HOUSING AND ACCOMMODATION SUPPORT INITIATIVE

EVALUATION PLAN

SPRC Report 8/06

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Abbreviations

AHS	Area Health Service
AMHS	Area Mental Health Service
CANSAS	Camberwell Assessment of Need Short Appraisal Schedule
CID	Client Information Database
CMH	Centre for Mental Health
DOH	NSW Department of Housing
GAF	Global Assessment of Functioning Scale
HASI	Housing and Accommodation Support Initiative
JGoS	Joint Guarantee of Services
OCH	Office of Community Housing
MHCC	Mental Health Coordinating Council
NGO	Non Government Organisation
SPRC	Social Policy Research Centre
UNSW	University of New South Wales

1 Introduction

This plan outlines the methodology for the evaluation of the Mental Health Housing and Accommodation Support Initiative (HASI). It is a product of a document and literature review and discussions with key stakeholders. The evaluation will research the implementation, process and outcomes of the Initiative with a specific focus on:

- Detailing the key features of HASI and analysing the impact of HASI on the independence, participation, housing outcomes, quality of life and well being of clients;
- Identifying the services provided to HASI clients and the accessibility, appropriateness and stability of these services;
- Assessing the degree to which HASI clients are able to maintain tenancies;
- Assessing the effectiveness of the partnership framework for service delivery;
- Examining the cost-effectiveness of implementing, maintaining and expanding the Initiative.

The evaluation will also make recommendations to inform the NSW Departments of Health and Housing of possible directions for future development of HASI. This paper describes the proposed evaluation plan and consists of the following sections:

- Background, development and key features of HASI;
- Evaluation framework;
- Consultation and information framework;
- Methodology and instruments
- Management.

All aspects of the evaluation plan will be presented to NSW Health, the NSW Department of Housing (DOH), the HASI Advisory Committee and the Evaluation Reference Group.

2 Background, Development and Key Features of HASI

2.1 Background

Over the last fifteen years, mental health services within Australia have undergone a

- Build successful tenancies and communities
- Create viable and effective services
- Diversify local housing responses

People with low incomes and affected by mental health problems and disorders are an important priority group for assistance by public and community housing in NSW. About 40% of low-income renters in NSW that receive a Centrelink pension or benefit and have a psychiatric disability live in public housing. This proportion rises to 45% in Metropolitan Sydney. In Western Sydney Area Health Service, public housing clients make up 55% of Centrelink pension and benefit recipients with a psychiatric disability. Over 11,000 recipients with a psychiatric disability who receive income support live in public and community housing in NSW.

Service gaps for Department of Housing clients are apparent at both ends of the needs spectrum for people with ongoing mental health problems. This includes people with low-level support needs and people with high-level support needs. Without the necessary support, the high-level group of clients will not be eligible for social housing as they need to demonstrate that they can sustain a tenancy with and/or without support . Some individuals in this group with very high needs will, as a result, remain in long stay non-acute care in the health system due to the lack of ongoing community based care options that can compliment social housing. Others may enter social housing with clinical mental health support, however, without accommodation support will not be able to sustain a tenancy.

Due to the limited availability of disability support services for people with psychiatric disabilities mental health clinicians have had to take on the additional role of accommodation support provision.

As a result of the GAP and the needs identified in the provision of housing to people with mental health problems and disorders with high support needs, HASI was developed in 2003. This initiative recognises the value of community-based care and the centrality of secure housing and adequate support in developing and maintaining independence, tenancies, and improved quality of life for people with mental illness.

2.2 Objectives

HASI, a joint initiative of NSW Health and the NSW DOH, ‘aims to improve community participation and housing stability for people with mental illness and high levels of psychiatric disability by providing high-level accommodation support that is linked to supported housing’ (OCH 2002: 4). The program is designed to improve and maintain the functional status of people with mental illness through community-based accommodation and coordinated support services (CMH 2002; Deakin 2004; DHS 1996; Freeman et al. 2003; Maron and Maitland 2004; NSW Health 2004; NSW Health 2002a; NSW Health 2002b; OCH 2002).

The initiative recognises the interdependence of stable housing, support services and clinical mental health services and aims to ‘demonstrate the benefits of a partnership approach’ in facilitating improved outcomes and community participation for people with psychiatric disability (Deakin 2004: 7).

The target group for HASI includes people on low-incomes, living with mental illness that have high support needs and have experienced difficulty sustaining mainstream tenancies. In some cases they have minimal involvement with their family, limited or no social networks and minimal or no participation in the community. They have a

broad range of complex needs, a history of hospital admissions and require ongoing assistance to adhere to medical regimes and perform daily activities (Deakin 2004; NSW Health 2004; NSW Health 2002b; NSW Health and DOH 2003).

By the end of 2004, HASI will be providing over 100 housing tenancies and accommodation support placements to people with moderate to high psychiatric disabilities.. The selection of Areas to receive support services under HASI Stage One was based on a needs analysis process conducted by the Centre for Mental Health (CMH) with a focus on the importance of developing services where there are no or few housing and accommodation supports. As a result nine sites were chosen. These

monitoring and review mechanisms for the Initiative and the chairing and coordinating of the HASI advisory committee is also NSW Health's responsibility. NSW Health also allocates funding to non-government organisations to provide accommodation suppoccocatesPv6( )]THTovide

- **The Richmond Fellowship of NSW** provides accommodation support services that aim to be responsive to individual needs, encouraging community participation for HASI clients. The Richmond Fellowship of NSW provides support services to five of the HASI sites - Western Sydney, Wentworth, Broken Hill, Tamworth and Wagga Wagga.
- **New Horizons** is a non-government organisation that encourages its clients to use a range of community based services that facilitate integration and participation in community life. New Horizons provides accommodation support services to the Central Coast site.

