

Appendix VI

Questionnaire for Homelessness Service Providers



Survey of Homelessness Service Providers

Research into Substance Misuse and Homelessness



Research sponsored by the Research and Information Working Group created under the Model for Joint Implementation of Drug and Alcohol Strategies.

Department of Health, Social Services and Public Safety

Supported by



INTRODUCTION

This research project has been commissioned by the Department of Health, Social Services and Public Safety, through the Research and Information Working Group created under the Model for the Joint Implementation of the Drug and Alcohol Strategies. A team of researchers from Deloitte is carrying out the project in association with the Simon Community. The research aims to provide a detailed account of substance misuse among homeless people in order to inform future policy on prevention and treatment activity.

The objective of this survey of providers of services to homeless people is to:

3. map out patterns of substance misuse among homeless people in Northern Ireland;
4. examine the range of substance misuse information, prevention and treatment services available to homeless people, consider any gaps and identify any access issues.

Questionnaires are being sent to all organisations that provide homelessness services. Larger organisations may ask their individual units or teams to complete a questionnaire. There is a space in Section A to show if you are responding for the whole organisation or for a team/unit. There are separate questions for those providing services to families rather than individuals.

We appreciate that you may be involved in a number of research exercises and that this questionnaire asks for a lot of detailed data. However, we would be grateful if you would take the time to participate in this important, policy-shaping research. To help with completing the questionnaire we have provided a list of definitions on the next page. Also, we have indicated, for each question, the minimum amount of information required (in the shaded boxes) and the additional information that we hope you can also provide. To simplify the process, most questions relate to current clients so there is no need to review files of previous clients.

Most of the questions ask for information that can be gathered from your records. For some questions you may need to make estimates or to provide information based on your professional judgement. We have stated where this is the case.

Please be assured that all information provided in response to this questionnaire will be treated confidentially. Only the research team will see individual responses and we will ensure that research reports do not attribute comments or findings to individuals or organisations.

If you have any queries about the questionnaire or the research project, please do not hesitate to call either Angela Hodkinson or Kathy Colgan on 028 9032 2861.

DEFINITIONS

HOMELESS - anyone in temporary accommodation or anyone who has slept rough for more than six nights in the last six months.

SUBSTANCE - any drug, whether prescribed for an individual or not, including solvents, tranquillisers and alcohol.

WET PROVISION – services that accept an element of ongoing drug/alcohol use by clients on the premises.

DAMP PROVISION – services that accept an element of ongoing drug/alcohol use by clients, but not on the premises.

DRY PROVISION – services that do not accept any ongoing drug/alcohol use by clients either on or off the premises.

LEVEL OF ALCOHOL USE

(As per Health Promotion Agency, Adult Drinking Patterns in NI)

Sensible Drinking – Below recommended number of units per week - Men 21, Women 14.

Risk Drinking – weekly consumption of between 21-50 units for men and 14-35 units for women.

Heavy Drinking – Consistently drinking above 50 units per week for men and above 35 units per week for women.

Binge Drinking – drinking a large quantity of units in one sitting – defined as 10 or more units for men and 7 or more units for women. This category also includes problem drinkers experiencing occasional relapses.

CURRENT CLIENTS – where questions ask for information on CURRENT CLIENTS this should be assumed to be the clients your organisation has registered at the time the questionnaire is received. This is to allow for organisations where client numbers can change on a daily basis.

A – BACKGROUND TO YOUR ORGANISATION & SERVICES PROVIDED

A1. (a) Contact name: _____
 (b) Telephone number: _____
 (c) Date you Completed this survey: _____

A2. Organisation you work for: _____

A3. Sector organisation belongs to: Statutory
 Voluntary
 Community
 Private

A4. Are you answering this questionnaire on behalf of: The organisation (Go to A6)
 A team/unit (Go to A5)

A5. Name of Team or Unit to which this response applies (if applicable): _____

A6. Services provided (tick all that apply and show for each whether Wet, Damp or Dry)

	Tick all that apply	Wet	Damp	Dry
Night shelter				
Direct access hostel				
Day centre				
Outreach team				
Food run/ street services				
Tenancy/Floating Support / Aftercare				
Refuge				
Move-on Accommodation				
Foyer				
Family Hostel				
Direct Access Family Hostel				
Referral Only Hostel				

A7. Do you provide services to: Individuals (Go to A8)
 Families (Go to A9)
 Both (Go to A8)

A8. How many individuals are currently using each service? Please provide information on age and gender if possible.

