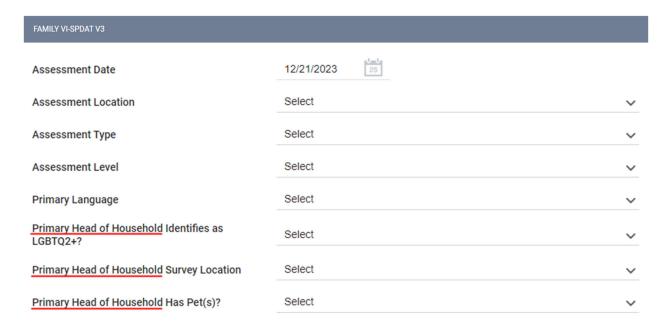
FAMILY VI-SPDAT

Use for Category 1 Households with adults and children

Preliminary questions (see below) are the same as the Individual VI-SPDAT except the last three questions are specified for the *primary head of household underlined in red*

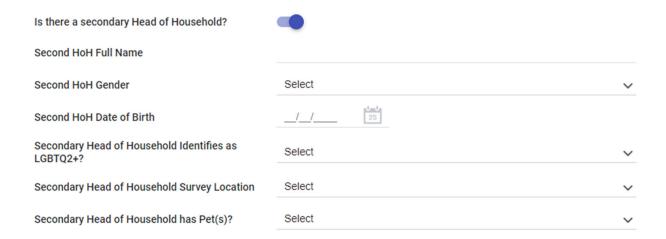


If there are no other Heads of Households, leave the following button "Is there a secondary Head of Household" un-toggled:

Is there a secondary Head of Household?



If there is a secondary Head of Household, toggle this button. This will bring up basic demographic fields for the secondary Head of Household (pictured below):



SECTION ONE: CHILDREN WITHIN THE HOUSEHOLD

How many children under the age of 18 are currently with you?



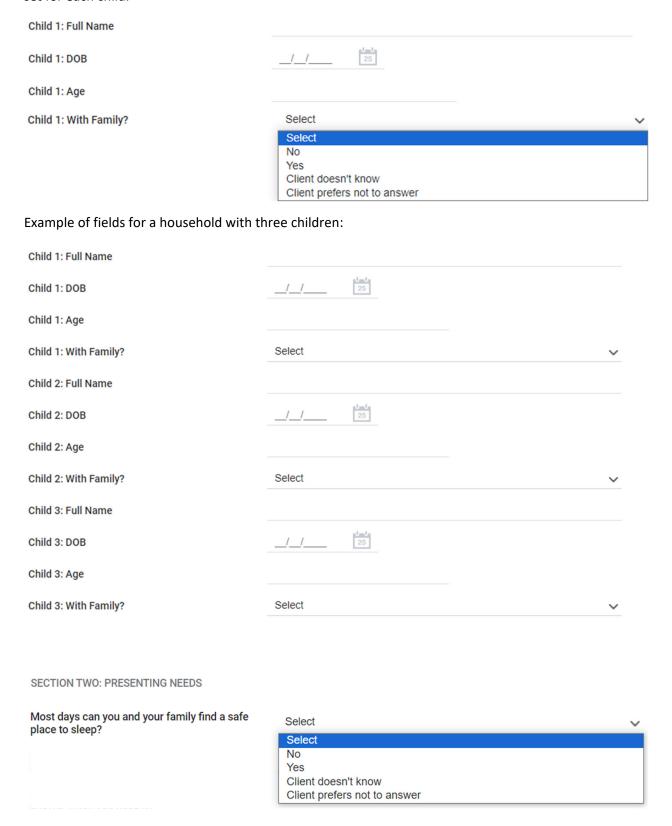
How many children under the age of 18 are not currently with your family, but you have reason to believe they will be joining you when you get housed?



Is any member of the family currently pregnant?



The following questions will be generated based on the number of children in the family. If there is one child, you will see only fields for Child 1. If there are more than one child, you will see more fields, one set for each child.