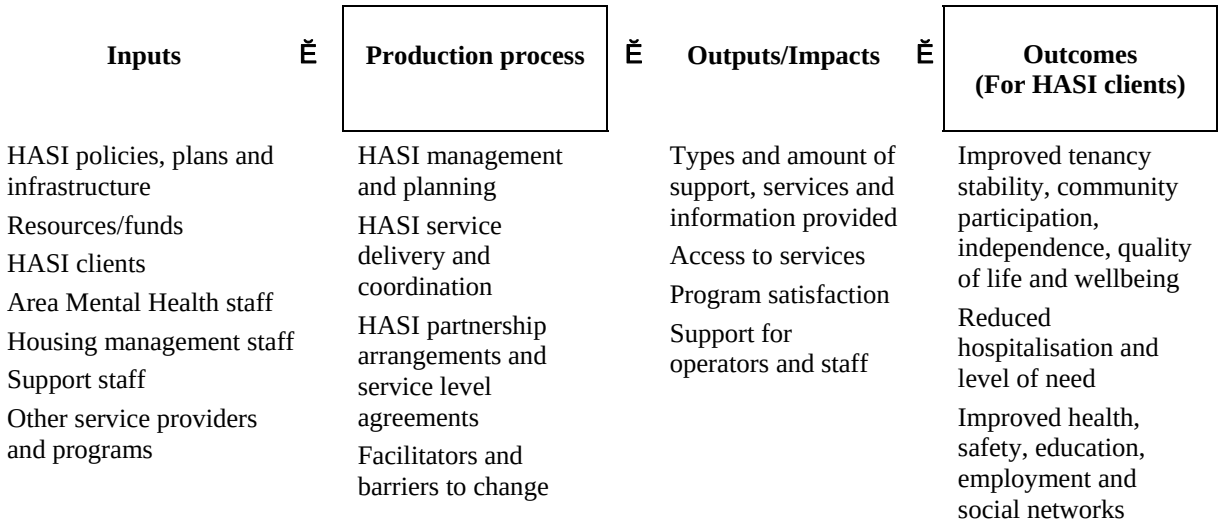
2.5 Resources and Funding

NSW Health has allocated $5 million dollars annually for accommodation support services. Funding is recurrent with contracts to each of the NGO support providers offered for a three-year term. In addition to this, the DOH through the OCH, provides funding for leasing properties from the private rental market and the acquisition of properties for community housing providers. Additional resources come from HASI clients who are required to pay rent in accordance with the DOH rent policy for public housing or community housing. The DOH has allocated $8 million for HASI accommodation (CMH 2002; OCH 2002).

3 Evaluation Framework

The evaluation will test the hypothesis that 'with appropriate support, clients requiring coordinated support will be able to maintain housing and participate in the community'. The operational basis for the evaluation will be a program theory approach as illustrated in Figure 3.1 (Bickman 1996).

Figure 3.1: Evaluation Conceptual Approach



This approach distinguishes four distinct but closely linked stages in the process of human service delivery: inputs, process, outputs and outcomes. It is particularly valuable in attempting to understand the complex interaction of individuals,

3.1 Key Evaluation Questions

Individual clients

- Does HASI enable clients to maximise their participation in the community and sustain successful tenancies and access other services?

Governance

- Are appropriate and effective governance arrangements in place to support the establishment and ongoing development of HASI?

Service systems

- Does HASI enhance access to specialist and generalist support services including housing, mental health, disability and other human services through processes of partnership and planning?

Table 3.1: Logic Flow from HASI Objectives to Evaluation Tasks and Methods

HASI objective	Evaluation objective	Evaluation task	Evaluation method
Client focused objectives			
1. Enable people with mental illness and high levels of psychiatric disability to maximize their participation in the community and improve mental health.	Examine and assess whether the target group achieve increased community participation with this model of high level accommodation support.	Assess how clients are participating in the community since joining the HASI initiative.	Longitudinal research cohort, questionnaire survey, interviews with clients, family members and support workers. GAF, CANSAS, MH-OAT
2. Enable people with mental illness and high levels of psychiatric disability to sustain successful tenancies with appropriate support.	Examine and assess whether the target group sustain successful tenancies with appropriate support services.	How many tenancies continue or look like doing so. This will be assessed in February 2005, then again in September 2005, and then in March 2006.	Longitudinal research cohort, questionnaire survey, statistical analysis, stakeholder interviews.
	Critically analyse the profile of the target population.	Identifying the characteristics of clients accepted into HASI. This will include a breakdown of the population groups, for example people from culturally and linguistically diverse groups (CALD) and Aboriginal people and will identify whether the service system is able to meet their specific needs. Identifying the characteristics of those not assessed as eligible will also be important.	Longitudinal research cohort, statistical analysis (HASI clients, waiting list, ineligible, comparative standard statistics) stakeholder interviews, basic data collection instruments.
	Recommend an appropriate tool/s for the measurement of community participation for the future development of HASI.	Appropriateness and effectiveness of the assessment tools developed for HASI.	Stakeholder interviews, research cohort instrument, comparison programs.
3. Increase the access of HASI clients to the range of specialist and generalist community services for which they are eligible	Examine and assess whether access of HASI clients to the range of specialist and generalist community services for which they are eligible has changed.	Barriers and challenges for housing, accommodation support and mental health clinical care.	Longitudinal research cohort, statistical analysis, stakeholder interviews, questionnaire survey.

4 Methodology and Instruments

This section outlines the research methods to be used in the evaluation. Regular discussions with the HASI Advisory Committee and the Evaluation Reference Group will be fundamental parts of the evaluation process. The design phase for the research has involved discussions with the key stakeholders in three sites (Greater Murray, Central Coast and South East Sydney). We will establish a liaison person at each site to facilitate appropriate research activities and data collection.

Each research period will include quantitative and qualitative data collection in each of the nine HASI sites. This will involve a minimum of three visits to each site (see Table 6.2) and will include the following research activities:

- Interviews with the following stakeholders: HASI clients, family and/or carers, NGO support providers, Area Mental Health case managers and/or staff, relevant housing and housing managers and/or staff, and, where relevant, advocates. In-depth interviews will also be conducted with AMHS planners, central policy managers and regional administrators;
- Survey questionnaires conducted with the clients, support providers, AMHS case managers and the housing providers;
- Observation of HASI processes, activities, planning and follow up;
- Ongoing collection and management of quantitative data as provided by HASI stakeholders. The Camberwell Needs Assessment Short Appraisal Schedule (CANSAS) and the Global Assessment of Functioning Scale (GAF) will be used to ascertain the type and level of outcomes for HASI clients. Where appropriate, these outcome measures will be supplemented by the Mental Health Outcomes and Assessment Tools (MH-OAT) data and the Client Information Database (CID). The latter will be developed and maintained by the SPRC (see Appendix A).

4.1 Observation, Process Data and Document Review

Process data collection will be ongoing through a range of mechanisms to facilitate open and active communication. Documents held by NSW Departments of Health and Housing, the case study sites and other stakeholders relating to the HASI will be collected or analysed on site as agreed (policies, finances, planning and implementation).

4.2 Qualitative Data from Stakeholders

Clients

We will conduct a longitudinal study of all consenting HASI clients in all nine sites. The study will be conducted over twenty months, with three contacts during that period. In-depth interviews will be used, and themes relating to program objectives (sustained tenancies, reduced inpatient admissions, continuity of mental health care, primary health care, community participation, independence, clients' well-being, met and unmet needs, satisfaction with lifestyle, satisfaction with program elements and providers, etc) will be explored (Appendix B).