Homelessness services:	No. Clients	Gender		Age				
		M	F	16	17	18-25	26-40	40+
Night shelter								
Direct access hostel								
Day centre								
Outreach team								
Food run/ street services								
Tenancy/Floating Support / Aftercare								
Refuge								
Move-on Accommodation								
Foyer								

A9. How many families are currently using each service? Please provide information on the type of family unit if possible. (Note 'Adult' means aged 16 or over)

Homelessness services:	Families	Lone Parent	Two Parent	Adult Males	Adult Females	Children
Family Hostel						
Night shelter						
Direct access hostel						
Day centre						
Outreach team						
Food run/ street services						
Tenancy/Floating Support / Aftercare						
Refuge						
Move-on Accommodation						
Foyer						
Direct Access Family Hostel						
Referral only Family Hostel						

B – RECORDING SUBSTANCE USE

B1. Do you routinely record information on clients' substance use? Yes No (go to B3)

B2. How is this information gathered?
(Tick all you regularly use)

Initial assessment/admission reports?
Untoward/critical incident reports?
Assessment of drug/alcohol related needs for support plan?
Records of Keyworkers
Other routine statistical monitoring? (e.g. for Drug Misuse Database)
Other? (Please specify)

B3. What source(s) of information have you used to complete this questionnaire?
(Tick all that apply)

Initial assessment/admission reports?
Untoward/critical incident reports?
Assessment of drug/alcohol related needs for support plan?
Other routine statistical monitoring? (e.g. for Drug Misuse Database)
Case Audit for this research
Professional judgement based on keyworking relationships
Other? (Please specify)

C – ESTIMATING THE SCALE OF SUBSTANCE USE

- If your clients are **single homeless people** answer questions **C1.** to **C5.**
- If your clients are **families** answer questions **C6.** to **C10.**
- If your clients are **both single people and families**, answer **C1.** to **C5.** for individuals and **C6.** to **C10.** for families.

SINGLE HOMELESS PEOPLE

C1. In your view, how many of your current clients are homeless because of substance use? Show the number in each category and provide a gender and age breakdown if possible.

NB – the total number of clients should match the figure entered for A8.

	No. Clients	Gender		Age				
		M	F	16	17	18-25	26-40	40+
(a) First became homeless due to own substance use (see C2 below)								
(b) First became homeless due to substance use of a close relative, friend or partner								
(c) Are involved in substance use but this was not the main cause of their homelessness								
(d) Do not have any substance misuse issues at all								

C2. For the clients where their own substance use was a reason for becoming homeless (see C1, clients under a), in your opinion, was this first recognised by staff or by the individual themselves. Show the number in each category below. If this information is not available, please classify cases as ‘Don’t Know’.

	Identified by Staff	Identified by Individual	Don’t Know
First became homeless due to own substance misuse			

C3. Please indicate the pattern of substance use among your *current clients*. Please provide as much detail as possible using the four tables below:

- Table I. - Summary of substance use by *all current clients*.
- Table II. – Details of clients using *alcohol only*.
- Table III. - Details of clients using both *alcohol and drugs (including solvents)*.
- Table IV. - Details of clients *only using drugs (not using alcohol)*.

II. All Clients

(NB – the total number of clients in this table should match the figure entered for A8.)

	Total	Gender		Age				
		Male	Female	16	17	18-25	26-40	40+
(a) Alcohol ONLY - no drugs (including solvents) are used (Provide details in Table II)								
(b) Alcohol AND Drugs - alcohol and other drugs (including solvents) are also used (Provide details in Table III)								
(c) Drugs ONLY - drugs (including solvents) are used but alcohol is not (Provide details in Table IV)								
(d) NO Substances Used								

II. Alcohol ONLY

(NB – this table relates to the clients in Table I (a))

Fill in the drinking patterns of the clients using alcohol (refer to Definitions on Page 2). Provide an age and gender breakdown if possible.