Most days can you and your family access a Select bathroom when you need it? Select No Yes Client doesn't know Client prefers not to answer Most days can you and your family access a Select shower when you need it? Select No Yes Client doesn't know Client prefers not to answer Most days can you and your family get food? Select Select No Yes Client doesn't know Client prefers not to answer Most days can you and your family get water or Select other non-alcoholic beverages to stay hydrated? Select No Yes Client doesn't know Client prefers not to answer Most days can you and your family get clothing Select or access laundry when you need it? Select No Yes Client doesn't know Client prefers not to answer Most days can you and your family safely store Select your stuff? Select No Yes Client doesn't know Client prefers not to answer N/A SECTION THREE: HOUSING HISTORY & CHRONIC HOMELESSNESS DETERMINATION How long has it been since you and your family Select lived in stable, permanent housing?

Select

Select

Less than a week

1 week - 3 months

3 - 6 months

6 months to 1 year

1 - 2 years

2 years or more

Client doesn't know

Client prefers not to answer

In the last three years, how many times have Select you been homeless? Select 0 times 1 time 2 times 3 times 4 times 5 or more times Client doesn't know Client prefers not to answer Do you have any diagnosed, documented, Select disabling conditions? Select No Yes Client doesn't know Client prefers not to answer Has your family ever lived in a home that you Select own or an apartment in your name? Select No Yes Client doesn't know Client prefers not to answer Select Have you and your family ever been evicted? Select No Yes Client doesn't know Client prefers not to answer

SECTION FOUR: VULNERABILITIES AND HOUSING SUPPORT NEEDS

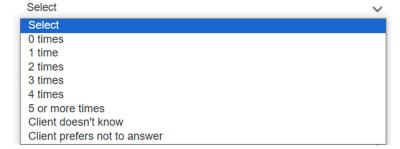
In the last 6 months, how many times have you or anyone in your family gone to the emergency room/department?



In the last 6 months, how many times have you or anyone in your family taken an ambulance?

Select Select 0 times 1 time 2 times 3 times 4 times 5 or more times Client doesn't know Client prefers not to answer

In the last 6 months, how many times have you or anyone in your family been hospitalized as an inpatient?



In the last 6 months, how many times have you or anyone in your family used a crisis service or hotline for such concerns as family or intimate partner violence or suicide prevention?



In last 6 months, # times you/anyone in your family talked to police b/c witnessed a crime, were victim of a crime, were alleged perpetrator of a crime, or b/c they asked you to move along b/c of loitering, sleeping in public place or anything like that?



In the last 6 months, how many times have you or anyone in your family stayed one or more nights in jail, a holding cell or prison?

Select

Select

0 times
1 time
2 times
3 times
4 times
5 or more times
Client doesn't know
Client prefers not to answer

Since your family has been homeless has anyone in your family been beaten up or assaulted?



Since your family has been homeless has anyone in your family threatened to beat up or assault someone else?



Since your family has been homeless has anyone in your family threatened to harm themselves or harmed themselves?



Since your family has been homeless has anyone threatened you or anyone in your family with violence or made any of you feel unsafe?

Select

Select

No
Yes
Client doesn't know
Client prefers not to answer

Since your family has been homeless has anyone tried to control you or anyone in your family through violence or threats of violence whether that be a stranger, friend, partner, relative or someone in your family?



Does anyone in your family have any legal stuff going on right now that may result in being locked up?

Select

Select

No
Yes
Client doesn't know
Client prefers not to answer

Does anyone in your family have any legal stuff going on right now that may result in having to pay fines or fees that you cannot afford?

Select

Select

No
Yes
Client doesn't know
Client prefers not to answer

Does anyone in your family have any legal stuff going on right now that may impact your family's ability to get housing?



Does anyone in your family have any legal stuff going on right now that may impact where you and your family could live in your housing?



Does anyone in your family have any legal stuff going on right now that may impact your family's ability to stay together?



Has anyone in your family ever been convicted of a crime that makes it difficult to access or maintain housing?



Does anyone trick, manipulate, exploit or force anyone in your family to do things they do not want to do?



Where do you and your family sleep most frequently?