The qualitative client data will be triangulated with the data from the client questionnaire (see Appendix B), mental health data (MH-OAT), the CANSAS and GAF. Quantitative and qualitative data from other stakeholders will also be used.

The same fieldworker will be used on each of the three visits so as to encourage trust between the field-worker and the clients in the site concerned. The field-worker will liaise with the support provider to obtain a sense of each client's specific needs prior to the interview. Clients will be given a $30 voucher per interview for their participation in the evaluation.

AMHS planners and partnerships managers

We will conduct interviews with Area Mental Health Service planners. These interviews will locate HASI within broader accommodation support and examining partnership arrangements (contracts and Memoranda of Understanding) with NGOs. Structured observation of partnership forums and processes may be an appropriate method depending on the arrangement of these mechanisms in each site.

Department of Health and Department of Housing staff

We will also conduct interviews with central policy managers, project coordinators and regional administrators relating to contract management (of NGOs), HASI implementation issues, state and regional coordination issues and partnership effectiveness.

Local operational coordination of HASI

The local operational and care coordination issues will be canvassed through in-depth interviews and by the fieldworker at coordination committee meetings at each site.

Area and peak consumer and provider organisations

The stakeholders in the Evaluation Reference Group (Area and State consumer and provider organisations such as NSW Consumer Advisory Group, the NSW Mental Health Coordinating Committee, the Tenants' Union of NSW and selected members of Area consumer and carer consultancy committees of the MHS) will also be invited to participate in formal interviews during the evaluation, relating to implementation issues and specific consumer, carer and provider issues**.**

4.3 Quantitative Data Analysis

As mentioned, the in-depth interviews with clients will be supplemented with a questionnaire that will cover the following areas: clients' perceptions of their accommodation and the housing provider; perceptions of the neighbourhood they are living in and community integration; perceptions of the NGO support and support worker/s; perceptions of their support from the area mental health team; perceptions of their health and life-skills; perceptions of met and unmet need, and perceptions of daily life. Some of the questions relating to community integration are drawn from the study of five communities in New South Wales by Bullen and Onyx (1998) and the life skills measures are drawn from a variety of sources (Heal and Chadsey-Rusch, 1986; Schwartz, 2003). The data collected on the client questionnaire will be coded

Quantitative data relating to clients such as referral information, assessment, services, costs and outcomes, will be collected and transferred. Of particular importance will be input and output data (e.g. number of clients using the HASI, characteristics, mental health, family and carers, cost, resources, staff and support type).

Quantitative data relating to the program will be used to describe the scope of the program. This is defined in terms of the number of clients; characteristics, assessment and outcomes information relating to the clients; and patterns of services and support provided (including but not limited to type, frequency and duration of services and support). Liaison with the agencies collecting the data has begun as part of the design phase to ensure the data collection is manageable and to ensure any difficulties are communicated early during the research period. The timing and method of data transfer will also be negotiated.

Quantitative data will also be accumulated through the use of questionnaires with family members / carers, Area Mental Health and housing providers. The data collected will be coded into SPSS and should provide a wealth of data to facilitate the evaluation.

All the questionnaires will be piloted and adjusted where necessary.

4.4 Cost Effectiveness Analysis

The cost-effectiveness analysis will summarise some of the outcomes of HASI, presenting information about the client benefits conferred for the money spent. The cost effectiveness analysis will use a subset of the financial data – the ongoing administrative and service costs of HASI services. For the purposes of the cost effectiveness analysis, costs will only include the financial costs of managing HASI, the costs of tenancy, the costs of assessment and arranging services and the costs of the services themselves. It will exclude the following costs:

- One-off costs of establishment and evaluation because these are not comparable to the operational systems in other health and community service systems;
- Costs incurred by other agencies, such as AHS costs not allocated to the HASI budget; NGO (both support and housing) costs not reimbursed by the contract price, and additional cost incurred by the public housing providers;
- Indirect costs to clients or other stakeholders;
- Non-financial costs, such as time, stress and impact on other services.

Costs are likely to be taken at the dollar value at the time of measurement because the analysis is a relative comparison of simultaneous service provision over a short evaluation period. Outcome data for the cost effectiveness analysis will be derived from the standard data collection used in the management of the program for the total

5 Management

5.1 Deliverables

Information collection systems issues paper
The paper will review current methods of data collection and reporting across HASI sites by NGO support providers, Area Mental Health Services and housing providers. This information will be compared and contrasted with protocols outlined in the Initiative objectives and guidelines. The paper will recommend standardised methods for collection and reporting for NSW NGO accommodation and psychiatric disability support services and suggest a set of relevant outcome indicators.

We will review the existing HASI data collection systems through telephone interviews with NGO support providers, Area Mental Health case managers and housing providers. We will specifically explore information collection at the points of referral, admission and exit of the Initiative. We will also explore current formal and informal reporting mechanisms and identify any perceived challenges with information collection.

We will also examine information sharing protocols between NGO support providers, Area Mental Health Services and housing providers and how this impacts on partnerships between these organisations. We will also compare current HASI information collection systems to systems in similar programs through literature reviews and contacts with other relevant organisations.

Final evaluation report and interim half-yearly evaluation reports for 2 years
The research output will include the reports as listed above, regular progress reports as required by the Advisory Committee and presentations of draft and final materials to the Advisory Committee, Evaluation Reference Group and stakeholders as required.

With NSW Departments of Health and Housing approval, the research findings will also be prepared for academic publications and conference presentations.

The half-yearly and Final Evaluation Reports will include progress on each of the following sections:

- Summary and recommendations;
-

Table 5.1: Timeframe for the Evaluation

Deliverables	Tasks	Month	Year
Issues paper	Consult with NSW Health and DOH	September	2004
	Liaise with Health, Housing, NGOs and stakeholders	September	2004

The literacy and linguistic needs of participants from a Non-English speaking or Aboriginal and Torres Strait Islander background will be acc

Appendix A: Client Information Database for HASI Evaluation

1. Section One (to be completed once for each HASI client)

Client Identification Number: ### Date Completed: dd/mm/yyyy

Basic client information	
Date of birth	dd/mm/yyyy
Sex	M/F/T
Date of referral to HASI	dd/mm/yyyy
Date of entry into HASI program (date of entry is when tenancy commences)	dd/mm/yyyy
Number of admissions to hospital over 12 month period prior to entry into HASI program (date of entry is when tenancy commences)	Number of days Å Don't know Å
Number of days in the acute section of hospital over 12 month period prior to entry into HASI program (date of entry is when tenancy commences)	Number of days Å Don't know Å
Number of days in the non-acute section of hospital over 12 month period prior to entry into HASI program (date of entry is when tenancy commences)	Number of days Å Don't know Å
Country of birth	Australia Other (please specify) _____
Is the client of Aboriginal/Torres Strait Islander descent?	Yes/No
Is the client from a culturally and linguistically diverse background (CALDB)?	Yes/No
Mental health diagnosis	Schizophrenia Schizoaffective Disorder Bipolar Disorder Depression Anxiety Co-morbidity Other (please specify) _____

