, food, drugs, or a place to stay, run drugs for someone, have unprotected sex with someone you don't know, share a needle, or anything like that? Y N Refused

IF "YES" TO ANY OF THE ABOVE, THEN SCORE 1 FOR RISK OF EXPLOITATION. SCORE:

C. Socialization & Daily Functioning

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

12. Do you get any money from the government, an inheritance, an allowance, working under the table, a regular job, or anything like that? Y N Refused

IF "YES" TO QUESTION 11 OR "NO" TO QUESTION 12, THEN SCORE 1 FOR MONEY MANAGEMENT. SCORE:

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

IF "NO", THEN SCORE 1 FOR MEANINGFUL DAILY ACTIVITY. SCORE:

14. Are you currently able to take care of basic needs like bathing, changing clothes, using a restroom, getting food and clean water and other things like that? Y N Refused

IF "NO", THEN SCORE 1 FOR SELF-CARE. SCORE:

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NEXT STEP TOOL FOR HOMELESS YOUTH

SINGLE YOUTH CANADIAN VERSION 1.0

15. Is your current lack of stable housing...

a) Because you run away from your family home, a group home or a foster home? Y N Refused

b) Because of a difference in religious or cultural beliefs from your parents, guardians or caregivers? Y N Refused

c) Because your family or friends caused you to become homeless? Y N Refused

d) Because of conflicts around gender identity or sexual orientation? Y N Refused

IF "YES" TO ANY OF THE ABOVE, THEN SCORE 1 FOR SOCIAL RELATIONSHIPS. SCORE:

e) Because of violence at home between family members? Y N Refused

f) Because of an unhealthy or abusive relationship, either at home or elsewhere? Y N Refused

IF "YES" TO ANY OF THE ABOVE, THEN SCORE 1 FOR ABUSE/TRAUMA. SCORE:

D. Wellness

16. Have you ever had to leave an apartment, shelter program, or other place you were staying because of your physical health? Y N Refused

17. Do you have any chronic health issues with your liver, kidneys, stomach, lungs or heart? Y N Refused

18. Do you have any physical disabilities that would limit the type of housing you could access, or would make it hard to live independently because you'd need help? Y N Refused

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

20. Are you currently pregnant, have you ever been pregnant, or have you ever gotten someone pregnant? Y N Refused

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

21. Has your drinking or drug use led you to being kicked out of an apartment or program where you were staying in the past? Y N Refused

22. Will drinking or drug use make it difficult for you to stay housed or afford your housing? Y N Refused

23. If you've ever used marijuana, did you ever try it at age 12 or younger? Y N Refused

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

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Appendix A - VI-SPDAT for Single Youth, v1 - (Continued)

NEXT STEP TOOL FOR HOMELESS YOUTH
SINGLE YOUTH CANADIAN VERSION 1.0

24. Have you ever had trouble maintaining your housing, or been kicked out of an apartment, shelter program or other place you were staying, because of:

a) A mental health issue or concern? Y N Refused

b) A past head injury? Y N Refused

c) A learning disability, developmental disability, or other impairment? Y N Refused

25. Do you have any mental health or brain issues that would make it hard for you to live independently because you'd need help? Y N Refused

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

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

26. Are there any medications that a doctor said you should be taking that, for whatever reason, you are not taking? Y N Refused

27. Are there any medications like painkillers that you don't take the way the doctor prescribed or where you sell the medication? Y N Refused

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

Scoring Summary

DOMAIN	SUBTOTAL	RESULTS
PRE-SURVEY	/11	
A. HISTORY OF HOUSING & HOMELESSNESS	/12	
B. RISKS	/14	
C. SOCIALIZATION & DAILY FUNCTIONS	/14	
D. WELLNESS	/16	
GRAND TOTAL:	/17	

Score: Recommendation:

0-3: no moderate or high intensity services be provided at this time

4-7: assessment for time-limited supports with moderate intensity

8+: assessment for long-term housing with high service intensity

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NEXT STEP TOOL FOR HOMELESS YOUTH
SINGLE YOUTH CANADIAN VERSION 1.0

Follow-Up Questions

On a regular day, where is it easiest to find you and what time of day is easiest to do so? place: _____ time: _____ or Morning/Afternoon/Evening/Night