	Total	Gender		Age				
		Male	Female	16	17	18-25	26-40	40+
How many are:								
Sensible Drinkers?								
Risk Drinkers?								
Heavy Drinkers?								

How many are Binge Drinkers?								
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How many are in contact with treatment services?								
--	--	--	--	--	--	--	--	--

III. Alcohol AND Drugs (including solvents)

(NB – this table relates to the clients in Table I (b))

Fill in the drinking patterns of these clients (refer to Definitions on Page 2). Please provide an age and gender breakdown if possible.

	Total	Gender		Age				
		Male	Female	16	17	18-25	26-40	40+
How many are:								
Sensible Drinkers?								
Risk Drinkers?								
Heavy Drinkers?								
How many are Binge Drinkers?								

Fill in the drugs or other substances used by these clients. Provide an age and gender breakdown if possible.

	Total	Gender		Age				
		Male	Female	16	17	18-25	26-40	40+
Drugs/Substances:								
Cannabis								
Ecstasy								
Amphetamines (e.g. speed)								
Amyl Nitrate (poppers)								
Hallucinogens (e.g. LSD, PCP, Magic Mushrooms, Ketamine)								
Crack								
Cocaine								
Heroin								
Substitute Opiates (methadone, buprenorphine, DF118)								
Other Opiates (Codeine, dihydrocodeine, morphine, solpadine, co-codamol etc.)								
Anabolic Steroids								
Prescription Drugs (e.g. tranquillisers, antidepressants)								
Solvents (e.g. gas, glue, inhalants)								
Others (please specify):								
1. _____								
2. _____								
3. _____								
How many are in contact with treatment services?								

IV. Drugs ONLY (Not Alcohol)
(NB – this table relates to the clients in Table I (c))

Fill in the drugs or other substances used by these clients. Provide an age and gender breakdown if possible.

	Total	Gender		Age				
		Male	Female	16	17	18-25	26-40	40+
Drugs/Substances:								
Cannabis								
Ecstasy								
Amphetamines (e.g. speed)								
Amyl Nitrate (poppers)								
Hallucinogens (e.g. LSD, PCP, Magic Mushrooms, Ketamine)								
Crack								
Cocaine								
Heroin								
Substitute Opiates (methadone, buprenorphine, DF118)								
Other Opiates (Codeine, dihydrocodeine, morphine, solpadine, co-codamol etc.)								
Anabolic Steroids								
Prescription Drugs (e.g. tranquillisers, antidepressants)								
Solvents (e.g. gas, glue, inhalants)								
Others (please specify):								
1. _____								
2. _____								
3. _____								
How many are in contact with treatment services?								

C4. Provide your best estimate of the number of *current clients* involved in activities that put their health and safety at risk. Provide a breakdown of the approximate frequency of these behaviours if possible.

NB – the total number of clients should match the figure entered for A8.

Risk Behaviour	Total Clients	Frequency of Behaviour		
		Occasional (Several times per year or less)	Regular (Once or twice a Month)	Constant (At least once a week)
Unsafe Sex				
Intravenous Drug Use				
Sharing Needles				
Self Harm				
Suicidal Behaviour				
Commercial Sex/Prostitution				
Criminal Behaviour				
None of these		<i>Not applicable</i>	<i>Not applicable</i>	<i>Not applicable</i>
Other (Please specify) _____				

C5. Please use the table below to show how long *your current clients* had been homeless when they came into contact with the service on this occasion and estimate how many in each category were involved in substance misuse. Base your answer on their most recent episode of homelessness. Also indicate the number who have had previous episodes of homelessness i.e. Repeat Homelessness.

NB – the total number of clients should match the figure entered for A8.

	Duration of this episode of homelessness:				No. Repeat Homelessness
	<6 Months	6-12 Months	1-2 Years	2 years+	
Alcohol Only					
Alcohol and Drugs					
Drugs Only (not alcohol)					
Not Using Any Substances at All					

If you provide services to Families, now answer C6. to C10.