Family situation on entry to HASI	
Relationship status on entry to HASI	Married / de facto Single (never married) Divorced/Separated Widowed/Widower
Number of children on entry to HASI	Enter number
Frequency of contact with parent/s on entry to HASI	Daily More than once a week Weekly Every couple of weeks Monthly Every couple of months Once a year Once every couple of years Never N/A – Parents not alive
Frequency of contact with siblings or other relatives on entry to HASI	Daily More than once a week Weekly Every couple of weeks Monthly Every couple of months Once a year Once every couple of years Never N/A – Other relatives not alive
Frequency of contact with children on entry to HASI	Daily More than once a week Weekly Every couple of weeks Monthly Every couple of months Once a year Once every couple of years Never N/A – Does not have children/children not alive

Family situation on entry to HASI	
Frequency of contact with carer on entry to HASI	Daily More than once a week Weekly Every couple of weeks Monthly Every couple of months Once a year Once every couple of years Never N/A – Does not have a carer

3. Section Three

(To be completed at 3 points during the evaluation period for each HASI client)

First questionnaire completion: **dd/02/2005**

Second questionnaire completion: **dd/09/2005**

Third questionnaire completion: **dd/03/2006**

First HASI Tenancy during period to Feb 05/Sept 05/March 06	
Date started	dd/mm/yyyy
Date ended (if applicable)	dd/mm/yyyy
Number of complaints made about tenant during this tenancy period (if applicable)	Enter number
Nature of complaints	Inability to pay rent Property damage Created nuisance or annoyance to neighbours Other (please specify) _____
Reasons for ending tenancy (if applicable)	Inability to pay rent Property damage Created nuisance or annoyance to neighbours Client elected to end tenancy

Second HASI Tenancy during period to Feb 05/Sept 05/March 06 (if applicable)	
Date started	dd/mm/yyyy
Date ended (if applicable)	dd/mm/yyyy
Number of complaints made about tenant during this tenancy period (if applicable)	Enter number
Nature of complaints	Inability to pay rent Property damage Created nuisance or annoyance to neighbours Other (please specify) _____
Reasons for ending tenancy (if applicable)	Inability to pay rent Property damage Created nuisance or annoyance to neighbours Client elected to end tenancy

Client need – Camberwell Assessment of Need Short Appraisal Schedule (CANSAS) as at Feb 05/Sept 05/March 06			
	User	Staff	Carer
1. Accommodation			
2. Food			
3. Looking after the home			
4. Self-care			
5. Daytime activities			
6. Physical health			
7. Psychotic symptoms			
8. Information on condition and treatment			
9. Psychological distress			
10. Safety to self			
11. Safety to others			
12. Alcohol			
13. Drugs			
14. Company			
15. Intimate relationships			
16. Sexual expression			
17. Child care			
18. Basic education			
19. Telephone			
20. Transport			
21. Money			
22. Benefits			
Total number of met needs			
Total number of unmet needs			
Total number of needs			
Date assessed	dd/mm/yyyy	dd/mm/yyyy	dd/mm/yyyy

Global Assessment of Functioning Scale (GAF) as at Feb 05/Sept 05/March 06	
Score	Number from 0-100

Family contact as at Feb 05/Sept 05/March 06	
Frequency of contact with parents as at Feb 05/Sept 05/ March 06	Daily More than once a week Weekly Every couple of weeks Monthly Every couple of months Once a year Once every couple of years Never N/A – Parents not alive
Frequency of contact with siblings or other relatives as at Feb 05/Sept 05/ March 06	Daily More than once a week Weekly Every couple of weeks Monthly Every couple of months Once a year Once every couple of years Never N/A – Other relatives not alive
Frequency of contact with children as at Feb 05/Sept 05/ March 06	Daily More than once a week Weekly Every couple of weeks Monthly Every couple of months Once a year Once every couple of years Never N/A – Does not have children/children not alive
Frequency of contact with carer as at Feb 05/Sept 05/ March 06	Daily More than once a week Weekly Every couple of weeks Monthly Every couple of months Once a year Once every couple of years Never N/A – Does not have carer

Support Workers as at Feb 05/Sept 05/March 06	
How many different key support workers has the client had since entry or last questionnaire completion date?	Enter number

Community / social participation as at Feb 05/Sept 05/March 06			
	No	Yes	Don't know
Does the client have any friends?			
Has the client made new friends since entry to HASI or the last questionnaire completion date?			
Has the client started an intimate relationship since entry to HASI or the last questionnaire completion date?			
Does the client participate in community activities (eg. sporting clubs, local events, bushcare, church activities etc.)?			
Does the client get on with the neighbours?			

Living Skills as at Feb 05/Sept 05/March 06

Life Skills – Self Care Tasks	**Independent**	**Minimal support required**	**Moderate support required**	**Fully dependent**	**Don't Know**
Bathing/Showering					
Dressing					
Diet					
Exercise					
Taking medication					

Life Skills – Domestic Tasks	**Independent**	**Minimal support required**	**Moderate support required**	**Fully dependent**	**Don't Know**
Cooking					
Cleaning					
Shopping					
Laundry					

Education and training as at Feb 05/Sept 05/March 06 (if applicable)	
What education/ training activities is the client involved in?	TAFE course Community College University Other (please specify) _____ N/A
What date did the client start this activity?	mm/yyyy
Hours it occupies per week	

Utilisation of health services as at Feb 05/Sept 05/March 06	
Number of consultations with GP since entry to HASI or since last questionnaire completion date	
Number of consultations with psychiatrist since entry to HASI or since last questionnaire completion date	
Number of consultations with other specialists since entry to HASI or since last questionnaire completion date	
Number of consultations with community mental health services since entry to HASI or since last questionnaire completion date	
Number of visits to emergency services since entry to HASI or since last questionnaire completion date	
Number of consultations with other Allied Health services (physiotherapy, dental, occupational therapy, rehabilitation program) since entry to HASI or since last questionnaire completion date	

Hospitalisation as at Feb 05/Sept 05/March 06	
Number of admissions to hospital since joining the HASI program / or since last questionnaire completion date	
Number of days in acute section of the hospital since joining the HASI program / or since last questionnaire completion date	
Number of days in non-acute section of the hospital since joining the HASI program / or since last questionnaire completion date	

Appendix B: Interview Schedule and Questionnaire for HASI Clients

Client Name	
Date completed (dd/mm/yyyy)	

Q1: Client's Perceptions of their Accommodation and Housing Provider

How long have you been living in this current accommodation?