Is there a phone number and/or email where someone can get in touch with you or leave you a message? phone: (____) _____-____ email: _____

Oh, now I'd like to take your picture so that it is easier to find you and confirm your identity in the future. May I do so? Yes No Refused

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

- military service and nature of discharge
- aging out of care
- mobility issues
- legal status in country
- income and source of it
- current restrictions on where a person can legally reside
- children that may reside with the youth at some point in the future
- safety planning

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Appendix B - VI-SPDAT for Single Adult, v2

VULNERABILITY INDEX - SERVICE PRIORITIZATION DECISION ASSISTANCE TOOL (VI-SPDAT)
SINGLE ADULTS AMERICAN VERSION 2.01

Administration

Interviewer's Name: _____ Agency: _____
 Team
 Staff
 Volunteer

Survey Date: DD/MM/YYYY ____/____/____ Survey Time: _____ Survey Location: _____

Opening Script

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

- the name of the assessor and their affiliation (organization that employs them, volunteer as part of Point in Time Count, etc.)
- the purpose of the VI-SPDAT being completed
- that it usually takes less than 7 minutes to complete
- that only "Yes," "No," or one-word answers are being sought
- that any question can be skipped or refused
- where the information is going to be stored
- that if the participant does not understand a question or the assessor does not understand the question that clarification can be provided
- the importance of relying accurate information to the assessor and not feeling that there is a correct or preferred answer that they need to provide, nor information they need to conceal.

Basic Information

First Name: _____ Nickname: _____ Last Name: _____

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

Date of Birth: DD/MM/YYYY ____/____/____ Age: _____ Social Security Number: _____ Consent to participate: Yes No

IF THE PERSON IS 60 YEARS OF AGE OR OLDER, THEN SCORE 1. SCORE: 0

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VULNERABILITY INDEX - SERVICE PRIORITIZATION DECISION ASSISTANCE TOOL (VI-SPDAT)
SINGLE ADULTS AMERICAN VERSION 2.01

A. History of Housing and Homelessness

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

IF THE PERSON ANSWERS ANYTHING OTHER THAN "SHELTERS," "TRANSITIONAL HOUSING," OR "SAFE HAVEN," THEN SCORE 1. SCORE: 0

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

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

IF THE PERSON HAS EXPERIENCED 1 OR MORE CONSECUTIVE YEARS OF HOMELESSNESS, AND/OR 4+ EPISODES OF HOMELESSNESS, THEN SCORE 1. SCORE: 0

B. Risks

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

IF THE TOTAL NUMBER OF INTERACTIONS EQUALS 4 OR MORE, THEN SCORE 1 FOR EMERGENCY SERVICE USE. SCORE: 0

5. Have you been attacked or beaten up since you've become homeless? Y N Refused

6. Have you threatened to or tried to harm yourself or anyone else in the last year? Y N Refused

IF "YES" TO ANY OF THE ABOVE, THEN SCORE 1 FOR RISK OF HARM. SCORE: 0

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SINGLE ADULTS AMERICAN VERSION 2.01

7. Do you have any legal stuff going on right now that may result in you being locked up, having to pay fines, or that make it more difficult to rent a place to live? Y N Refused

IF "YES," THEN SCORE 1 FOR LEGAL ISSUES. SCORE: 0

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

9. Do you ever do things that may be considered to be risky like exchange sex for money, run drugs for someone, have unprotected sex with someone you don't know, share a needle, or anything like that? Y N Refused

IF "YES" TO ANY OF THE ABOVE, THEN SCORE 1 FOR RISK OF EXPLOITATION. SCORE: 0

C. Socialization & Daily Functioning

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

11. Do you get any money from the government, a pension, an inheritance, working under the table, a regular job, or anything like that? Y N Refused