If you only provide services to Individuals, now go to D1.

FAMILIES

C6. In your view, how many of your current clients are homeless because of substance use? Add the number of families in each category below.

NB – the total number of clients should match the figure entered for A9.

	No. Family Units
(a) First became homeless due to substance use of at least one family member? (see C7. below)	
(b) Are involved in substance use but this was not the main cause of their homelessness? (see C7. below)	
(d) Do not have any substance misuse issues at all?	

C7. For the families where substance use was a reason for becoming homeless (see **C6.** clients under a.), in your opinion, who first identified this link? Show the number in each category below. If this information is not available, please classify cases as 'Don't Know'.

	First Identified by Staff	First Identified by Family	Don't Know
First became homeless due to substance misuse?			

C8. Indicate the pattern of substance use among your *current clients*. Please provide as much detail as possible using the four tables below:

- Table I. - Summary of substance use by *all current clients*.
- Table II. – Details of clients using *alcohol only*.
- Table III. - Details of clients using both *alcohol and drugs*.
- Table IV. - Details of clients *only using drugs (not alcohol)*.

I. All Clients

(NB – the total number of family units in this table should match the total figure entered for A9. If possible provide a breakdown of individual users to show which member of the family they are.)

	No. Family Units Involved	No. Individual Users	Which members of the family are they?		
			No. of Mothers	No. Fathers	No. Children Aged 16+
(a) Alcohol ONLY - no drugs are used (Provide details in Table II)					
(b) Alcohol AND Drugs - both alcohol and other drugs are also used (Provide details in Table III)					
(c) Drugs ONLY - other drugs are used but alcohol is not (Provide details in Table IV)					
(d) NO Substances Used					

II. Alcohol ONLY

(NB – this table relates to the clients in Table I (a))

Fill in the drinking patterns of the clients using alcohol (refer to Definitions on Page 2).
Provide a family breakdown if possible.

	Family Units	Individuals	Mother	Father	Child 16+
How many are:					
Sensible Drinkers?					
Risk Drinkers?					
Heavy Drinkers?					

How many are Binge Drinkers?					
------------------------------	--	--	--	--	--

How many are in contact with treatment services?					
--	--	--	--	--	--

III. Alcohol AND Drugs
(NB – this table relates to the clients in Table I (b))

Fill in the drinking patterns of the clients using alcohol (refer to Definitions on Page 2).
 Provide a family breakdown if possible.

	Family Units	Individuals	Mother	Father	Child 16+
How many are:					
Sensible Drinkers?					
Risk Drinkers?					
Heavy Drinkers?					
How many are Binge Drinkers?					

Fill in the drugs or substances used by these clients. Provide a family breakdown if possible.

	Family Units	Individuals	Mother	Father	Child 16+
Drugs/Substances:					
Cannabis					
Ecstasy					
Amphetamines (e.g. speed)					
Amyl Nitrate (poppers)					
Hallucinogens (e.g. LSD, PCP, Magic Mushrooms, Ketamine)					
Crack					
Cocaine					
Heroin					
Substitute Opiates (methadone, buprenorphine, DF118)					
Other Opiates (Codeine, dihydrocodeine, morphine, solpadine, co-codamol etc.)					
Anabolic Steroids					
Prescription Drugs (e.g. tranquillisers, antidepressants)					
Solvents (e.g. gas, glue, inhalants)					
Others (please specify):					
1. _____					
2. _____					
3. _____					
How many are in contact with treatment services?					

IV. Drugs ONLY (Not Alcohol)

(NB – this table relates to the clients in Table I (c))

Fill in the drugs or substances used by these clients. Provide an age and gender breakdown if possible.