Where were you living before (type of accommodation and suburb)?

What do you enjoy about living in your current accommodation?

Did you choose this place? Did you choose this area? Did you choose the furniture?

What aspects of your current accommodation do you not like?

Have you ever moved since joining HASI? Is so, what were the reasons for moving?

How would do you get on with the people at (Community Housing Organisation, Department of Housing)?

Q1.1 Satisfaction with accommodation						
	Very dissatisfied	Dissatisfied	Neither satisfied nor dissatisfied	Satisfied	Very Satisfied	Don't know/ Unsure
a) General condition						
b) Cleanliness (when you first moved in)						
c) Space available						
d) Furniture						
e) Temperature of your home						
f) Overall, how satisfied are you with your accommodation?						

Q1.2 Satisfaction with housing provider						
	Very dissatisfied	Dissatisfied	Neither satisfied nor dissatisfied	Satisfied	Very Satisfied	Don't know/ Unsure
Are you satisfied with your housing provider?						

Q1.3 Stability of Tenancy			
	No	Yes	Don't know/ Unsure

Q2.3 What types of transportation do you use for getting around?
Bus Å Train Å Car Å Taxi Å

Q2.6 Perceptions of safety in the neighbourhood						
	Never	Rarely	Sometimes	Mostly	Always	Don't know/ Unsure
a) Do you feel safe walking around the neighbourhood during the day?						
b) Do you feel safe walking around the neighbourhood at night?						
c) Have you ever been harassed in the neighbourhood?						
d) Are you scared to go out of your home by yourself?						
e) Do you feel safe in your home?						

b)

Q3.2 Satisfaction with NGO support workers						
	Very dissatisfied	Dissatisfied	Neither satisfied nor dissatisfied	Satisfied	Very Satisfied	Don't know/ Unsure
Overall, how satisfied are you with the support that you receive from Neami/ RF /NH?						

Q3.3 Satisfaction with key support worker				
	Not at all	A bit	A lot	Don't know
Overall, do you feel the support from your key support worker(s) has helped you?				

Q3.4 In the last week, how often do you see your support workers? (NB: If difficulty with this question use prompts –breakfast, lunch, dinner).

Day	Hours per day
a. Monday	
b. Tuesday	
c. Wednesday	
d. Thursday	
e. Friday	
f. Saturday	
g. Sunday	
h. TOTAL	

Q3.5 What does the support worker(s) do when they come to your home?

Q3.6 Where do you go when you go out with your support worker?

Q3.7 Did you set any short or long-term goals with your key worker? Have you achieved any of these goals?

Q3.8 Which of these activities does your support worker(s) help you with?

	Very dissatisfied	Dissatisfied	Neither dissatisfied nor satisfied	Satisfied	Very satisfied	Don't know /Unsure
b) Are you satisfied with how your mental health case manager supports you?						
c) Are you satisfied with the support and treatment that you are receiving from the area mental health team?						
d) Are doctors, psychiatrists & mental health workers easy to contact and organise a time when you feel you need to see them?						

Q4.2 Overall, do you feel the support and treatment from the Area Mental Health team has helped you?

Worse

Q5.3 Frequency and quality of contact						
	A lot less / worse	A bit less / worse	Same	A bit more / better	A lot more / better	Don't know/ Unsure
a) Since joining HASI, how has the frequency of family contact changed?						
b) Since joining HASI, how has the quality of family contact changed?						

Q5.4 Satisfaction with family contact						
	Very dissatisfied	Dissatisfied	Neither satisfied nor dissatisfied	Satisfied	Very Satisfied	Don't know/ Unsure
Are you satisfied with your family relationships?						

Q6. Client perception of their relationships with friends

How often do you have contact with friends?

Do friends ever come to your home? If yes, how often?

Since you started HASI, has the amount of time to spend with or talk to your friends changed?

Since you started HASI, do you think your relationship with your friends has changed?

Q6.1 Frequency and quality of contact						
	A lot worse	A bit worse	Same	A bit	A lot	Don't know/ Unsure
a) Has your contact with your friends increased since you joined HASI?						
b) Are you getting on better with your friends since you joined HASI?						

Q6.2 Satisfaction with friend contact						
	Very dissatisfied	Dissatisfied	Neither satisfied nor dissatisfied	Satisfied	Very Satisfied	Don't know/ Unsure
Are you satisfied with the relationship you have with your friends?						

Q7. Client's Perceptions of their Health and Life-Skills

Do you feel your life has changed since being involved in HASI? If so, how has it changed? (Prompts: health changes, life skills, social interaction, and community participation)

Q7.1 Health status since joining HASI (if difficulty conceptualising beginning of HASI, use 'since living in this place' or 'in the last three months').						
	Much worse	A bit worse	Same	A bit better	Much better	Don't know/ Unsure
a) Has your physical health changed since you started HASI?						
b) Has your mental health changed since becoming part of the HASI program?						
c) Do feel different about yourself since becoming part of the HASI program?						
d) Do you feel your diet has changed since becoming part of the HASI program?						
e) Are you sleeping better since becoming part of the HASI program?						

Q7.2 In general, would you say that you

Q7.8 Perceptions of daily life			
	No	Yes	Don't know/Unsure
a) Do you keep yourself busy during the day?			
b) Do you enjoying daily life?			
c) Has your daily life improved since you joined the HASI program?			
d) Do you enjoy living by yourself?			
e) Do you get lonely?			
f) Would you like more company?			
g) Are you in a significant/special relationship?			

Q7.9 Studying and work				
	No	Yes	Don't know/Unsure	Not applicable
a) Are you studying at the moment (TAFE, Community College, University)?				
b) If not, do you intend to study in the next 12 months?				
c) Are you working at the moment?		i) voluntary ii) paid		
d) If not, do you wish you had a job?				
e) Are you looking for a job?				

Q7.10 If you are studying what course/s are you doing?

_____

_____

Q7.11 If you are working, give details (hours per week, kind of job, supported or open employment)?

_____

_____

Q7.12 When did you last work (voluntary and/or paid)?

Q8. Client's Perceptions of their Personal Well-being (ask questions as written; do not prompt the interviewer)

Q8.1 Thinking about your own life and personal circumstances, how satisfied are you with your life as a whole?

0	1	2	3	4	5	6	7	8	9	10
Completely Dissatisfied					Mixed					Completely Satisfied

Q8.2 How satisfied are you with your standard of living?

