

Phased Assessment Part 4A – Determination to Proceed with Housing Assessment:

Client Name: _____

Date: ___ / ___ / ___

HMIS #: _____

- An Entry Point Housing Assessment should only be done for households who are literally homeless AND want assistance securing stable housing but cannot secure stable housing on their own.
 - If not literally homeless, connect to Call Center or Walk-In Center for HP or STSS resources.
- For Chronic Households, TAY (18-24) Households and Households with Minor Children, assess housing interest and initiate VI-SPDAT assessment as soon as clinically appropriate, ideally within 7-14 days of program entry.
- For all other Adult Only Households, assess housing interest and initiate VI-SPDAT assessment after 7-14 nights of stay/contacts/services.

Check all that apply:

- Client is literally homeless based upon client report at time of intake.
- I have reviewed the Entry Point Inclusion Policy with client and obtained signature indicating that client understands their rights (signature block is page 3 of Entry Point Consent Form)
- I have reviewed the client's Sub Cook Chronic Homeless Assessment and disability information in HMIS. I verify the data is correct and logical.
- Based upon HMIS data, client is chronically homeless
- Yes, client wants assistance securing stable housing and cannot secure stable housing on their own.
- No, client does not want housing assistance at this time.

If client is interested in assistance pursuing stable housing:

- **Client must sign the CE VI-SPDAT consent form before proceeding***
- **Continue with Part 4B, record results in HMIS in Housing Interest/VI-SPDAT Status located on Client Summary Page;**
- **Record Signed CE Consent Form status on Client Summary Page;**
- **Record VI-SPDAT results in VI-SPDAT Assessment on Client Summary Page;**
- **Initiate HMIS Entry Point Progress Tracker located on Client Profile Page.**

If client is not interested in assistance pursuing stable housing at this time:

- **Record results in HMIS in Housing Interest/VI-SPDAT Status located on Client Summary Page;**
- **Do not continue the Entry Point Assessment;**
- **Revisit the housing conversation with client within a month and resume assessment when client wants assistance pursuing stable housing.**

Staff Signature

Name

Date

Supervisor Signature

Name

Date



Phased Assessment Part 4B – Vulnerability and Severity of Service Needs:

The information gathered in this form is used to assist in prioritizing housing matches based on the client's vulnerability and needs. The information is **NOT** used as criteria for determining eligibility for any program, and we are committed to serving people with the most serious needs and challenges first. **This form is to be filled out by STAFF only!**

Vulnerability Assessment:

Present CE VI-SPDAT Consent and complete appropriate Assessment (*In the rare event client denies sharing, contact Entry Point Referral Manager for instructions)

VI-SPDAT Findings:

This VI-SPDAT was used and resulted in this score:

- VI-SPDAT 2.0 for Households with **minor** children - Score: _____
- VI-SPDAT 1.0 for Transition Aged Youth Individuals (aged 18 - 24) - Score: _____
- VI-SPDAT 2.0 for Adult Individuals - Score: _____
- VI-SPDAT was completed, but client denies sharing
- Estimated VI-SPDAT (complete section below)
- Noteworthy factors impacting severity of service needs exist (complete section below)

Estimated VI-SPDAT scoring considerations:

A VI-SPDAT score could not be determined because:

- The client is not willing to complete the VI-SPDAT survey, explain efforts made to complete VI-SPDAT:

- The client is unable to recall or report the answers to the questions on the VI-SPDAT survey

- The client under-reported their vulnerability or needs in the following way(s):

- The client over-reported their vulnerability or needs in the following way(s) (be specific):

I estimate the client's correct VI-SPDAT score to be: _____

Discuss estimated VI-SPDAT score and your rationale with your supervisor prior to contacting the CE Lead team to request approval of estimated score. Verification of disabilities, etc. will be secured in the next step of Assessment.

Domestic Violence Prioritization Indicator Assessment:

If household is **fleeing or attempting to flee** (Category 4) domestic violence, dating violence, sexual assault, stalking, or other dangerous or life-threatening situations related to violence; have no other residence; and lack the resources or support networks to obtain other permanent housing, administer the Domestic Violence Prioritization Indicator Assessment. Enter that score in the appropriate place on the Entry Point Assessment Progress Tracker in HMIS and follow all HMIS safety protocols to protect client information.

DV Prioritization Indicator Assessment Score: _____

Noteworthy factors impacting severity of service needs (based on the worker's assessment):

(The following is to be used to convey a client's severity of need or vulnerability, justify an adjusted VI-SPDAT score, and assist with case conferencing.)

I have profound concern for this client's well-being due to (indicate all that apply):

- Extremely frail physical health (explain): _____
- Fragile or rapidly deteriorating mental health, including (circle observed signs): disconnected from reality, reports hearing voices instructing harmful behavior, severe disorientation, etc., explain: _____

- The client is being targeted for abuse, hate activity, etc. due to (circle possible reasons): mental status, gender identity or expression, religion, disability, or is being stalked by a predator or abuser, explain: _____

- The client engages in very risky elements of the street economy (explain): _____

- Other severe risks or concerns (provide details): _____

This client is especially challenging to engage productively because:

- The client has difficulty (circle all that apply): recognizing staff, engaging relationally / interpersonally, or remembering prior discussions between encounters.
- The client has little interest in reengaging in services.
- The client maintains little hope that any services will be helpful to them.
- The client is difficult to locate on a routine basis due to (circle what applies): frequent incarceration or frequently admitted to hospitals.
- The client is unable to tolerate or endure lengthy or multi-staged assessment processes.
- The client is unable to sustain goal-directed efforts for a span of time adequate to achieve completion of forms and other tasks.
- The client does not acknowledge (circle all that apply): any difficulties and/or disabilities and/or does not wish to have any documented. Explain: _____

Other challenges:

Other factors:

- The client seems to lack ability or resolve to keep self safe.
- The client does not seek or initiate services.
- The client is unsheltered and sleeps: _____
- The client is extremely isolated, and does not have support of any friends, family, or other peers or community.
- The client has difficulty accessing safe and respectful services and care due to gender or sexual identity or expression.
- The client has limited mobility AND is not able to access shelters or travel easily.
- The client is frequently targeted by negative attention from residents, businesses, and / or police as evidenced by: _____
- The client is pregnant and/or has children age 6 or under.
- Other relevant factors: _____

Staff Signature

Name

Position

Supervisor Signature

Name

Position