



# **ROUGH SLEEPING QUESTIONNAIRE**

**Consultation period**  
**TBC**

Please answer the following questions ticking a yes, no or not sure response.

**Question 1** – Please see page 2 of Consultation Document.

**Do you agree the main priority should be “to improve and embed an effective and comprehensive prevention pathway to avoid or recover from rough sleeping”?**

YES ☐ NO ☐ NOT SURE ☐

**If you do not agree please tell us why and what you think the main priority should be.**

***To help us achieve our main priority we have developed an action plan with five key themes; universal prevention, targeted prevention, crisis prevention and relief, recovery and move-on.***

**Question 2** – Please see pages 2 to 3 of the Consultation Document

***Universal prevention – focus on raising the public’s awareness and understanding of rough sleeping and how to direct and secure help for someone, securing sustainable support and preventing the death of anyone rough sleeping.***

**Do you agree with our approach to universal prevention?**

YES ☐ NO ☐ NOT SURE ☐

**If you do not agree please tell us why.**

**Question 3** – Please see pages 2 to 3 of the Consultation Document

***Targeted prevention – focus on individuals at risk of rough sleeping having access to multi agency support, having a clear set of policy and investment in place, embedding access to advice, prevention and right for single homeless and childless couples over 25, ensuring clear access routes to temporary accommodation if required and engagement with non-commissioned exempt supported accommodation providers***

Do you agree with our approach to universal prevention?

YES ☐ NO ☐ NOT SURE ☐

If you do not agree please tell us why.

**Question 4** – Please see pages 2 to 3 of the Consultation Document

***Crisis prevention and relief – focus on partnership working to understand and remove barriers, tackle criminal activity and anti-social behaviour, effective interventions for the full range of issues amongst street population, maximise value of Rough Sleeper Initiative, clear pathways for rough sleepers with no recourse to public funds and to reconnect those with no connection to Birmingham, team of navigators, severe weather plan and ensuring room for all.***

Do you agree with our approach to crisis prevention and relief?

YES ☐ NO ☐ NOT SURE ☐

If you do not agree please tell us why.

**Question 5** - Please see pages 2 to 3 of the Consultation Document

***Recovery – focus on provision for those most vulnerable including accommodation and care needs, PIE informed and peer support available, specific provision and support for women across pathway and engagement with faith and community sectors in relation to activities around homelessness and rough sleeping.***

**Do you agree with our approach to recovery?**

YES ☐ NO ☐ NOT SURE ☐

**If you do not agree please tell us why.**

**Question 6 - Please see pages 2 to 3 of the Consultation Document**

***Move on – focus on enhancing access to BCC Housing Options for those on rough sleeping pathway, securing capital assets and associated revenue and accessing and using best exempt supported accommodation sector where appropriate***

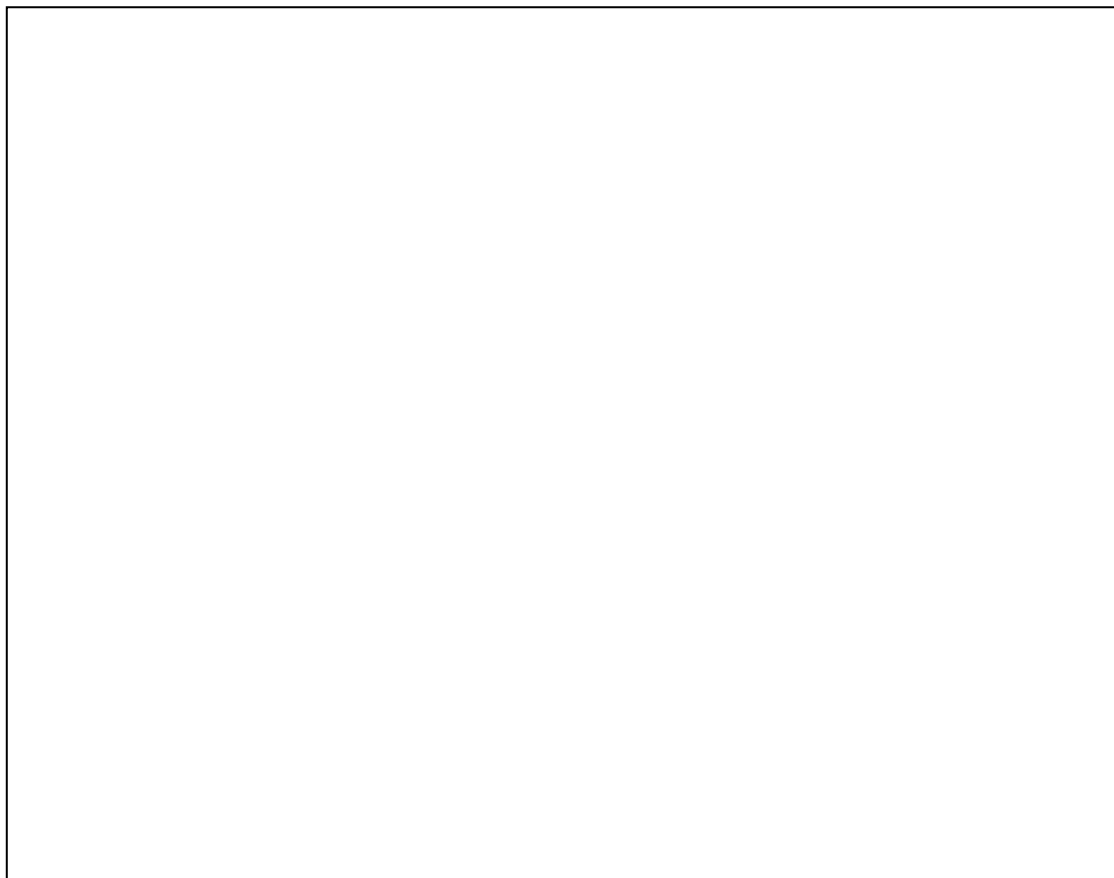
**Do you agree with our approach to move on?**