0	1	2	3	4	5	6	7	8	9	10
Completely Dissatisfied					Mixed				Completely Satisfied	

Q8.3 How satisfied are you with your health?

0	1	2	3	4	5	6	7	8	9	10
Completely Dissatisfied					Mixed				Completely Satisfied	

Q8.4 How satisfied are you with

Q8.4 How satisfied are you with whatre yo8 13 00(6)-250(7 8 d)44afe8.32 0
Dissatisfied

Appendix C: Interview Schedule and Questionnaire for Family Members and Carers

Client Identification Number	
Date completed (dd/mm/yyyy)	

Interview Schedule:

What is your relationship to the HASI client? If friend/carer/guardian, how long have you known x?

How regularly are you in contact with x?

How did your family member/friend come to be involved in HASI (prompt: how did you hear about it)?

What did you think about this initially?

What are your perceptions about the accommodation that your family member/friend has been provided with as part of the HASI program? (Prompts: location, condition of property, neighbourhood)?

Q1. Satisfaction with Accommodation

How satisfied are you with the accommodation provided to x? Why?

Q1.1 What is your level of satisfaction with the following aspects of your family member's/friend's accommodation?						
	Very dissatisfied	Dissatisfied	Neither dissatisfied nor satisfied	Satisfied	Very satisfied	Don't know/Unsure

Q4.2 Since joining the HASI program do you feel that the following areas have improved for your

Q4.10 How would you compare HASI to some of the other programs x has been a part of?

Q4.11 Do you have any other comments you would like to make about HASI?

Appendix D: Interview Schedule for Area Mental Health - Part I: Managers

- How long have you been working with the Area Mental Health service?
- How long have you been a managing case managers working with the HASI clients?
- How many HASI case managers do you manage? How many clients do you work with?

Operation/management of support provided

- What processes do you go through in planning and providing support to residents? Have there been any issues for you in this process?
- Do you have any comments about the administration of HASI? eg funding or service design; adequate resources to support clients; referral and assessment processes and support from the DOH and the Department of Health; other service viability issues?
- Have you been involved in the development of any protocols on the operation of HASI (eg. referral process, range of agreements, resource manual)? What are they? What issues have you needed to take into consideration in developing these protocols? Have they been shared across areas?
- What types of internal policies and procedures do you have in relation to HASI that you have found to be beneficial (eg. safety et al.)?
- What internal policies and procedures do you have in relation to HASI that you have found to be less successful?
- Are there any workforce issues (quality of staff, supervision of staff, training needs, OHS issues, recruitment, selection and retention issues)?

Partners

- How is your relationship with the housing provider?
- How is your relationship with the accommodation support provider?
- How do you find working with the Regional Co-ordination Groups (monthly meetings)? -0.0002 Tc -0.088/C2_0tion Grohere anyy02 Tw -1.1 0\-0.00e Tc .8t8odal Co-ordina5.fm

x

- What complaint mechanisms are available to the tenants? How do you feel residents would express their satisfaction or dissatisfaction with the service? Would people complain if they were unhappy? Have any residents used the complaints process? How has your agency responded? Can you give an example please?
- Do you think HASI has sufficient scope / resources to address the support needs of residents?
- Do you feel that the HASI initiative is having a significant impact? Can you give examples of this?
- How do you see the future for the clients?
- How do you see the future of the program?
- Are there any other experiences or issues with the implementation and conduct of HASI that you'd like to be reflected in the evaluation?
- Do you have any ideas about how HASI could be improved?
- Do you have any further comments you would like to make about the HASI program?

Questionnaire for Area Mental Health Managers

Q1 Referral and Assessment Process						
	Very poor	Weak	Average	Good	Excellent	Don't Know/Unsure
a) Overall, how would you rate the effectiveness of the referral process?						
b) Overall, how would you rate the effectiveness of the admission process?						

Q2 Accommodation and Housing Providers						
	Very dissatisfied	Dissatisfied	Neither satisfied nor dissatisfied	Satisfied	Very Satisfied	Don't know/Unsure
a) Overall, how satisfied are you with the accommodation that the HASI clients have received?						
b) Overall, how satisfied are you with the way the housing providers have dealt with the HASI clients?						

Q3 How would you describe your relationship with the housing provider?					
Very poor	Weak	Average	Good	Excellent	Don't know/ Unsure

Q4 How would you describe your relationship with the Accommodation Support Provider?					
Very poor	Weak	Average	Good	Excellent	Don't know/ Unsure

Q5 Coordination of HASI			
Very dissatisfied	Dissatisfied	Neither	

Q7. The HASI Clients

Q7.1 Have HASI clients overall shown improvement in the following areas?

	Declined	Stayed the same	Improved a bit	Improved a lot	Very Uneven

Q9 If you think of your HASI clients how would you rate the effectiveness of the HASI program for each *individual*?

a) Name:

Unsuccessful				Moderately Successful				Very Successful	
1	2	3	4	5	6	7	8	9	10

b) Name:

Unsuccessful				Moderately Successful				Very Successful	
1	2	3	4	5	6	7	8	9	10

c) Name:

Unsuccessful				Moderately Successful				Very Successful	
1	2	3	4	5	6	7	8	9	10

d) Name:

Unsuccessful				Moderately Successful				Very Successful	
1	2	3	4	5	6	7	8	9	10

e) Name:

Unsuccessful				Moderately Successful				Very Successful	
1	2	3	4	5	6	7	8	9	10

f) Name:

Unsuccessful				Moderately Successful				Very Successful	
1	2	3	4	5	6	7	8	9	10

g) Name:

Unsuccessful				Moderately Successful				Very Successful	
1	2	3	4	5	6	7	8	9	10

h) Name:

Unsuccessful				Moderately Successful				Very Successful	
1	2	3	4	5	6	7	8	9	10

i) Name:

Unsuccessful				Moderately Successful				Very Successful	
1	2	3	4	5	6	7	8	9	10

j) Name:

Unsuccessful				Moderately Successful				Very Successful	
1	2	3	4	5	6	7	8	9	10

Q10 Please add any additional comments you may have about HASI:

Appendix E: Interview Schedule for Area Mental Health - Part II: Case Managers

- How long have you been working with the Area Mental Health service?
- How long have you been a case manager for HASI client(s)?
- How many clients do you work with?
- Can you explain how you work with the clients? What support do you provide?
- What do you think of the accommodation provided to the HASI clients? (Prompt: location and nature of housing eg. is it separate from other HASI clients)

Process/management of support provided

- Do you have any comments about the referral and assessment processes?
- What process do you go through when you meet a resident for the first time?
- What processes do you go through in planning and providing support to residents (prompt: individual service agreements & goals set with clients)? Have there been any issues for you in this process?
- How do you account to your manager in the use of your time with residents, the kinds of support, which are planned, and the quality of that work?
- How do you encourage residents to ask for the service to change or express their satisfaction or dissatisfaction with the service? Can you give an example please?