	Family Units	Individuals	Mother	Father	Child 16+
Drugs/Substances:					
Cannabis					
Ecstasy					
Amphetamines (e.g. speed)					
Amyl Nitrate (poppers)					
Hallucinogens (e.g. LSD, PCP, Magic Mushrooms, Ketamine)					
Crack					
Cocaine					
Heroin					
Substitute Opiates (methadone, buprenorphine, DF118)					
Other Opiates (Codeine, dihydrocodeine, morphine, solpadine, co-codamol etc.)					
Anabolic Steroids					
Prescription Drugs (e.g. tranquillisers, antidepressants)					
Solvents (e.g. gas, glue, inhalants)					
Others (please specify):					
1. _____					
2. _____					
3. _____					
How many are in contact with treatment services?					

C9. Provide your best estimate of the number of *current clients* involved in activities that put their health and safety at risk (include each family member aged 16 and over). Provide a breakdown of the approximate frequency of these behaviours if possible.

NB – the total number of clients should match the figure entered for A9.

Risk Behaviour	Total Clients	Frequency of Behaviour		
		Occasional (Several times per year or less)	Regular (Once or twice a Month)	Constant (At least once a week)
Unsafe Sex				
Intravenous Drug Use				
Sharing Needles				
Self Harm				
Suicidal Behaviour				
Commercial Sex/Prostitution				
Criminal Behaviour				
None of these		<i>Not applicable</i>	<i>Not applicable</i>	<i>Not applicable</i>
Other (Please specify)				

C10. Please use the table below to show how long *your current clients* had been homeless when they came into contact with the service on this occasion and estimate how many family units in each category were involved in substance misuse. Base your answer on their most recent episode of homelessness. Also indicate the number of family units who have had previous episodes of homelessness i.e. Repeat Homelessness.

NB – the total number of clients should match the figure entered for A9.

	Duration this episode of homelessness:				No. Repeat Homelessness
	<6 Months	6-12 Months	1-2 Years	2 years+	
Alcohol Only					
Alcohol and Drugs					
Drugs Only (not alcohol)					
Not Using Any Substances at All					

D. SUBSTANCE USE POLICY

D1. What is your policy on substance use?

(Tick one only)

Clients currently misusing drugs/alcohol cannot use your service (i.e. must be 'dry')

Clients currently misusing drugs / alcohol can use your service but substance use will not be tolerated on the premises

Service is specifically targeted at clients with current drugs/alcohol problem

None

Other (Please describe below)

D2. Is substance use one of the reasons used for not accepting clients?

Yes
No

D3. Between 1/4/03 and 30/6/03 was substance misuse the primary reason for refusing any individuals access to your services?

Yes
No (Go to D5)

D4. Detail the number of occasions and the substance(s) involved.

Substance:	Number:
Alcohol ONLY	_____
Alcohol AND Drugs	_____
Drugs ONLY (not alcohol)	_____

D5. Between 1/4/03 and 30/6/03 did you have untoward/critical incidents where substance misuse was a factor?

Yes
No (Go to D10)

D6. Detail the number of incidents and the substance(s) involved.

Substance:	Number:
Alcohol ONLY	_____
Alcohol AND Drugs	_____
Drugs ONLY (not alcohol)	_____

D7. What was the main issue in these Incidents:

- Contravention of substance policy
- Unacceptable behaviour due to substance use

D8. Did any of these incidents result in clients being excluded?

- Yes (Go to D9)
- No (Go to D10)

D9. How many clients were excluded?

No. Individuals _____

No. Families _____

D10. Is it more difficult for a homeless person who also has a substance misuse problem to access accommodation?

- Yes
- No

D11. Why do you say this?

E: SUBSTANCE MISUSE SERVICES

E1. Detail below the substance misuse services you provide and the number of clients using each between 1/4/03 and 30/6/03. If no substance use services are provided tick 'None'.

Substance Use Services:	Tick all provided	No. using service from 01/04/03 to 30/06/03
Drug & alcohol information and advice		
Harm minimisation advice and support		
Support planning on substance misuse issues		
Referral to drug/alcohol treatment services (e.g. Community Addiction Team, Homeless Support Team)		
Joint services with drug/alcohol treatment providers (e.g. home detoxification)		
Referral to health programmes (specific to substance misuse)		
Structured activity programmes (specific to substance misuse)		
Professional substance misuse counselling services		
Facilitated support groups (other than treatment)		
Relapse management/prevention support		
Lifeskills support for coping without substance(s)		
Other (please specify) _____		
None		Not Applicable

E2. Do you have staff trained in dealing with substance use issues?

