

CPO TRAINING SEPTEMBER 2015

OVERVIEW

- What is a CPO?
- Research Basics
- 2015 CPO: Safety At HCH Projects
 - Focus and Goals
 - Survey Tool
 - Timeline and Processes
- Conducting this CPO
 - National HCH Council Responsibilities
 - Site Responsibilities
 - Keys to Success and Next Steps

CONSUMER PARTICIPATION OUTREACH SURVEY (CPO)

The CPO is a survey designed for consumers and conducted by the National Consumer Advisory Board (NCAB)

WHO IS NCAB?

- ◉ NCAB is a individual membership group of the National Health Care for the Homeless Council
- ◉ NCAB is group of people who have experienced homelessness and received services from a HCH program
- ◉ NCAB works to engage the voice of consumers at their local projects and in national advocacy

PURPOSE OF THE CPO

- Learn about the concerns and needs of Health Care for the Homeless (HCH) clients
- Gives consumers a platform to voice their thoughts and share their experiences.
- Help HCH clinics improve their services, practices and policies.
- Help NCAB develop its advocacy agenda, and advise the National HCH Council about the needs and opinions of consumers.

	Actions	Considerations
Pick a Topic	<ul style="list-style-type: none"> • Talk to consumers about issues important to them. • Pick a topic according to most pressing challenges 	<ul style="list-style-type: none"> • What potential impact would the results have in improving the health and lives of those experiencing homelessness?
Develop Questions and Survey Tool	<ul style="list-style-type: none"> • Review current literature on topic • NCAB brainstorms questions for survey; then works with NHCHC Research and Policy to review and refine questions. 	<ul style="list-style-type: none"> • What do we know? What do we want to know?
Collect Data	<ul style="list-style-type: none"> • NCAB + NHCHC staff trains interviewers • Local CAB members give survey to local consumers at their sites. 	<ul style="list-style-type: none"> • What resources do we have to collect data (human power, skills, supplies, space, time)?
Analyze Data	<ul style="list-style-type: none"> • Data inputted, results compiled and themes identified. 	<ul style="list-style-type: none"> • How do we show and discuss the data most effectively?
Share Research Findings	<ul style="list-style-type: none"> • Create written report including results, conclusions and recommendations • Develop other materials for distribution (posters, trainings) • Help construct new policies and follow-up 	<ul style="list-style-type: none"> • Who do we want to share findings with? How do we want to present these findings? • How do we ensure real change with our findings?

CPO TIMELINE

September - October	<ul style="list-style-type: none">• Train interviewers• Practice Sessions• Resources Distributed
October 12	<ul style="list-style-type: none">• Launch Survey
January 1	<ul style="list-style-type: none">• Return all Surveys to Katherine Cavanaugh
January - May	<ul style="list-style-type: none">• Data Entry and Results Analysis
June	<ul style="list-style-type: none">• Finish report
July	<ul style="list-style-type: none">• Results to sites that completed the survey• Presentation by CAB's to staff and board• discussion of next steps

RESEARCH BASICS

RESEARCH ETHICS

- Privacy: conduct interviews in places where others cannot hear survey questions and answers, or use soft voice if in busy area.
- Confidentiality: the information you collect from participants will be used only for this project. Only the interviewer and the data entry researcher will see survey forms.
- Anonymity: we are not asking for names or any information that identifies survey participants.

APPROACHING POTENTIAL PARTICIPANTS

- Introduce yourself, give a brief description of the survey and ask the individual if he/she would like to participate.
- Make sure to be non-threatening when approaching potential participants and respect their privacy.
- Determine if the individual is eligible to participate
- If an individual agrees to participate, read the Introduction and the Informed Consent to them.
- Once you have answered any questions, you can administer the survey. Please read it to the participant and answer any questions along the way.

DATA COLLECTION

- ◉ Surveys must be conducted in a one-on-one interview, ideally in a private space
 - This may be difficult depending on the nature of the survey site, but attempt to establish privacy as best as possible, keeping your own safety in mind as well.
- ◉ Interviewers will read the questions and then write the answers that participants give
 - Participants may read along if they wish but you must still read it aloud to them as well.
 - Participants cannot take the survey and return it at a later date or time.
- ◉ During the survey make sure the participant understands that they can skip questions at any time for any reason
- ◉ Also make sure the questions are understood clearly and answer any questions that come up.