Partners

- How is your relationship with the housing provider?
- How is your relationship with the accommodation support provider?

Outcomes

- What are the benefits of HASI for residents (prompt: progress)? Can you give examples of these?
- Are there downsides of HASI for residents (prompt: loneliness, isolation, vulnerability, hospitalisations, exits)? Can you give examples of these?
- Do you feel that the residents are increasing their community participation? Can you give examples of this?
- How do you see the immediate neighbourhood and community interacting with residents? What impact is the HASI initiative having on this?
- Did you set short and long term goals with your client? Have they achieved any of these goals?
- How do you see the future of the residents?
- How do you see the future of the program?
- Do you have any further comments you would like to make about the HASI program?

Questionnaire for Area Mental Health Case Managers

Q1 Referral and Assessment Process						
	Very poor	Weak	Average	Good	Excellent	Don't Know/Unsure
a) Overall, how would you rate the effectiveness of the referral process?						
b) Overall, how would you rate the effectiveness of the admission process?						

Q2 Accommodation and Housing Providers						
	Very dissatisfied	Dissatisfied	Neither satisfied nor dissatisfied	Satisfied	Very Satisfied	Don't know/Unsure
a) Overall, how satisfied are you with the accommodation that the HASI clients have received?						
b) Overall, how satisfied are you with the way the housing providers have dealt with the HASI clients?						

Q3 How would you describe your relationship with the housing provider?					
Very poor	Weak	Average	Good	Excellent	Don't know/ Unsure

Q4 How would you describe your relationship with the Accommodation Support Provider?					
Very poor	Weak	Average	Good	Excellent	Don't know/ Unsure

Q5 Coordination of HASI						
	Very dissatisfied	Dissatisfied	Neither satisfied nor dissatisfied	Satisfied	Very Satisfied	Don lr

Q8. The HASI Clients

Q8.1 Have HASI clients overall shown improvement in the following areas?

	Declined	Stayed the same	Improved a bit	Improved a lot	Very

Appendix F: Interview Schedule and Questionnaire for Housing Provider

Client Identification Number	
Date completed (dd/mm/yyyy)	

1. Perceptions of HASI and the coordination thereof

- How long have you been working with the housing provider?
- How many HASI clients are you providing housing for?
-

2. Perceptions of the HASI tenants

- Do you have much knowledge about each of the HASI clients you provide housing for?
- Are you happy with the housing you have provided to the HASI clients?
- Are the HASI clients looking after their properties adequately?
- How do they compare to your other tenants?
- Do you receive many complaints about the HASI tenants? How do you resolve these complaints?
- Are they able to sustain their tenancy?
- What complaints mechanisms are available to the tenants? How do you resolve these complaints?
- Would tenants complain if they were unhappy? Have any tenants used the complaints process? How has your agency responded? Can you give an example please, if appropriate?
- Do you think HASI has sufficient scope to address the housing needs of the residents?
- Do you feel that the HASI initiative is having a significant impact?
- How do you see the future of the program?
- Are there any other experiences or issues with the implementation and conduct of HASI that you'd like to be included in the evaluation?

Q2 Perceptions of the HASI tenants?			
	No	Yes	Don't know/Unsure
a) Are they more difficult on average than your usual tenants?			
b) Do they keep their accommodation in good order?			
c) Are the numbers of complaints levelled against HASI tenants greater than the general average?			
d) Are the HASI tenants more likely to lose their tenancy than your usual tenants?			

Q3. Tenancy History (this section to be completed for each HASI client)

Client Name	

Q3.1 Rent history since joining HASI (Circle Response)	
a) Has the tenant ever been in rent arrears?	No Yes Don't know/Unsure
b) If yes, number of weeks in rent arrears?	_____ Not applicable Don't know/Unsure
c) Approximate cost to the housing provider	_____ Not applicable Don't know/Unsure

Q3.2 First HASI Tenancy (Circle Response)	
a) Date started	_____ (dd/mm/yyyy) Don't know/Unsure
b) Date ended (if applicable)	_____ (dd/mm/yyyy) Not applicable Don't know/Unsure
c) Type of accommodation	Unit/Apartment Townhouse/Villa/Duplex House Other (please specify) _____
d) Length of time taken to find a home for the client after he / she was accepted into HASI?	_____ (Number of weeks) Not applicable Don't know/Unsure
e) Number of complaints made about tenant during this tenancy period (if applicable)	_____ Not applicable Don't know/Unsure
f) Nature of complaints	Inability to pay rent Property damage Created nuisance or annoyance to neighbours Other (please specify) _____

l) What was the cost of this approximately?	_____ (Dollar value) Not applicable Don't know/Unsure
m) Was there an appeal to the Consumer Tenancy Tribunal?	No Yes Don't know/Unsure
n) What was the cost of this approximately?	_____ (Dollar value) Not applicable Don't know/Unsure

Q3.3 Rent history since last field visit (Circle response)	
a) Has the tenant been in rent arrears since last interview?	No Yes Don't know/Unsure
b) If yes, number of weeks in rent arrears?	_____ Not applicable Don't know/Unsure
c) Approximate cost to the housing provider? (Approximate dollar value)	_____ Not applicable Don't know/Unsure

Q3.5 Rent history since last field visit (Circle Response)	
a) Has the tenant been in rent arrears since last interview?	_____ (Number of weeks) Not applicable Don't know/Unsure
b) If yes, number of weeks in rent arrears?	_____ (Dollar value) Not applicable Don't know/Unsure
c) Approximate cost to the housing provider?	_____ (Number of weeks) Not applicable Don't know/Unsure

Q3.6 Third HASI Tenancy (if applicable)	
a) Date started	_____ (dd/mm/yyyy) Don't know/Unsure
b) Date ended (if applicable)	_____ (dd/pppple) (ify) No yy) In2.4oab 17.ility to2.4o

h) Length of time the vacated property remained empty?	_____ (Number of weeks) Not applicable Don't know/Unsure
i) Approximate cost to the housing provider of the property remaining vacant?	_____ (Dollar value) Not applicable Don't know/Unsure
j) Length of time it took to find a new home for the client?	_____ (Number of weeks) Not applicable Don't know/Unsure

Q4 Do you have any general suggestions for the HASI program?

Appendix G: Interview Schedule for Accommodation Support Providers - Part I: Managers

- How long have you been working with Neami/ New Horizons/ The Richmond Fellowship of NSW?
- How long have you been an area manager?
- How many support workers do you manage? How many clients do you work with?