IF "YES" TO QUESTION 10 OR "NO" TO QUESTION 11, THEN SCORE 1 FOR MONEY MANAGEMENT. SCORE: 0

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

IF "NO," THEN SCORE 1 FOR MEANINGFUL DAILY ACTIVITY. SCORE: 0

13. Are you currently able to take care of basic needs like bathing, changing clothes, using a restroom, getting food and clean water and other things like that? Y N Refused

IF "NO," THEN SCORE 1 FOR SELF-CARE. SCORE: 0

14. Is your current homelessness in any way caused by a relationship that broke down, an unhealthy or abusive relationship, or because family or friends caused you to become excited? Y N Refused

IF "YES," THEN SCORE 1 FOR SOCIAL RELATIONSHIPS. SCORE: 0

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D. Wellness

15. Have you ever had to leave an apartment, shelter program, or other place you were staying because of your physical health? Y N Refused

16. Do you have any chronic health issues with your liver, kidneys, stomach, lungs or heart? Y N Refused

17. If there was space available in a program that specifically assists people that live with HIV or AIDS, would that be of interest to you? Y N Refused

18. Do you have any physical disabilities that would limit the type of housing you could access, or would make it hard to live independently because you'd need help? Y N Refused

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

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

IF "YES" TO ANY OF THE ABOVE, THEN SCORE 1 FOR PHYSICAL HEALTH. SCORE: 0

21. Has your drinking or drug use led you to being kicked out of an apartment or program where you were staying in the past? Y N Refused

22. Will drinking or drug use make it difficult for you to stay housed or afford your housing? Y N Refused

IF "YES" TO ANY OF THE ABOVE, THEN SCORE 1 FOR SUBSTANCE USE. SCORE: 0

23. Have you ever had trouble maintaining your housing, or been kicked out of an apartment, shelter issue or concern?
 a) A mental health issue or concern? Y N Refused
 b) A past head injury? Y N Refused
 c) A learning disability, developmental disability, or other impairment? Y N Refused

24. Do you have any mental health or brain issues that would make it hard for you to live independently because you'd need help? Y N Refused

IF "YES" TO ANY OF THE ABOVE, THEN SCORE 1 FOR MENTAL HEALTH. SCORE: 0

IF THE RESPONDENT SCORED 1 FOR PHYSICAL HEALTH AND 1 FOR SUBSTANCE USE AND 1 FOR MENTAL HEALTH, SCORE 1 FOR TRY-MORBIDITY. SCORE: 0

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25. Are there any medications that a doctor said you should be taking that, for whatever reason, you are not taking? Y N Refused

26. Are there any medications like painkillers that you don't take the way the doctor prescribed or where you sell the medication? Y N Refused

IF "YES" TO ANY OF THE ABOVE, SCORE 1 FOR MEDICATIONS. SCORE: 0

27. YES OR NO: Has your current period of homelessness been caused by an experience of emotional, physical, psychological, sexual, or other type of abuse, or by any other trauma you have experienced? Y N Refused

IF "YES," SCORE 1 FOR ABUSE AND TRAUMA. SCORE: 0

Scoring Summary

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

Score Recommendation:

0-3: no housing intervention
 4-7: an assessment for Rapid Re-Housing
 8-: an assessment for Permanent Supportive Housing/Housing First

Follow-Up Questions

On a regular day, where is it easiest to find you and what time of day is easiest to do so?
 place: _____ time: ____ or Night

Is there a phone number and/or email where someone can safely get in touch with you or leave you a message?
 phone: (____) _____ email: _____

OK, now I'd like to take your picture so that it is easier to find you and confirm your identity in the future. May I do so? Yes No Refused

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

- military service and nature of discharge
- ageing out of care
- mobility issues
- legal status in country
- income and source of it
- current restrictions on where a person can legally reside
- children that may reside with the adult at some point in the future
- safety planning

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Appendix C - VI-SPDAT for Families, v2

VULNERABILITY INDEX - SERVICE PRIORITIZATION DECISION ASSISTANCE TOOL (VI-SPDAT)
FAMILIES CANADIAN VERSION 2.0

Administration

Interviewer's Name _____	Agency _____	<input type="radio"/> Team <input type="radio"/> Staff <input type="radio"/> Volunteer
Survey Date DD/MM/YYYY ____/____/____	Survey Time ____:____	Survey Location _____

