SCREENING & ASSESSMENT TOOLS FOR HOUSING FIRST

Housing Forum on Evidence-Based Practices

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OVERVIEW OF SESSION

- Review of screening tools

- Vulnerability Assessment Tool (VAT) Evaluation

- Housing Support Assessment Tool (HSAT) Evaluation

- Your experiences using screening and assessment tools

REVIEW OF SCREENING/PRIORITIZATION TOOLS

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REVIEW OF SCREENING & ASSESSMENT TOOLS

THE SCREENING PROCESS CAN SERVE SEVERAL PURPOSES. The process allows for initial engagement to be made with homeless individuals in the community. Once contact has been made, homeless service providers can begin to determine if individuals meet program eligibility requirements. From there, a system of prioritization can be developed in order to place individuals with the highest needs into Housing First services quickly. The focus of this review is on the screening process which is just one phase of the assessment road map.

REVIEW OF SCREENING & ASSESSMENT TOOLS

THE SCREENING PROCESS MAY DIFFER DEPENDING UPON THE NEEDS AND COMPOSITION OF A COMMUNITY'S HOMELESS POPULATION, BUT THE SCALE SHOULD BE AS BRIEF AS POSSIBLE. Moreover, certain domains should be assessed. These are:

- HOUSING STATUS: *Is the person homeless? Chronically? Episodically?*
- VULNERABILITY STATUS: *What is their level of vulnerability (physical health, mental health, substance use)? Is the person at risk of harm to him/herself or others?*
- SERVICE USE: *Is the individual a high service user?*
- SEVERITY OF NEED: *What is the individual's severity of need (low, moderate, high)?*
- FURTHER ASSESSMENT: *Does the individual require further assessment or assistance?*

REVIEW OF SCREENING & ASSESSMENT TOOLS

As the homeless service sector is generally unaware of the wide range of screening options available beyond the VI-SPDAT, a Housing First Assessment Taskforce was created by the Canadian Observatory on Homelessness to provide recommendations of other suitable screening tools for communities to use. The Taskforce included researchers with extensive experience with measures relevant to those who experience mental health problems and illnesses, service providers, and program managers. (SEE APPENDIX A FOR MEMBERSHIP.)

THE FIRST STEP FOR THE TASKFORCE WAS CONDUCTING A SCAN OF EXISTING PRACTICES AND SCREENING TOOLS USED IN THE HOMELESSNESS SECTOR. These tools were rated based upon criteria developed by the Department of Housing and Urban Development (HUD) in the United States. The criteria states that **tools should be valid, reliable, inclusive, person-centered, user-friendly, strengths-based, have a Housing First orientation, sensitive to lived experiences, and transparent.** The tools were also assessed on training requirements and locations of use.

REVIEW OF SCREENING & ASSESSMENT TOOLS

A TOTAL OF 17 TOOLS WERE LOCATED IN THE SEARCH AND EACH WAS ASSESSED USING THE HUD CRITERIA.[2] The strengths and weaknesses of the tools were discussed among the Taskforce members during monthly meetings. Once the most promising tools were identified, key informant interviews were conducted with the developers and current users of the tools. This process enabled the Taskforce to uncover the specifics of each tool and develop a comprehensive understanding of their use and scope.

NAME OF TOOL: DENVER ACUITY SCALE
WHO DEVELOPED IT: DENVER
COST: UNSURE

HOW IS IT USED?	STRENGTHS	WEAKNESSES	SUPPORTING LITERATURE/ VALIDITY/RELIABILITY

• Determines the intensity of case management needed
• 8 domains
   • *Treatment participation*
   • *Medication compliance*
   • *Housing*
   • *Basic needs*
   • *Benefits and income stream*
   • *Substance abuse*
   • *Danger to self or others*
   • *Crisis incidents*
• 5-point rating scale: 1 (low acuity) to 5 (high acuity)
	• Taps into important domains
	• Easy to use
		• Not necessarily developed for use with a homeless population
		• Not an eligibility scale
		• No mention of demographic questions
		• Evaluates treatment compliance – not compatible with a Housing First approach
			Supporting Literature: Intensity and duration of intensive case management services. Sherman & Ryan (1998)
			
			However, no psychometric properties reported.

