



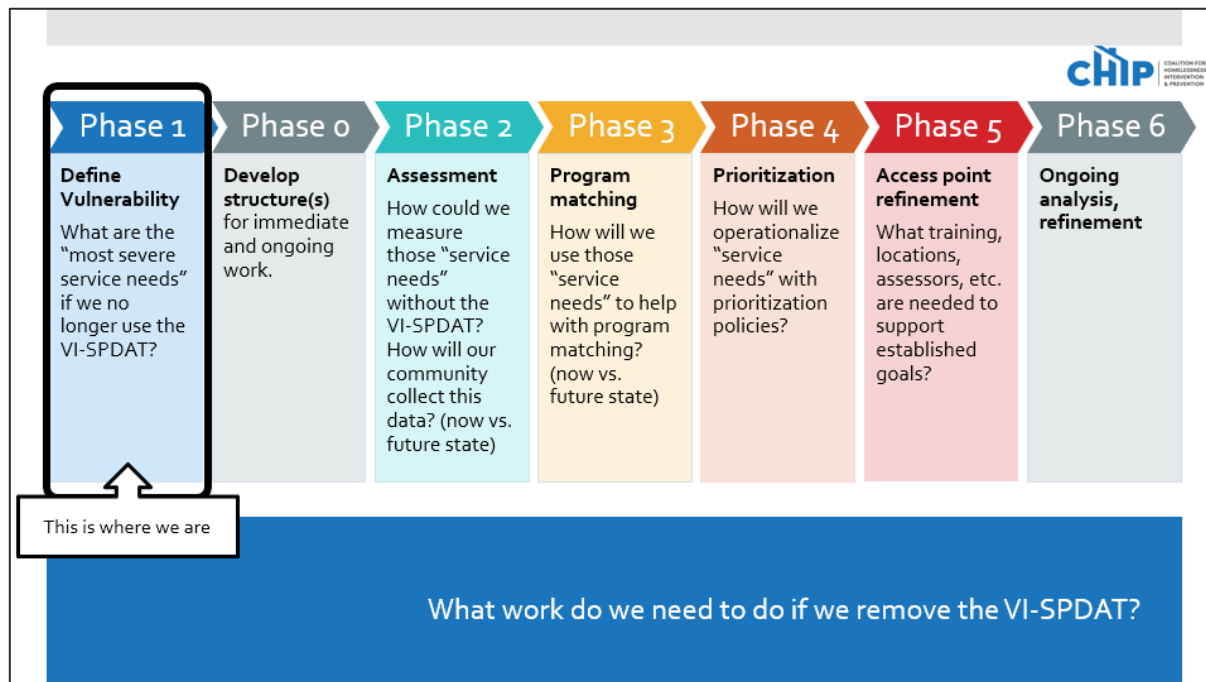
# INDIANAPOLIS COORDINATED ENTRY SYSTEM DEFINITION OF VULNERABILITY

MAY 2022

As part of the 2021-2022 Coordinated Entry System (CES) Assessment and Prioritization Refinement Project, a workgroup defined vulnerability in an effort to create a common agenda for the Indianapolis CoC and future CES refinement

## EXECUTIVE SUMMARY

As part of the 2021-2022 Coordinated Entry System (CES) Assessment and Prioritization Refinement Project, a CES Defining Vulnerability Workgroup was assembled to propose a definition of “vulnerability” to share with Continuum of Care (CoC) leadership for endorsement. Creating a common agenda for change is a key condition of Collective Impact<sup>1</sup> and will help align the CoC as CES refinement work continues throughout 2022. This definition marks the end of “Phase 1.”



Note: Phase 1 was underway before we realized Phase 0 was needed, which is why it occurs first.

In general terms, “vulnerability” is defined as the possibility of a person experiencing an adverse event. Homeless service agencies commonly use this term when they talk about wanting to house the “most vulnerable” people first. Currently, the Vulnerability Index – Service Prioritization Decision Assistance Tool (VI-SPDAT) defines vulnerability for the Indianapolis CoC in terms of the questions it asks about the domains: history of housing and homelessness, risks, socialization and daily functions, and wellness. Because the Indianapolis CoC is moving away from the VI-SPDAT, an alternative framework is needed to guide future CES refinement work.