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

- the name of the assessor and their affiliation (organization that employs them, volunteer as part of a Point in Time Count, etc.)
- the purpose of the VI-SPDAT being completed
- that it usually takes less than 7 minutes to complete
- that only "Yes," "No," or one-word answers are being sought
- that any question can be skipped or refused
- where the information is going to be stored
- that if the participant does not understand a question that clarification can be provided
- the importance of relaying accurate information to the assessor and not feeling that there is a correct or preferred answer that they need to provide, nor information they need to conceal

Basic Information

PARENT 1	First Name _____	Nickname _____	Last Name _____
	In what language do you feel best able to express yourself? _____		
	Date of Birth DD/MM/YYYY ____/____/____	Age _____	Social Insurance Number _____
	Consent to participate <input type="radio"/> Yes <input type="radio"/> No		
	<input type="checkbox"/> No second parent currently part of the household		
PARENT 2	First Name _____	Nickname _____	Last Name _____
	In what language do you feel best able to express yourself? _____		
	Date of Birth DD/MM/YYYY ____/____/____	Age _____	Social Insurance Number _____
	Consent to participate <input type="radio"/> Yes <input type="radio"/> No		

SCORE: 0

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FAMILIES CANADIAN VERSION 2.0

Children

- How many children under the age of 18 are currently with you? _____ Refused
- 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? _____ Refused
- IF HOUSEHOLD INCLUDES A FEMALE:** Is any member of the family currently pregnant? Y N Refused
- Please provide a list of children's names and ages:

First Name	Last Name	Age	Date of Birth

IF THERE IS A SINGLE PARENT WITH 2+ CHILDREN, AND/OR A CHILD AGED 11 OR YOUNGER, AND/OR A CURRENT PREGNANCY, THEN SCORE 1 FOR FAMILY SIZE. SCORE: 0

IF THERE ARE TWO PARENTS WITH 3+ CHILDREN, AND/OR A CHILD AGED 6 OR YOUNGER, AND/OR A CURRENT PREGNANCY, THEN SCORE 1 FOR FAMILY SIZE.

A. History of Housing and Homelessness

- Where do you and your family sleep most frequently? (check one)
 - Shelters
 - Couch Surfing
 - Outdoors
 - Other (specify): _____
 - Refused

IF THE PERSON ANSWERS ANYTHING OTHER THAN "SHELTER," "TRANSITIONAL HOUSING," OR "SAFE HAVEN," THEN SCORE 1. SCORE: 0

- How long has it been since you and your family lived in permanent stable housing? _____ Yes No Refused
- In the last year, how many times have you and your family been homeless? _____ Refused

IF THE FAMILY HAS EXPERIENCED 6 OR MORE CONSECUTIVE MONTHS OF HOMELESSNESS, AND/OR 3+ EPISODES OF HOMELESSNESS, THEN SCORE 1. SCORE: 0

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FAMILIES CANADIAN VERSION 2.0

B. Risks

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

IF THE TOTAL NUMBER OF INTERACTIONS EQUALS 4 OR MORE, THEN SCORE 1 FOR EMERGENCY SERVICE USE. SCORE: 0

- Have you or anyone in your family been attacked or beaten up since they've become homeless? Y N Refused
- Have you or anyone in your family threatened to or tried to harm themselves or anyone else in the last year? Y N Refused

IF "YES" TO ANY OF THE ABOVE, THEN SCORE 1 FOR RISK OF HARM. SCORE: 0

- Do you or anyone in your family have any legal stuff going on right now that may result in them being locked up, having to pay fines, or that make it more difficult to rent a place to live? Y N Refused

IF "YES," THEN SCORE 1 FOR LEGAL ISSUES. SCORE: 0

- Does anybody force or trick you or anyone in your family to do things that you do not want to do? Y N Refused
- Do you or anyone in your family ever do things that may be considered to be risky like exchange sex for money, run drugs for someone, have unprotected sex with someone they don't know, share a needle, or anything like that? Y N Refused