REVIEW OF SCREENING & ASSESSMENT TOOLS

Based upon this process, the Taskforce concluded that the Vulnerability Assessment Tool (SEE APPENDIX B FOR A COPY OF THE RATING SCALE) was the best brief screening tool available that can assist with prioritization[3] of clients for Housing First programs. The Tool was developed by the Downtown Emergency Service Centre in Seattle, Washington. It involves a structured interview to assess a homeless individual on 10 domains: survival skills, basic needs, indicated mortality risks, medical risks, organization/orientation, mental health, substance use, communication, social behaviours, and homelessness. Scores are rated on a five-point scale, with higher scores indicating a greater vulnerability. The Tool has been evaluated by external reviewers and has demonstrated good reliability and validity. The Tool is also easy to use, relatively short, and maintains a person-centered focus.

REVIEW OF SCREENING & ASSESSMENT TOOLS

New Research on the Reliability and Validity of the VI-SPDAT: Implications for Coordinated Assessment

Molly Brown and Camilla Cummings

Why is Evidence-based Coordinated Assessment Important?

Coordinated assessment instruments are at the foundation of centralized housing waitlists. Without a strong foundation, the whole house may come crumbling down. Instruments that do not accurately assess an individual's housing support service needs may unintentionally reduce a highly vulnerable individual's opportunity for housing. Alternatively, inaccurate assessment may inappropriately prioritize a person with lower support service needs for costly housing interventions like permanent supportive housing. In some cases, a difference of one point on an assessment instrument could determine whether a person is prioritized for a particular type of housing service. Ineffective housing prioritization has major implications for the wellbeing of vulnerable people and for the systems serving them.

REVIEW OF SCREENING & ASSESSMENT TOOLS

- **The VI–SPDAT did not produce consistent results.** In terms of reliability, we found individuals that were administered the VI–SPDAT twice did not produce consistent scores. In fact, 89% produced either higher or lower scores during their second administration. The observer-rated items were not reported consistently across administrations, suggesting the omission of these items in the VI–SPDAT version 2 likely improved the tool.
- **The questions did not fully measure the concept of "vulnerability".** In terms of the validity, we found that several questions on the VI–SPDAT were not strongly related, or were related in an unexpected way (e.g., the presence of a health condition was associated with lower vulnerability), with the concept of vulnerability and/or with the VI–SPDAT subdomains. The Socialization and Daily Functions domain and health-related items on the Wellness domain demonstrated particularly poor validity.
- **The type of housing support a person had was a better predictor of returning to homelessness than their VI–SPDAT score.** It is reasonable to expect that individuals who are more vulnerable are at higher risk of housing instability or homelessness than those who are less vulnerable. However, among individuals in this study who were permanently housed after taking the VI–SPDAT, higher scores were only marginally associated with the likelihood they would re-enter homeless services (a proxy measure for housing stability). Rather, the type of housing a person obtained (i.e., rapid rehousing or unsubsidized housing) was a stronger predictor of increased risk of homeless service re-entry.

REVIEW OF SCREENING & ASSESSMENT TOOLS

- **Limitations to Screening & Assessment Tools**

  - Individuals are incentivized to lie in order to inflate scores

  - Can be challenging for low functioning individuals to participate

  - Do not take into account structural factors that cause homelessness (i.e., Indigenous identity, ethno-racial identity, LGBTQ2S+)

EVALUATION OF THE VULNERABILITY ASSESSMENT TOOL

EVALUATION OF THE VAT

The VAT involves a structured interview to assess an individual experiencing homelessness or marginal housing on 10 domains: survival skills, basic needs, indicated mortality risks, medical risks, organization/orientation, mental health, substance use, communication, social behaviours, and homelessness. Each domain is rated on a five-point scale, with the exception of the homelessness domain which is rated on a three-point scale. The scores from each domain are summed and the total score can range from 10 to 48. There are no scoring cut-offs, instead higher scores indicate a greater vulnerability to continued housing instability.

Basic Needs
Ability to obtain/maintain food, clothing, hygiene, etc.

No Trouble Meeting Needs	Mild Difficulty Meeting Needs	Moderate Difficulty Meeting Needs	High Difficulty Meeting Needs	Severe Difficulty Meeting Needs
Generally able to use services to get food, clothing, takes care of hygiene, etc.	Some trouble staying on top of basic needs, but usually can do for self (e.g. hygiene/clothing are usually clear/good)	Occasional attention to hygiene; has some openness to discussing issues; generally poor hygiene, but able to meet needs with assistance (e.g. prompting and I&R (Information and Referral)	Doesn't wash regularly; uninterested in I&R or help, but will access services in emergent situations; low insight re. needs	Unable to access food on own; very poor hygiene/clothing (e.g. clothes very soiled, body very dirty, goes through garbage & eats rotten food) resistant to offers of help on things; no insight
1	2	3	4	5