HUD<sup>2</sup>, the Indianapolis CoC Written Standards<sup>3</sup>, and the Indianapolis CES Policies and Procedures<sup>4</sup> reference vulnerability in terms of “having the most severe service needs;” the Indianapolis

<sup>1</sup> *The Five Conditions of Collective Impact*. Collective Impact Forum. Retrieved May 1, 2022 from <https://collectiveimpactforum.org/what-is-collective-impact/>

<sup>2</sup> *Notice on Prioritizing Persons Experiencing Chronic Homelessness and Other Vulnerable Homeless Persons in PSH and Recordkeeping Requirements for Documenting Chronic Homeless Status*. The United States Department of Housing and Urban Development (2014, July 28). Retrieved May 1, 2022 from <https://www.hud.gov/sites/documents/14-12CPDN.PDF>

<sup>3</sup> *Indianapolis CoC Written Standards*. The Indianapolis Continuum of Care (2020, October). Retrieved May 1, 2022 from <https://www.indycoc.org/policies-and-program-models.html>

<sup>4</sup> *CES Policies and Procedures*. The Indianapolis Continuum of Care (2022, May 16). Retrieved May 16, 2022 from <https://www.indycoc.org/ces-documents.html>

Community Plan to End Homelessness<sup>5</sup> names vulnerable sub-populations, such as people experiencing chronic homelessness, veterans, young adults, and families; the Youth Homelessness Demonstration Project (YHDP) 2022 prioritization pilot defines vulnerability in terms of safety. However, the Indianapolis CoC does not clearly define what “severe service needs” make someone vulnerable or what it means to house the “most vulnerable” people. Therefore, it is important to set a common definition that will inform what service needs are measured in the future CES enrollment.

The CES Defining Vulnerability Workgroup met four times in April 2022. Members included people with lived experience of homelessness, mental health, and/or substance use, Blueprint Council members, CES Skilled Assessors, experts in research and assessment tools, CoC housing and service providers, and HMIS staff. Members were recruited to represent workgroup values of lived expertise, racial equity, and being trauma-informed and person-centered.

This workgroup used community feedback collected in listening sessions during March and April 2021 and a survey from April and May 2021<sup>6</sup>.

## PROPOSED DEFINITION OF VULNERABILITY

The CES workgroup discussed vulnerability in terms of outcomes (consequences of vulnerability named by filling in the statement: “vulnerable to...”) and factors (what makes a person or household more likely to experience each outcome). The group believes that vulnerability may be defined slightly differently for different household types.

CES and the Indianapolis CoC acknowledge that individuals may be especially vulnerable to several outcomes below due to their race, sexual orientation, gender identity, and household composition. While these characteristics cannot be used to prioritize individuals due to the Fair Housing Act<sup>7</sup>, the CES workgroup intentionally discussed co-occurring factors that may be used to measure vulnerability instead. Later phases of the CES Assessment and Prioritization Refinement project will define who, when, and where data will be reviewed to ensure CES prioritization produces equitable results, as well as aligns with the other guiding principles named in the CES Enrollment Vision (flexible, barrier nuanced, equitable, lean, incorporating client choice, incorporating assessor input)<sup>8</sup>.

The six named vulnerability outcomes are below in no particular order. Related factors that may lead to each outcome are listed in the following sections.

- **Vulnerable to death or suicide**
- **Vulnerable to experience abuse, exploitation, or victimization, or to being taken advantage of.** This is defined in terms of financial abuse (being robbed or financially exploited), violence, assault, and domestic violence (used broadly to reflect HUD’s definition

<sup>5</sup> *Indianapolis Community Plan to End Homelessness*. The Indianapolis Continuum of Care (2018). Retrieved May 1, 2022 from <https://www.indycoc.org/plans-to-end-homelessness.html>

<sup>6</sup> *CES Assessment Refinement Phase 1 Debrief*. The Coalition for Homelessness Intervention and Prevention (2021, May 15). Retrieved May 1, 2022 from [https://drive.google.com/drive/folders/12vAYhcxoTmz\\_9zPerDZfPbdxYh8vXCy0](https://drive.google.com/drive/folders/12vAYhcxoTmz_9zPerDZfPbdxYh8vXCy0)

<sup>7</sup> *Fair Housing Act*. The United States Department of Justice (2021, December 13). Retrieved June 23, 2022 from <http://www.justice.gov/crt/about/hce/title8.php>

<sup>8</sup> *Indianapolis CES Enrollment Vision*. The Coalition for Homelessness Intervention and Prevention (2022, April). Retrieved May 1, 2022 from [https://www.indycoc.org/uploads/1/4/0/8/140828032/ces\\_enrollment\\_vision\\_packet.pdf](https://www.indycoc.org/uploads/1/4/0/8/140828032/ces_enrollment_vision_packet.pdf)

inclusive of intimate partner violence, sexual assault, survival sex, and human trafficking), and psychological or emotional manipulation. It includes abuse within the system, including from service providers, landlords, or other individuals receiving services.