IF "YES" TO ANY OF THE ABOVE, THEN SCORE 1 FOR RISK OF EXPLOITATION. SCORE: 0

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FAMILIES CANADIAN VERSION 2.0

C. Socialization & Daily Functioning

- Is there any person, past landlord, business, bookie, dealer, or government group like the CRA that thinks you or anyone in your family owe them money? Y N Refused
- Do you or anyone in your family get any money from the government, a pension, an inheritance, working under the table, a regular job, or anything like that? Y N Refused

IF "YES" TO QUESTION 14 OR "NO" TO QUESTION 15, THEN SCORE 1 FOR MONEY MANAGEMENT. SCORE: 0

- Does everyone in your family have planned activities, other than just surviving, that make them feel happy and fulfilled? Y N Refused

IF "NO," THEN SCORE 1 FOR MEANINGFUL DAILY ACTIVITY. SCORE: 0

- Is everyone in your family currently able to take care of basic needs like bathing, changing clothes, using a restroom, getting food and clean water and other things like that? Y N Refused

IF "NO," THEN SCORE 1 FOR SELF-CARE. SCORE: 0

- Is your family's current homelessness in any way caused by a relationship that broke down, an unhealthy or abusive relationship, or because other family or friends caused your family to become evicted? Y N Refused

IF "YES," THEN SCORE 1 FOR SOCIAL RELATIONSHIPS. SCORE: 0

D. Wellness

- Has your family ever had to leave an apartment, shelter program, or other place you were staying because of the physical health of you or anyone in your family? Y N Refused
- Do you or anyone in your family have any chronic health issues with your liver, kidneys, stomach, lungs or heart? Y N Refused
- Does anyone in your family have any physical disabilities that would limit the type of housing you could access, or would make it hard to live independently because you'd need help? Y N Refused
- When someone in your family is sick or not feeling well, does your family avoid getting medical help? Y N Refused

IF "YES" TO ANY OF THE ABOVE, THEN SCORE 1 FOR PHYSICAL HEALTH. SCORE: 0

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Appendix A - VI-SPDAT for Families, v2 - (Continued)

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FAMILIES CANADIAN VERSION 2.0

23. Has drinking or drug use by you or anyone in your family led your family to being kicked out of an apartment or program where you were staying in the past? Y N Refused

24. Will drinking or drug use make it difficult for your family to stay housed or afford your housing? Y N Refused

IF "YES" TO ANY OF THE ABOVE, THEN SCORE 1 FOR SUBSTANCE USE. SCORE: 0

25. Has your family ever had trouble maintaining your housing, or been kicked out of an apartment, shelter program or other place you were staying, because of:

a) A mental health issue or concern? Y N Refused

b) A past head injury? Y N Refused

c) A learning disability, developmental disability, or other impairment? Y N Refused

26. Do you or anyone in your family have any mental health or brain issues that would make it hard for your family to live independently because help would be needed? Y N Refused

IF "YES" TO ANY OF THE ABOVE, THEN SCORE 1 FOR MENTAL HEALTH. SCORE: 0

27. IF THE FAMILY SCORED 1 EACH FOR PHYSICAL HEALTH, SUBSTANCE USE, AND MENTAL HEALTH: Does any single member of your household have a medical condition, mental health concerns, and experience with problematic substance use? Y N N/A or Refused

IF "YES"; SCORE 1 FOR TRI-MORBIDITY. SCORE: 0

28. Are there any medications that a doctor said you or anyone in your family should be taking that, for whatever reason, they are not taking? Y N Refused

29. Are there any medications like painkillers that you or anyone in your family don't take the way the doctor prescribed or where they sell the medication? Y N Refused

IF "YES" TO ANY OF THE ABOVE, SCORE 1 FOR MEDICATIONS. SCORE: 0

30. YES OR NO: Has your family's current period of homelessness been caused by an experience of emotional, physical, psychological, sexual, or other type of abuse, or by any other trauma you or anyone in your family have experienced? Y N Refused

IF "YES"; SCORE 1 FOR ABUSE AND TRAUMA. SCORE: 0

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FAMILIES CANADIAN VERSION 2.0