Comments or observations about basic needs:

EVALUATION OF THE VAT

BC HOUSING AND THE VAT

BC Housing adopted the VAT in 2014, with slight adjustments in its use to reach the following objectives:

1. Assess eligibility of applicants for housing at supportive housing sites opening in Vancouver

2. Assess the needs of applicants in supportive housing

3. Inform decisions around housing placements to ensure applicants are placed in housing with appropriate supports

4. Inform decisions around housing placements to ensure a workable tenant mix is created at supportive housing sites relative to the supports available at those sites

5. Provide consistency among service providers and non-profits with a common assessment tool

6. Create a fair and transparent process around who gets housed in supportive housing

EVALUATION OF THE VAT

EVALUATION METHODOLOGY

The evaluation assessed the impacts resulting from the use of the VAT at seven MOU sites in Vancouver. The evaluation assessed the impacts of the VAT in terms of housing people who are homeless, creating a workable tenant mix at housing sites, working towards housing stability and stable tenancies, achieving tenant satisfaction with housing and supports, producing improved tenant outcomes, and creating a fair and transparent process around who is selected for supportive housing.

The methodology incorporated a mixed methods design, namely a design that includes both quantitative and qualitative components. This type of design was fitting for the evaluation, as quantitative and qualitative data was needed to answer the main evaluation questions. A detailed description of the proposed methodology (i.e., method and source of data) is presented in the evaluation matrix that follows.

EVALUATION OF THE VAT

KEY QUANTITATIVE FINDINGS

Total VAT Score

The average total VAT score for all clients was 20.34. Therefore, clients were scoring on the low to mid level of the VAT.

VAT Domains

The average of the domain items of the VAT all fell below 2.5. The highest scores focused on mental health, substance use, and medical risk.

VAT and Previous Housing

Clients who were homeless and who where living in a SRO had higher total VAT scores than those at risk of homelessness.

Clients who were homeless had similar total VAT scores to those who were living in a SRO.

Housing Outcomes

As VAT scores increased, clients' length of stay decreased. As support level increased, length of stay decreased.

Length of stay did not differ based upon previous housing

Older clients, males, and non-Aboriginal clients had longer lengths of stay.

Demographic Differences

There was no differences in total VAT scores based upon age and gender. Non-Aboriginal clients scored slightly higher on the VAT than Aboriginal clients.

EVALUATION OF THE VAT

QUALITATIVE RESULTS

The qualitative results provide an in-depth analysis of the administration of the VAT and its application with housing clients in relation to the objectives identified below.

Fairness/transparency

- The VAT has significantly improved fairness and transparency of the tenant placement process by establishing a "common language" and systematic process for tenant selection that most housing providers have "bought into. This is a significant achievement in an environment where there are many buildings, administered by housing providers with varying approaches and philosophies.

Efficiency/burden/experience

- The process was regarded by stakeholders as definitely worth the time spent, and as eliciting rich information and allowing a reasonably accurate picture of the tenant to emerge in a relatively short time.

- The VAT interview itself was viewed as a positive experience by most of the tenants, and was experienced as safe and understandable, though there were some concerns about the consequences of providing forthright answers, and about certain questions eliciting some discomfort.

EVALUATION OF THE VAT

Consistency

- For the most part, interviews were being carried out consistently, though there was some variability with respect to how some assessors were using the questionnaire, and possibly with respect to ratings. With the expanding base of assessors, it will be important to bring an increased focus to quality assurance and ongoing training.

Support planning

- The VAT can be used effectively to match housing and support levels for individual clients and is able to determine the proportion of clients considered low, moderate and high vulnerability. While the tool is a good resource for opening up a conversation about support planning, the VAT itself is not a clinical tool and it assumes additional case management planning will be done with tenants once they are housed.

EVALUATION OF THE VAT

Impact

- Stakeholders, including tenants, viewed the VAT process as having a generally positive impact on creating stable tenancies and a workable tenant mix. The tool/process (including the addendum interview) is seen as valuable for matching prospective tenants with a building that is a good fit and has an appropriate level of support. Tenants viewed the process as enabling them to be placed in settings where they were generally satisfied with their housing and which contributed to their recovery. Concerns were expressed by some tenants about the mix of tenants (e.g. tenants with unmanaged mental illness or addictions) and about disruptive behavior in or around the buildings, (drug dealing, vandalism, sex work, etc.).