- Yes, in-house training (Go to E4)
- Yes, professional qualifications (Go to E3)
- No (Go to E4)

E3. What qualifications are these?

E4. Do you have staff whose role has a specific focus on substance use?

Yes (Go to E5)

No (Go to F)

E5. Please provide details & attach job descriptions if available.

Position:
Number of staff posts:
Role:
Training provided/relevant qualifications held:
Comments:

Position:
Number of staff posts:
Role:
Training provided/relevant qualifications held:
Comments:

Position:
Number of staff posts:
Role:
Training provided/relevant qualifications held:
Comments:

F – ACCESS TO SUBSTANCE MISUSE SERVICES FOR HOMELESS

PEOPLE

F1. Do you think homeless people face barriers in accessing substance misuse services? Yes (Go to **F2.**)
No (Go to **F3.**)

F2. If so, what do you think these barriers are?

Tick all the barriers that you think apply and indicate the five barriers you consider to be the greatest by ranking five of these options from 1 to 5 (where 1 is the greatest barrier)

	Barrier (Tick all that apply)	5 Greatest Barriers (Rank 1-5)
Lack of information about availability of services		
Having no fixed address		
Not being registered with a GP		
Unhelpful response from GP		
Location of services		
Entry/eligibility criteria for services (e.g. must not be 'using' to access service)		
Programme design (e.g. attendance & compliance requirements)		
Waiting times to get a place on programmes		
Appointment systems		
Opening hours		
Lack of childcare facilities		
Substance misuse services not integrated with other services (e.g. housing, mental health, probation)		
Lack of services tailored for homeless people with substance misuse problems		
Perceived stigma around homelessness		
Clients' lack of confidence in service providers and 'the system'		
Client's literacy skills		
Client's mental health problems		
Client's learning, physical or sensory disability		
Fear of social services intervention (e.g. losing custody of children)		
Fear of partner's response to seeking help (e.g. domestic violence)		
Policy of 'barring' clients from services		
Requirement for support worker to accompany client		
Others (Please specify below):		
1. _____		
2. _____		
3. _____		

F3. Do you think there are gaps in the range of substance misuse services available to homeless people?

Yes (Go to **F4.**)
No (Go to **F5.**)

F4. If so, what are they?

F5. Do you think there is sufficient accommodation to meet the needs of homeless people who also have substance misuse problems?

Yes (Go to **F7.**)
No (Go to **F6.**)

F6. If not, what gaps are there?

F7. In general, how would you describe working relationships between providers of homelessness services and providers of substance misuse services?

Excellent
Good
Acceptable
Poor
Very Poor
Don't Know

F8. Do you consider homelessness and substance misuse services are adequately integrated/co-ordinated?

Yes
No

F9. What 3 changes would you make to improve integration / co-ordination between homeless and substance misuse services?

1. _____

2. _____

3. _____

Please add any other comments, concerns or suggestions you have in the space provided below

Thank you for taking the time to participate in this research.

Please return this questionnaire in the pre-paid envelope provided by Friday 14 November 2003.

A seminar to present the research findings will be held in the Spring of 2004.

Appendix VII

Respondents to Provider Surveys;

SUMMARY OF RESPONSES FROM PROVIDERS

1.1 Homelessness Providers

Table 1.1 details the response rates from homelessness providers. Fifty-three per cent of organisations returned at least one questionnaire.

Table 1.1

Response Rates

	Total	Organisations
Total Surveys Sent Out	41*	36
Total Surveys Returned	45	19

* additional copies requested by NIHE and Simon

Table 1.2 provides details of the organisations that have returned the survey. Returns from NIHE and the Simon Community accounted for almost 62 per cent of all surveys received. Fourteen of the responses were from statutory organisations and 26 from voluntary organisations.