Operation/management of support provided

- What processes do you go through in planning and providing support to residents? Have there been any issues for you in this process? Who provides support if it is required outside of the 16hr day?
- Do you have any comments about the administration of HASI? eg funding or service design; adequate resources to support clients; referral and assessment processes and support from the DOH and the Department of Health; other service viability issues?
- Have you been involved in the development of any protocols on the operation of HASI (eg. referral process, range of agreements, resource manual)? What are they? What issues have you needed to take into consideration in developing these protocols? Have they been shared across areas?
- What types of internal policies and procedures do you have in relation to HASI that you have found to be beneficial (eg. safety et al.)?
- What internal policies and procedures do you have in relation to HASI that you have found to be less successful?
- Are there any workforce issues (quality of staff, supervision of staff, training needs, OHS issues, recruitment, selection and retention issues)?

Partners

- How is your relationship with the housing provider?
- How is your relationship with Area Mental Health?
- How do you find working with the Regional Co-ordination Groups (monthly meetings)? Do you have any issues with the regional co-ordination?
- Are local medical, psychiatric and other community health and wellbeing providers responding to the needs of residents?

Outcomes

- What are the benefits of HASI for residents? Can you give examples of these?
- What are the downsides of HASI for residents (prompt: loneliness, isolation, vulnerability, hospitalisations)? Can you give examples of these?
- Have you had any tenants leave the HASI program? Why? What happened to the resources – housing, furniture & funding?
- Are HASI tenants* integrating into the community? Can you give examples of their interaction with the community and the community interacting with them?

- What complaint mechanisms are available to the tenants? How do you feel residents would express their satisfaction or dissatisfaction with the service? Would people complain if they were unhappy? Have any residents used the complaints process? How has your agency responded? Can you give an example please?
- Do you think HASI has sufficient scope / resources to address the support needs of residents?
- Do you feel that the HASI initiative is having a significant impact? Can you give examples of this?
- How do you see the future for the clients?
- How do you see the future of the program?
- Are there any other experiences or issues with the implementation and conduct of HASI that you'd like to be reflected in the evaluation?
- Do you have any ideas about how HASI could be improved?
- Do you have any further comments you would like to make about the HASI program?

Questionnaire for Accommodation Support Provider Managers

Q1 Referral and Assessment Process

Q5 Coordination of HASI						
	Very dissatisfied	Dissatisfied	Neither satisfied nor dissatisfied	Satisfied	Very Satisfied	Don't know/Unsure
a) Overall, how satisfied are you with the communication between yourselves and Area Mental Health?						
b) Overall, how satisfied are you with the communication between yourselves and the housing provider?						
c) Overall, how satisfied are you with the overall coordination of the HASI program?						

Q6 Please rank the level of difficulty you have with the following staffing matters											
	No difficulty					Moderately difficult					Extreme difficulty
	0	1	2	3	4	5	6	7	8	9	10
a) Recruitment & selection											
b) Training											
c) Supervision											
d) Retention											

Appendix H: Interview Schedule for Accommodation Support Providers - Part II: Key workers

- How long have you been working with Neami/ New Horizons/ The Richmond Fellowship of NSW?
- How long have you been a key/support worker?
- How many clients do you work with (prompt: administratively responsible for and visit in a supportive role)?
- Can you explain how you work with the clients? What support do you provide in the home and outside of the home (domestic, social, recreational, educational/training)?
- What do you think of the accommodation provided to the HASI clients?

Process/management of support provided

- Do you have any comments about the referral and assessment processes?
- What process do you go through when you meet a resident for the first time?
- What processes do you go through in planning and providing support to residents (prompt: individual service agreements & goals set with clients)? Have there been any issues for you in this process?
- How do you account to your manager in the use of your time with residents, the kinds of support which are planned and the quality of that work?
- How do you encourage residents to ask for the service to change or express their satisfaction or dissatisfaction with the service? Can you give an example please?

Partners

- How is your relationship with the housing provider?
- How is your relationship with Area Mental Health?

Outcomes

- What are the benefits of HASI for residents (prompt: progress)? Can you give

- Do you have any further comments you would like to make about the HASI program?

Questionnaire for Service Provider Key Workers

Q1 Referral and Assessment Process						
	Very poor	Weak	Average	Good	Excellent	Don't Know/Unsure
a) Overall, how would you rate the effectiveness of the referral process?						
b) Overall, how would you rate the effectiveness of the admission process?						

Q2 Accommodation and Housing Providers						
	Very dissatisfied	Dissatisfied	Neither satisfied nor dissatisfied	Satisfied	Very Satisfied	Don't know/Unsure
a) Overall, how satisfied are you with the accommodation that the HASI clients have received?						
b) Overall, how satisfied are you with the way the housing providers have dealt with the HASI clients?						

Q3 How would you describe your relationship with the housing provider?					
Very poor	Weak	Average	Good	Excellent	Don't know/ Unsure

Q4 How would you describe your relationship with the Area Mental Health Service?					
Very poor	Weak	Average	Good	Excellent	Don't know/ Unsure

Q5 Coordination of HASI						
	Very dissatisfied	Dissatisfied	Neither satisfied nor dissatisfied	Satisfied	Very Satisfied	Don't know/Unsure
a) Overall, how satisfied are you with the communication between yourselves and Area Mental Health?						
b) Overall, how satisfied are you with the communication between yourselves and the housing provider?						
c) Overall, how satisfied are you with the overall coordination of the HASI program?						

Q6 Thinking about the various forms of violence and abuse, how *at-risk* do you currently think the HASI client is?

	Nil risk		**Moderate risk**		**High risk**
	0	**1**			

Q8 If you think of your HASI clients *individually* how would you rate the effectiveness of the HASI program?

a) Name:

Unsuccessful				Moderately Successful				Very Successful	
1	2	3	4	5	6	7	8	9	10

b) Name:

Unsuccessful				Moderately Successful				Very Successful	
1	2	3	4	5	6	7	8	9	10

c) Name:

Unsuccessful				Moderately Successful				Very Successful	
1	2	3	4	5	6	7	8	9	10

Q9 Please add any additional comments you may have about HASI:

Appendix I: Interview Schedule for Head Office (DOH / Centre for Mental Health) and the advisory committee

Q1. In terms of the partnership arrangements do you feel that HASI is working effectively?

Q2. What are the major successes?

Q3. Do you have any concerns/ issues with the partnership arrangements?

Q4. Do you think the partnership arrangements can be improved? If so, how?

Q5. In terms of the actual clients do you think HASI is working effectively?

Q6. What do you think are the major successes?

Q7. What are your concerns?

Q8. How do you think the program can be improved?

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