E. Family Unit

31. Are there any children that have been removed from the family by a child protection service within the last 180 days? Y N Refused

32. Do you have any family legal issues that are being resolved in court or need to be resolved in court that would impact your housing or who may live within your housing? Y N Refused

IF "YES" TO ANY OF THE ABOVE, SCORE 1 FOR FAMILY LEGAL ISSUES. SCORE: 0

33. In the last 180 days have any children lived with family or friends because of your homelessness or housing situation? Y N Refused

34. Has any child in the family experienced abuse or trauma in the last 180 days? Y N Refused

35. IF THERE ARE SCHOOL-AGED CHILDREN: Do your children attend school more often than not each week? Y N N/A or Refused

IF "YES" TO ANY OF QUESTIONS 33 OR 34, OR "NO" TO QUESTION 35, SCORE 1 FOR NEEDS OF CHILDREN. SCORE: 0

36. Have the members of your family changed in the last 180 days, due to things like divorce, your kids coming back to live with you, someone leaving for military service or incarceration, a relative moving in, or anything like that? Y N Refused

37. Do you anticipate any other adults or children coming to live with you within the first 180 days of being housed? Y N Refused

IF "YES" TO ANY OF THE ABOVE, SCORE 1 FOR FAMILY STABILITY. SCORE: 0

38. Do you have two or more planned activities each week as a family such as outings to the park, going to the library, visiting other family, watching a family movie, or anything like that? Y N Refused

39. After school, or on weekends or days when there isn't school, is the total time children spend each day where there is no interaction with you or another responsible adult...

a) 3 or more hours per day for children aged 13 or older? Y N Refused

b) 2 or more hours per day for children aged 12 or younger? Y N Refused

40. IF THERE ARE CHILDREN BOTH 12 AND UNDER & 13 AND OVER: Do your older kids spend 2 or more hours on a typical day helping their younger sibling(s) with things like getting ready for school, helping with homework, making them dinner, bathing them, or anything like that? Y N N/A or Refused

IF "NO" TO QUESTION 38, OR "YES" TO ANY OF QUESTIONS 39 OR 40, SCORE 1 FOR PARENTAL ENGAGEMENT. SCORE: 0

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FAMILIES CANADIAN VERSION 2.0

Scoring Summary

DOMAIN	SUBTOTAL	RESULTS
PRE-SURVEY	0 / 72	
A. HISTORY OF HOUSING & HOMELESSNESS	0 / 72	Score: Recommendation: 0-3 no housing intervention 4-8 an assessment for Rapid Re-Housing 9+ an assessment for Permanent Supportive Housing/Housing First
B. RISKS	0 / 74	
C. SOCIALIZATION & DAILY FUNCTIONS	0 / 74	
D. WELLNESS	0 / 76	
E. FAMILY UNIT	0 / 74	
GRAND TOTAL:	1 / 222	

Follow-Up Questions

On a regular day, where is it easiest to find you and what time of day is easiest to do so? place: _____ time: _____ or Night

Is there a phone number and/or email where someone can safely get in touch with you or leave you a message? phone: (____) _____-____ email: _____

Ok, now I'd like to take your picture so that it is easier to find you and confirm your identity in the future. May I do so? Yes No Refused

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

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

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Appendix D - Community Access Points (CAP) - Identified

Any agency in Lambton County can add an individual or family to the By-Name List by completing the Intake process.

Should a household present as homeless at an agency who is not identified as a Community Access Point, the agency will make a connection to one of the following Lambton County's Community Access Points for Intake:

Community Access Points in Lambton County
❖ Canadian Mental Health Association (CMHA)
❖ The Corporation of the County of Lambton - Social Services Division
❖ The Inn of the Good Shepherd <ul style="list-style-type: none">○ The Lodge (Adult Shelter)○ The Haven (Youth Shelter)
❖ North Lambton Community Health Centre
❖ Sarnia-Lambton Rebound
❖ Sarnia-Lambton Native Friendship Centre
❖ Women's Interval Home
❖ <i>Temporary Congregate Care Sites</i>