Supplemental materials for

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Graziella El-Khechen Richandi, MSc[1*]

Alannah Vila[2*]

Monica Sarty, MA[1]

Tomislav Svoboda, MD, MSc, PhD[1,3]

Stefan Baral, MD, MPH[1,4]

Ri Wang, MMath[5]

Priya Vasa, MD[1]

Alena Ravestein[1]

Tina Kaur, MPH, MN[1]

Pablo del Cid Nunez[2]

Aaron Orkin, MD, MSc, MPH, PhD[1,2,3,5]

[1]Population Health Services, Inner City Health Associates, Toronto, Ontario, Canada

[2]Dalla Lana School of Public Health, University of Toronto, Toronto, Ontario, Canada

[3]Department of Family and Community Medicine, University of Toronto, Toronto, Ontario, Canada

[4]Bloomberg School of Public Health, Johns Hopkins University, Baltimore, Maryland

[5]MAP Centre for Urban Health Solutions, St. Michael's Hospital, Toronto, Ontario, Canada

*These authors contributed equally as co–first authors.

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Supplemental Appendix

Community Assessment and Risk Evaluation (CARE) Tool

- The CARE tool provides a rapid health assessment for population health purposes. It is not a comprehensive individual health or housing assessment.
- The CARE tool does *not* assign housing or hotel spaces. This information can be used to support physical distancing, testing, outbreak management, and immunization in the context of COVID-19.
- The tool is suited for implementation in a variety of settings with providers and clients who wish to use it.

Step 1. Immunization Status

Did the client/resident receive the following:

First Dose of COVID-19 Vaccine:

(1) No (2) Yes (3) Unknown (4) Prefer not to say.

Second Dose of COVID-19 Vaccine:

(1) No (2) Yes (3) Unknown (4) Prefer not to say.

Step 2. General Health Risk (Formerly COVID-19 Severe Disease Risk)

Lower Risk

1

- Not medium or higher risk

Medium Risk

2

One or more of:

- Age >70 years old
- Cancer diagnosis
- COPD/Chronic Lung Disease
- Diabetes
- Heart disease or high blood pressure medication
- Immunosuppression
- Liver Cirrhosis
- Severe kidney disease

Higher Risk

3

Any of:

- Nursing home level support
- Recent severe illness (e.g. frequent ICU)
- Requiring support for everyday activities (e.g. bathing, eating, dressing, transferring)

Step 3. Support Needs

1. **Fully Independent:** Able to seek care as needed without receiving nursing or case management support

2. **Minimal support:** Minimal support required for physical health (eg: wound care), taking medications, following instructions, monitoring symptoms or mental health.

3. **Periodic support:** Mental health and substance use that require occasional periodic support or adjustments, provision or adjustments to harm reduction supports to reduce harm/risk and prevent significant deterioration.

4. **Consistent supports for behaviours:** Occasional conflict or difficulty. Often needs ongoing supports to adhering to program requirements.

5. **High level skilled support for consistently disruptive behaviours:** Significant or frequent verbal or physical conflict/escalation due to mental health and substance use. Consistent difficulty with program/other clients several times per week or more.

Step 4. Substance Use

Definitions:

1. **No:** known to not use this substance.
2. **Yes –** uses substances but no further information on support levels in use
3. **Yes - Independent:** the care team does not need to be involved in the individual's substance use management.
4. **Yes - Stable with support:** receiving any form of case management, addictions, and harm reduction programing such as managed alcohol program or detox or rehabilitation services and substance use and behaviours stabilized with these supports.
5. **Yes - Unstable**: with or without assistance and programing support, the person remains unstable such as behavioural challenges, and/or conflict. This could include an individual with a recent hospital visit due to crisis related to substance use wherein the client may be at imminent risk of overdose (i.e. within the next week or month).
6. **Unknown.**

To your knowledge, does this client use any of the substances listed below?

Alcohol:

1 No | 2 Yes – no further info | 3 Yes - Independent | 4 Yes - Stable with support | 5 Yes - Unstable | 6 Unknown

Tobacco and/or Cannabis:

1 No | 2 Yes – no further info | 3 Yes - Independent | 4 Yes - Stable with support | 5 Yes - Unstable | 6 Unknown

Opioids:

1 No | 2 Yes – no further info | 3 Yes - Independent | 4 Yes - Stable with support | 5 Yes - Unstable | 6 Unknown

Stimulants:

1 No | 2 Yes – no further info | 3 Yes - Independent | 4 Yes - Stable with support | 5 Yes - Unstable | 6 Unknown

Other:

1 No | 2 Yes - Independent | 3 Yes - Stable with support | 4 Yes - Unstable | 5 Unknown

2 Yes – no further info 3 4 5

Step 5. Rapid Residential Support Score:

To your knowledge, what are the client's level of housing support needs?

1 **Independent:** Suggests the individual can live independently

2 **Periodic Case Management:** 1 – 5 hours per week in the community

3 **Consistent Case Management:** 6+ hours in the community

4 **Extensive Support:** 24/7 non-clinical staffing (boarding home, tolerate co-living)

5 **Long-Term Care:** Needs 24/7 nursing, behavioural therapy, or PSW support

6 **Unstable with Support:** 24/7 unstable in nursing home or behavioural therapy unit. Requiring highly skilled and resourced residential program.

- Level 1: Independent: Suggests the individual can live independently
- Level 2: Case management: 1-5 hours per week in the community
- Level 3: Case management: 6 hours + in the community
- Level 4: 24/7 non-clinical staffing (boarding home; tolerate co-living)
- Level 5: 24/7 Long-Term Care (needs 24/7 nursing, behavioural therapy, or PSW support)
- Level 6: 24/7 Unstable with basic nursing home or behaviour therapy unit, requiring highly skilled and resourced residential program to address frequent complex conflicts and behavioural decompensation due to multiple psychological, addiction, behavioural issues with or without severe physical health problems

Supplemental Table. Summary of Test-Retest Reliability/Internal Consistency		
Variable	# Paired Observations	Cronbach's Alpha (95% C.I.)
General Health Risk	*n* = 777	0.66 (0.62, 0.71)
Rapid Residential Support Score	*n* = 31	0.77 (0.61, 0.93)
Support Needs	*n* = 577	0.66 (0.60, 0.71)
Substance Use		
Alcohol Use	*n* = 36	0.73 (0.59, 0.86)
Stimulant Use	*n* = 35	0.77 (0.65, 0.88)
Opioid Use	*n* = 35	0.67 (0.46, 0.88)
Tobacco/Cannabis Use	*n* = 29	0.74 (0.55, 0.92)

Note: there was a time gap of over a year between some paired observations

Note: substance use and residential support items were added to the CARE tool at a later date