- **Vulnerable to significant negative health outcomes.** This includes medical complications, a shortened lifespan, and increased suffering that is not necessarily terminal.
- **Vulnerable to criminal justice system involvement.** This is defined in terms of incarceration, new, additional, or escalation of legal barriers (specifically sex, drug, and violent offences), and police interaction leading to arrests, charges, and/or convictions.
- **Vulnerable to continued homelessness.** This is defined as long lengths of time homeless and episodic or recurring homelessness (even if a person is not technically chronic per HUD's definition).
- **Vulnerable to unwanted family separation**, especially as a result of continued homelessness.

These six vulnerability outcomes are prioritized based on household types: single adults (over age 24), adult-only households (those with any number of adults over age 24 and no minors), households with dependents (those with any number of adults over age 24 and dependents of any age), youth-led households with dependents (the head of household is 24 or under and there are dependents of any age), and youth-led households without dependents (those with any number of adults age 24 or under and no minors). All individuals and households should be assessed based on a weighted scoring system that considers implications of systemic bias.

- **Vulnerability for single adult and adult-only households** is defined as the severe likelihood of a household member imminently experiencing death, abuse or exploitation, significant negative health outcomes, and criminal justice system involvement or continued homelessness.
- **Vulnerability for households with dependents of any age** is defined as the severe likelihood of a household member imminently experiencing death, abuse or exploitation, separation from family members, significant negative health outcomes or continued homelessness, and criminal justice system involvement.
- **Vulnerability for youth-led households (without dependents)** is defined as the severe likelihood of a household member imminently experiencing death, abuse or exploitation, criminal justice system involvement, significant negative health outcomes or continued homelessness.
- **Vulnerability for youth-led households with dependent children** is defined as the severe likelihood of a household member imminently experiencing death, abuse or exploitation, separation from family members, criminal justice system involvement, continued homelessness, or significant negative health outcomes.

The chart below shows how vulnerability outcomes may be prioritized and weighted for each household type.

SINGLE ADULTS & ADULT-ONLY HOUSEHOLDS	
Vulnerable to death	
Vulnerable to abuse or exploitation	Vulnerable to significant negative health outcomes
Vulnerable to criminal justice system involvement	Vulnerable to continued homelessness
Vulnerable to family separation	

HOUSEHOLDS WITH DEPENDENTS	
Vulnerable to death	
Vulnerable to abuse or exploitation	Vulnerable to family separation
Vulnerable to significant negative health outcomes	Vulnerable to continued homelessness
Vulnerable to criminal justice system involvement	

YOUTH-LED HOUSEHOLDS WITHOUT DEPENDENTS	
Vulnerable to death	
Vulnerable to abuse or exploitation	Vulnerable to criminal justice system involvement
Vulnerable to significant negative health outcomes	Vulnerable to continued homelessness
Vulnerable to family separation	

YOUTH-LED HOUSEHOLDS WITH DEPENDENTS	
Vulnerable to death	
Vulnerable to abuse or exploitation	Vulnerable to family separation
Vulnerable to criminal justice system involvement	Vulnerable to continued homelessness
Vulnerable to significant negative health outcomes	

## VULNERABLE TO DEATH OR SUICIDE

### Definition

This means that someone has an increased likelihood of untimely death due to causes such as health or mental health conditions, accidents, violence, or suicide.

### Relevant Factors

The CES Defining Vulnerability Workgroup recognized the following factors as frequently related to this vulnerability outcome. The factors listed were decidedly important but may not be all-inclusive.

- Severe health conditions
- Mental health conditions (including undiagnosed)
- Active substance use
- Cognitive impairment or developmental disability (including undiagnosed)

- Compounding issues of mobility, physical health, mental health, cognitive impairment, and/or substance use
- Exposure, which is more likely if people have stayed outdoors in the past or are unlikely to access shelter or care (especially due to having pet[s] or emotional support animals, co-morbid factors such as substance use and physical disability, household composition like couples or man-led households with children, age, gender identity, sex offenses)
- There is inclement weather including heat, cold, or severe storms
- There is imminent threat of violence due to gangs, police, DV, etc.
- Unsheltered living situation in proximity to a road

## **VULNERABLE TO EXPERIENCE ABUSE, EXPLOITATION OR VICTIMIZATION, OR TO BEING TAKEN ADVANTAGE OF**

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### **Definition**

This is defined in terms of financial abuse (being robbed or financially exploited), violence, assault, and domestic violence (used broadly to reflect HUD’s definition inclusive of intimate partner violence, sexual assault, survival sex, and human trafficking), and psychological or emotional manipulation. It includes abuse within the system, including from service providers, landlords, or other individuals receiving services.