Select Select Shelters Transitional Housing Safe Haven Outdoors Couch Surfing Car Other Client doesn't know Client prefers not to answer

Does anyone in your family ever do things that may be considered to be risky or harmful like run drugs, share a needle, do sex work, or anything like that?

Select

Select

No
Yes
Client doesn't know
Client prefers not to answer

Is there anybody that thinks that you or anyone in your family owes them money like a family member, friend, past landlord, business, bookie, dealer, bank, credit card company, utility company or anyone like that?

Select

Select

No
Yes
Client doesn't know
Client prefers not to answer

Do you or anyone in your family get any money from the government, a job, alimony, child support, working under the table, day labor, an inheritance or a pension, or anything like that?

Select

Select

No
Yes
Client doesn't know
Client prefers not to answer

Do you or anyone in your family ever gamble with money they cannot afford to lose or have debts associated with gambling?

Select

Select

No
Yes
Client doesn't know
Client prefers not to answer

Does everyone in your family have planned activities, other than activities for survival, at least four days per week that make them feel happy and fulfilled?



Does your family have a collection of belongings that gets in the way with your ability Select to access services or housing? Select No Yes Client doesn't know Client prefers not to answer Would you say that your family's current Select homelessness was caused by a relationship that broke down? Select No Yes Client doesn't know Client prefers not to answer Would you say that your family's current Select homelessness was caused by an unhealthy or abusive relationship? Select No Yes Client doesn't know Client prefers not to answer Would you say that your family's current Select homelessness was caused by family or friends causing you to lose your housing? Select No Yes Client doesn't know Client prefers not to answer Do most of your family and friends have stable Select housing? Select No Yes Client doesn't know Client prefers not to answer Is anyone in your current household 60 years of Select age or older? Select No Yes Client doesn't know Client prefers not to answer Does anyone in your family have any physical or mental health issues or cognitive issues Select including a brain injury, that might require Select assistance to access or keep housing? No Yes Client doesn't know

Client prefers not to answer

Does anyone in your family use alcohol or drugs in a way that it impacts your life in a negative way most days?



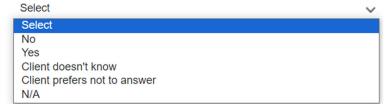
Does anyone in your family use alcohol or drugs in a way that it makes it hard to access housing?



Does anyone in your family use alcohol or drugs in a way that it would require assistance to maintain housing?



Are there any medications that, for whatever reason a doctor said someone in your family should be taking but they are not taking?



Are there any medications that, for whatever reason the medication gets sold instead of being taken?



Are there any medications that, for whatever reason the medication is used other than how it is prescribed?



Are there any medications that, for whatever reason the medication is impossible to take, forgotten, or chosen not to take it?



Has your family's homelessness been caused by any recent or past trauma or abuse?



Are there any children that have been removed from the family by a child protection service in the last six months?



Do you have any family legal issues like child custody, protection issues, divorce, or anything like that being resolved in court or needing to be resolved in court that would impact your housing or who may live within your housing?



At any point in the last six months, have any of your children been separated from you to live with another family member or friend?



In the last six months, have any of the children experienced abuse or trauma?



If there are school-aged children: Do your children attend school more often than not each week?



In the last six months, have the adults in the family changed because of a new relationship, a separation, incarceration, military deployment, or anything like that?

Select

Select

No
Yes
Client doesn't know
Client prefers not to answer

Do you anticipate any other adults or children coming to live with your family in the first six months after you and your family get housed?



Does your family have a support network for when you need help with your children or other things that come up?

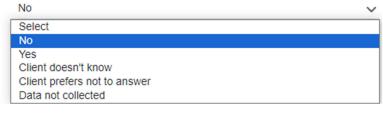


If there are children 12 and under as well as 13 and over: In your household do the older kids spend 2 or more hrs on a typical day helping their younger siblings with things like getting ready for school, homework, dinner, bathing, or anything like that?



FINALLY, I'D LIKE TO ASK YOU SOME QUESTIONS TO HELP US BETTER UNDERSTAND HOMELESSNESS AND IMPROVE HOUSING AND SUPPORT SERVICES.

Veteran Status



Where did you live prior to becoming homeless?