Table 1.2

Details of Completed Surveys

Clarendon Shelter	1
Dismas House	1
Life Hostel	1
Linen Court	1
Living Rivers Lighthouse Hostel	1
Must Hostel	1
NIHE/ Lee Hestia Housing Ass	1
NIHE	16
NIID	1
Praxis Care Group	1
Regina Coeli	1
Rosemount House	1
Salvation Army	1
Sheltered Help	1
Simon Community	12
St Vincent De Paul	1
Starting Point (NI) Ltd	1
Sydenham House Refuge	1
Thompson House	1
Total	45

1.2 Substance Misuse Providers

Table 1.3 details the response rates from substance misuse service providers. A total of eight surveys were returned.

Table 1.3

Response Rates

	Total	Organisations
Total Surveys Sent Out	23	22
Total Surveys Returned	8	7

Table 1.4 provides details of the organisations that have returned the survey. Four responses have been received from statutory organisations, three from voluntary, and one from a community organisation.

Table 1.4

Details of Completed Surveys

Carlisle House	1
Down Lisburn Trust	2
Dunlewey Substance Advice Centre	1
Homefirst CAT	1
NICAS	1
REACT	1
Tyrone Fermanagh Hospital	1

Appendix VIII

Discussion Guide for Stakeholder Consultation

CONSULTATION MEETINGS – DISCUSSION GUIDE

PERCEPTION OF PROBLEM

- What are the issues that link homelessness and substance use?
- What particular issues link homelessness, risks to health and substance use?

STRATEGIC ISSUES

- What strategies currently influence the issue of substance use and homelessness and how?
- What is your opinion on how housing strategy and substance use strategy interact in relation to homelessness and substance use?
- If applicable, what could be done to improve the interaction?
- What role has the Promoting Social Inclusion initiative got in dealing with the issue?
- What other strategies are needed to deal with the issue?

OPERATIONAL & ORGANISATIONAL ISSUES

- What do you consider to be the main barriers to homeless people who are substance users in accessing services?
- What are the main gaps in service provision for this group?
- What would improve the ability of your organisation to work with this issue?
- What organisations do you work with on the issue of homelessness and substance use? If none, which organisations would you see value in working with?
- What good working practices relating to substance misuse and homelessness could be put in place in NI?
- What do you consider to be examples of good practice already being implemented in NI?

PREVENTION

- What current prevention strategies have particular relevance to this issue?
- What prevention strategies could be introduced to deal with the issue of homelessness and substance misuse?

LEGISLATIVE ISSUES

- What legislation influences in a negative or positive way the issues of homelessness and substance use?
- Is there legislation that requires modification or introduction that would influence positively the issue of homelessness and substance use?

Appendix IX

Stakeholders Consulted; and

CONSULTATION MEETINGS

Interviews:

Dolores Ferran & Brian O’Kane	NI Housing Executive, Supporting People
Maurice Rooney	NI Housing Executive
Jane Graham	Eastern Health & Social Services Council
Sandra McIlhinney	Northern Health & Social Services Council
Brian Dornan & Anne Godfrey	Southern Health & Social Services Board
Jim Simpson	Western Health & Social Services Board
Peter Gibson	Eastern Health & Social Services Board
Kevin Keenan & Gerry Linden	Northern Health & Social Services Board
Robb Phipps	NI Regional Drug & Alcohol Strategy Co-ordinator
Owen O’Neill	Eastern Drugs & Alcohol Co-ordination Team
Barbara Ward	Western Drugs & Alcohol Co-ordination Team
Michael Owen	Northern Drugs & Alcohol Co-ordination Team
George McCague	Southern Drugs & Alcohol Co-ordination Team
Brendan Fulton	Probation Board for Northern Ireland
Cindy Mackie	Police Service Northern Ireland
Brian Gaffney	Health Promotion Agency
Janet Hunter & Nicola McCrudden	Housing Rights Service
Ian Cameron & Michael Foley	South Belfast Partnership Outreach Team for I.V. Drug Users

Group Meetings:

- NIHE Hostel Managers – Londonderry and Ballymena
- NIHE Hostel Managers – Belfast
- Community Addiction Team Forum

Appendix X

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