### **Relevant Factors**

The CES Defining Vulnerability Workgroup recognized the following factors as frequently related to this vulnerability outcome. The factors listed were decidedly important but may not be all-inclusive.

- Having (disability) income<sup>9</sup>
- Other people having access to their money
- Physical impairment (ex. old age, physical disability)
- Cognitive impairment or developmental disability (including undiagnosed)
- Active substance use
- Mental health conditions (including undiagnosed)
- Social isolation or having few supportive relationships (including family)
- A history of, or current, DV, especially if the person is pregnant
- Unsheltered living situation
- Being unlikely to access shelter or care (especially due to having pet[s] or emotional support animals, co-morbid factors such as substance use and physical disability, household composition like couples or man-led households with children, age, gender identity, sex offenses)
- Age 24 or under
- Age 17-21 and exiting foster care

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<sup>9</sup> This should only be prioritized when coupled with other factors or when directly connected to financial abuse

## **VULNERABLE TO SIGNIFICANT NEGATIVE HEALTH OUTCOMES**

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### **Definition**

This includes medical complications, a shortened lifespan, and increased suffering that is not necessarily terminal.

### **Relevant Factors**

The CES Defining Vulnerability Workgroup recognized the following factors as frequently related to this vulnerability outcome. The factors listed were decidedly important but may not be all-inclusive.

- Amputation
- Medical equipment or ADA access (including where electricity or refrigeration is required)
- Limited activities of daily living (ADLs)
- Cognitive impairment or developmental disability (including undiagnosed)
- Limited access to basic hygiene (including menstrual)
- Unable to get or keep medication
- Unable to get pregnancy care or planning
- Frequent urgent or acute service utilization
- Domestic violence
- Does not get routine physical or dental care
- Unsheltered or congregate living situation
- Active substance use
- Mental health conditions (including undiagnosed), especially when untreated or poorly managed

## **VULNERABLE TO CRIMINAL JUSTICE SYSTEM INVOLVEMENT**

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### **Definition**

This is defined in terms of incarceration, new, additional, or escalation of legal barriers (specifically sex, drug, and violent offences), and police interaction leading to arrests, charges, and/or convictions.

### **Relevant Factors**

The CES Defining Vulnerability Workgroup recognized the following factors as frequently related to this vulnerability outcome. The factors listed were decidedly important but may not be all-inclusive.

- Increased risky behaviors (including to avoid incarceration)
- Frequent involvement with police, especially if there are negative experiences during interactions
- Case management or parole officer turnover or bias
- Active warrants, ongoing cases, or protective orders
- Domestic violence, specifically intimate partner violence
- Active substance use
- Cognitive impairment or developmental disability (including undiagnosed)
- Mental health conditions (including undiagnosed)
- Past involvement in the criminal justice system (including as a youth)

- Related fees a person cannot pay
- Unsheltered living situation

## **VULNERABLE TO CONTINUED HOMELESSNESS**

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### **Definition**

This is defined as long lengths of time homeless and episodic or recurring homelessness (even if a person is not technically chronic per HUD's definition; see Footnote 2).

### **Relevant Factors**

The CES Defining Vulnerability Workgroup recognized the following factors as frequently related to this vulnerability outcome. The factors listed were decidedly important but may not be all-inclusive.

- Social isolation or having few supportive relationships (including family)
- Generational poverty or homelessness
- Being unlikely to access shelter or care (especially due to mental health conditions, active substance use, documentation status, stigma, difficulty managing the complex system, prior negative experiences, having pet[s] or emotional support animals, cognitive impairment or developmental disability)
- Being less likely to find a housing unit due to having pet(s), i.e. non-ESA or service animals, geographical restrictions due to criminal records, arson charges, large household size, missing vital documentation, not having citizenship or legal residency
- Inability to work due to health, mental health, childcare, etc.
- Having fixed, no, or very low income (under 30% AMI)

## **VULNERABLE TO FAMILY SEPARATION**

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### **Definition**

This is defined as unwanted family separation, especially as a likely result of continued homelessness. The Indianapolis CoC honors HUD's definition of family<sup>10</sup> as "simply one or more individuals who live together. Members of the family do not need to be related by blood, marriage or in any other legal capacity. Family members who are away from the household for a certain period of time may be considered part of the family. Live-in aides are also considered a family member. HUD's definition of family is broad to help make sure decent and affordable housing is available to every type of family."

### **Relevant Factors**

The CES Defining Vulnerability Workgroup recognized the following factors as frequently related to this vulnerability outcome. The factors listed were decidedly important but may not be all-inclusive.