YES ☐ NO ☐ NOT SURE ☐

**If you do not agree please tell us why.**

**Question 8**

**Do you have any other comments?** *Please provide below.*

A large, empty rectangular box with a thin black border, intended for the user to provide additional comments. A large, light gray 'DRAFT' watermark is visible diagonally across the page, partially overlapping this box and the area below.

**About you**

We would like you to tell us something about you. You do not have to tell us but if you do it will help us to plan this service.

### Data Protection Act 1998

The personal information on this form will be kept safe and is protected by law. You can see more information about data protection on our website at:  
<http://www.birmingham.gov.uk/privacy>

### What best describes your interest in this consultation:

A member of the general public ☐

Someone who has accessed housing support services ☐

Health or Care Professional ☐

Provider of a housing support service ☐

A family member or carer of someone who gets help from housing support services ☐

Other please state \_\_\_\_\_

Your full postcode: \_\_\_\_\_

How old are you? *Please tick appropriate box.*

17 or under	18 to 19	20 to 24	25 to 29	30 to 34	35 to 39	40 to 44	45 to 49	50 to 54
55 to 59	60 to 64	65 to 69	70 to 74	75 to 79	80 to 84	85+		

### What sex are you?

Female ☐ Male ☐

Do you have any physical or mental health conditions or illnesses lasting or expected to last for 12 months or more? *Please tick one box only.*

Yes ☐ No ☐ Prefer Not to Say ☐

**If yes to the above question, do any of these conditions or illnesses affect you in any of the following areas? You may tick more than one box.**

<b>Condition/illness</b>	
<b>Vision</b> (e.g. blindness or partial sight)	
<b>Hearing</b> (e.g. deafness or partial hearing)	
<b>Mobility</b> (e.g. walking short distances or climbing stairs)	
<b>Dexterity</b> (e.g. lifting and carrying objects, using a keyboard)	
<b>Learning or understanding or concentrating</b>	
<b>Memory</b>	
<b>Mental health</b>	
<b>Stamina or breathing or fatigue</b>	
<b>Socially or behaviourally</b> (e.g. associated with Autism, attention deficit disorder or Asperger's Syndrome)	
<b>Other</b> – please write in	

**What is your ethnic group? Please tick one box only.**

<b>Ethnicity</b>	
<b>White:</b>	
English/Welsh/Scottish/Northern Irish/British	
Irish	
Gypsy or Irish Traveller	
Polish	
Baltic States	
Jewish	
Other White European (including mixed European)	
Any other White background (please write in)	
<b>Mixed/multiple ethnic groups:</b>	
White and Black Caribbean/African	
White and Asian	
Any other Mixed background (please write in)	
<b>Asian/Asian British:</b>	
Afghani	
Bangladeshi	
British Asian	
Chinese	
Filipino	
Indian Sikh	
Indian other	

Kashmiri	
Pakistani	
Sri Lankan	
<b>Ethnicity continued</b>	
Vietnamese	
Any other Asian background (please write in)	
<b>Black African/Caribbean/Black British:</b>	
African	
Black British	
Caribbean	
Somali	
Any other Black/African/Caribbean background (please write in)	
<b>Other ethnic group:</b>	
Arab	
Iranian	
Kurdish	
Yemeni	
Any other ethnic group (please write in)	

**What is your sexual orientation?** *Please tick one box only.*

<b>Sexual orientation</b>	
<b>Bisexual</b>	
<b>Gay or Lesbian</b>	
<b>Heterosexual or Straight</b>	
<b>Other</b>	
<b>Prefer not to say</b>	

**What is your religion or belief?** *Please tick one box only.*

<b>Religious belief</b>	
<b>No religion</b>	
<b>Christian</b> (including Church of England, Catholic, Protestant and all other Christian denominations).	
<b>Buddhist</b>	
<b>Hindu</b>	
<b>Jewish</b>	
<b>Muslim</b>	
<b>Sikh</b>	
<b>Other religion</b> (please write in)	



**Thank you for taking part in this  
questionnaire.**

DRAFT