EVALUATION OF THE VAT

WHAT'S WORKED WELL

- The new system has significantly improved the fairness and transparency of the tenancy placement process by creating a common language and understanding of the process and an objective picture of vulnerability

- The tool is seen as eliciting rich, relevant information in a relatively short period of time

- There is a high degree of consensus in the community about the value of the tool and the process

- The tool/process (including the addendum interview) is seen as valuable for matching prospective tenants with a building which is a good fit, and has an appropriate level of support

- The process is seen as valuable in terms of creating a workable tenant mix at the buildings that use it

- The skill and sensitivity of the assessors themselves is seen as a significant strength of the system

EVALUATION OF THE VAT

WHAT'S WORKED LESS WELL

- There are still some issues with transparency of how the system works (e.g. pre-screening for a VAT interview, what happens to people's place on the waitlist if they don't get access to housing)

- Some questions in particular (e.g., about family relationships) are seen as triggering discomfort, which may be exacerbated when prospective tenants are not clear about the purpose of the questions, or when there is no opportunity to debrief

- The VAT write-up "narrative" seems to be inconsistently delivered and/or used, which may constitute a "missed opportunity", given that the information is seen by many as a valuable opportunity to "open up a conversation" about support planning; the VAT itself is not a clinical tool, however, and the process assumes additional case management planning will be done with tenants once they are housed

- The emphasis on tenant mix (and diminishing supply of high-support spaces, and concomitant lack of appropriate intensity of clinical support in certain buildings) has meant that there is a barrier to housing people with high VAT scores

- While the pool of trained assessors is growing, there is a need to develop a more systematic approach to training and quality control amongst VAT assessors

VAT

REMINDER

AS COMMUNITIES PREPARE TO UNDERTAKE THE TASK OF IMPLEMENTING A STANDARDIZED TOOL TO ASSESS PRIORITY/ELIGIBILITY FOR HOUSING FIRST PROGRAMS THEY SHOULD:

- **ENGAGE IN A PROCESS OF SYSTEM MAPPING TO ENSURE THERE IS A SHARED UNDER-STANDING OF AVAILABLE PROGRAMS AND THEIR TARGET POPULATIONS, SERVICE SYSTEM CAPACITY AND GAPS, AND ITS ALIGNMENT WITH COMMUNITY PRIORITIES.** For example – are their programs that are only serving women fleeing violence, veterans, etc. and are these characteristics captured in the assessment process so they can inform service placement? It is critical that communities have a shared, collective understanding of their homeless population and the services available to them in order to ensure accurate placements.

- **BE OPEN TO ADAPTATIONS IN HOW YOU USE ASSESSMENT TOOLS TO MEET YOUR LOCAL NEEDS!** Keep in mind that assessment tools supplement all of the other information you are collecting through contacts with clients and other service providers. What is it that your community needs to know about the client being assessed to ensure there is a robust, useful, and reliable process for prioritizing placements and determining the most appropriate placement? Remember that the goal of a standardized assessment tool is to contribute to the needed information and facilitate the processes that ensure the best program match. Do you have the information necessary to do this?

REMINDER

- DEVELOPING PROCESSES FOR GATHERING FEEDBACK ON THE USE OF THE SELECTED ASSESSMENT TOOL WILL HELP COMMUNITIES ASSESS ITS USEFULNESS IN DETERMINING CLIENT PLACEMENTS, IDENTIFYING ADAPTATIONS THAT MAY BE NEEDED AND INFORMING FUTURE PLANNING (I.E. ANY GAPS IN THE SYSTEM). When developing this feedback process, communities should ensure they are collecting the necessary information for coordinating access and assessments to answer the question, "Does our tool, and our processes/practices improve our ability to prioritize clients, make appropriate referrals based on assessed needs within the parameters of program eligibility requirements, and ultimately improve outcomes for clients in Housing First programs?"

- STANDARDIZING ASSESSMENTS WILL IMPACT HOW THE SYSTEM FUNCTIONS AND NEEDS TO BE VALUE-ADDED. It is critical to develop community buy-in and this will necessitate multiple and ongoing efforts to facilitate collaboration and solicit feedback (this will also inform the first previous three points!) A useful mechanism for facilitating collaboration and soliciting feedback are placement committees which bring together service providers to review assessments and discuss appropriate program placements. Placement committees allow for ongoing dialogue and sharing of information above and beyond the assessment tool (e.g. previous experiences with a particular client around what worked really well) through dialogue taking into consideration all of the information about a client and not relying solely or narrowly on a number or score provided by a standardized assessment. Placement committees also allow for the continued autonomy of agencies as active participants in the decision-making process of who they ultimately intake into their program.

THANK YOU!

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