- Household with minors staying unsheltered
- DCS involvement
- Household member at risk of deportation
- Two or more adults in a household (with or without minors)
- Note: defer to Fair Housing when discussing prioritization based on household composition

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<sup>10</sup> HUD's *Definition of Family*. Eligibility (2016, January 11). Retrieved May 1, 2022 from <https://eligibility.com/section-8/huds-definition-of-family>



- Household member involved in the criminal justice system
- Household member currently on supervision or conditional release

## RECOMMENDATIONS

The CES Defining Vulnerability Workgroup recommends considering the following statements in future CES refinement and CoC systemic work:

- Comorbid vulnerability factors should elevate prioritization rather than cancel each other out
- Factors are frequently interconnected; one factor can create domino effects in other areas
- Systemic oppression may be reduced by weighting certain vulnerability factors, specifically those that specifically reflect the vulnerabilities for Black, African American, or Latinx individuals
- Low-barrier shelters should align with CES recommendations and ensure equitable access for people of all abilities, ages, diagnoses, gender identities, and backgrounds
- CES Skilled Assessors should consider the mental capacity of the client when asking questions; Assessors should have the skills, training, and ability to explain why they are asking questions and the intent behind them

## GLOSSARY

**Blueprint Council (BPC):** The delegated authority and decision-making body for The Indianapolis Continuum of Care. The Blueprint Council is primarily responsible for: setting strategy and defining annual system implementation priorities and activities; monitoring system performance and implementation progress; reviewing and approving governing policy recommendations created within the implementation work groups; and aligning resources and activities and allocating funding in accordance with implementation priorities<sup>11</sup>.

**Continuum of Care (CoC):** A regional or local program that promotes community-wide commitment to the goal of ending homelessness. The CoC provides funding for efforts by nonprofit providers and state and local governments to quickly rehouse homeless individuals and families while minimizing the trauma and dislocation caused to homeless individuals, families, and communities by homelessness. It also optimized self-sufficiency, promotes access to, and effects utilization of mainstream programs by homeless individuals and families<sup>12</sup>.

**Coordinated Entry System (CES):** A system used to connect people who are at-risk of or experiencing homelessness to services and housing resources. Through the coordinated entry system (CES), all households in need of homeless services can be connected to providers through a centralized assessment process.

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<sup>11</sup> *Indianapolis CoC Governing Board: The Blueprint Council.* The Indianapolis Continuum of Care (2022). Retrieved June 28, 2022 from <https://www.indycoc.org/our-board.html>

<sup>12</sup> *The Indianapolis CoC Vision.* The Indianapolis Continuum of Care (2022). Retrieved June 28, 2022 from <https://www.indycoc.org/our-vision.html>

**Coordinated Entry System Enrollment/Assessment:** A set of questions in HMIS administered by CES Skilled Assessors to people experiencing homelessness. Once the CES enrollment is complete, the household enters the “prioritization list.”

**Homeless Management Information System (HMIS):** A computerized data collection tool and database. HMIS is specifically designed to capture client-level, system-wide information over time on the characteristics and services needs of men, women and children experiencing homelessness. **Prioritization:** Process that ensures that people with the greatest needs receive priority for any type of housing and homeless assistance in the CoC, including Permanent Supportive Housing (PSH), Rapid Rehousing (RRH) and other intervention.

**Prioritization List:** A list of people enrolled in CES from which housing referrals to CoC resources are generated.

**Program Matching:** The method of deciding who is connected to different types of programs (ex. Permanent Supportive Housing, Rapid Re-Housing). The program type is currently determined by the VI-SPDAT score.

**Referral:** The process of connecting a person experiencing homelessness to a service provider via HMIS and email. A CES Enrollment is required for a referral to certain CoC programs<sup>13</sup>. A successful referral would result in a program enrollment/the person receiving services/finding housing.

**Vulnerability Index Service Prioritization Decision Assistance Tool (VI-SPDAT):** Vulnerability assessment tool developed by OrgCode Consulting<sup>14</sup> administered to households experiencing homelessness to inform housing and service need. Results of the assessment tool are used to determine the priority in the community for housing resources. There are assessments for Single Adults, Families, Transitioned Age Youth (TAY).

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<sup>13</sup> *Coc Housing Programs & Eligibility*. Coalition for Homelessness Intervention and Prevention (2022). Retrieved June 28, 2022 from <https://airtable.com/shrdOdZ3oL9D3qWqg/tbl3sCC23uO3kOz9j>

<sup>14</sup> *OrgCode Consulting* (2022). Retrieved June 28, 2022 from <https://www.orgcode.com/>