REVIEW AND EVALUATION

- Once you have completed the survey, review to ensure that all sections of the survey have been completed
 - Excluding the sections the participant has chosen to skip
- Then provide the participant the copy of the information and consent form.
- If you want to write down any reflections on individual interviews or the process; use the note pad to express your experiences
 - Unique situations
 - Concerns about data collection process
 - Additional comments

TRAUMA-INFORMED INTERVIEWING

- ⦿ Maintain sense of privacy
 - One on one interviewing
 - Data is confidential - not to be shared
- ⦿ Ensure interview space feels safe
 - No locked doors
 - No blocked exits
 - Day time is best
 - If there is a clinical issue or material need that is brought up by the participant, ask your site staff to assist. **Do not make clinical decisions.**
- ⦿ Try to be on same level as participant (sitting, standing, etc.)

**2015 CPO
SAFETY AT HCH
PROJECTS**

FOCUS AND GOALS

- People experiencing homelessness often have difficulty accessing systems and services, including health care systems.
- NCAB has identified physical, emotional and psychological safety at HCH sites as an important consideration effecting accessibility, as well as quality of care.
- Results of this survey should improve practices, identify policy changes, and inform training around security and safety, both on the national level and at the local HCH projects.

INTRODUCTION [READ TO PARTICIPANT]:

The National Consumer Advisory Board and the National Health Care for the Homeless Council (the “researchers”) are conducting this research to better understand what makes consumers feel safe, and gauge if HCH projects are creating safe spaces. This survey asks questions about race, age, gender and then focuses on your opinions about what makes you feel safe or unsafe. The survey should take no more than 15 minutes to complete.

The investigators conduct this CPO only with individuals who have experienced homelessness because of their unique knowledge. Being “homeless” can mean living in a shelter or transitional housing, living on the streets, or other unstable or non-permanent situation such as a friend or family member’s house that you may have to leave at any time. The interviewers in this research study have experienced homeless themselves.

To learn more about the project or the results of this study, you can contact Katherine Cavanaugh or Joseph Benson, whose information is on the consent page.

CHECK ELIGIBILITY

- ▶ If an individual seems interested, check if they are eligible
 - Are you 18 years or older?
 - Are you currently or formerly homeless?
 - Example of homelessness including living in shelters, transitional housing, in treatment program, on the streets, doubled up, in unstable housing, or being recently released from care without housing plan (i.e. prison, hospital, foster care)
 - Have you received services at the Health Care for the Homeless site (**insert name of clinic**) in the last year?
- ◎ It is also important to consider if this individual is able to give informed consent
 - Are they clear enough to understand what they are agreeing to?

INFORMED CONSENT

(YOU MUST GET VERBAL AGREEMENT)

Your participation in this survey is completely voluntary and all of your answers will remain confidential. Your decision to participate or not participate in the survey will not affect your eligibility for services in any way. There is no cost to survey participants for taking this survey and there is no payment. Your participation in this survey may benefit individuals experiencing homelessness by providing information to support increase safety at HCH projects. The interviewer will read the survey questions out loud to you and mark your answers down on the survey itself. Please complete the survey to the best of your ability and knowledge, and know that you may skip any question you do not want to answer. You also may stop taking the survey at any time for any reason.

Do you agree to the above statement? (yes or no)

As we will be speaking with you about your feelings of safety, we also want to provide you with information about how community resources and basic coping skills.

[Give survey participant a copy of consent form and coping information]

DEMOGRAPHIC QUESTIONS

◉ Age: _____

◉ Ethnicity (select all that apply)

African American/Black

White

Asian/Pacific Islander

Hispanic/Latino

Native American

Other _____

◉ Gender Identity:

Male

Female

Transgender Male

Transgender Female

Other _____

All of the following questions are
in reference to feelings of safety
at

(insert name of clinic)

GENERAL FEELINGS OF SAFETY

1. What **TWO** factors are most important to your feelings of safety?

- a. Being treated with respect
- b. Knowing the individuals I am interacting with
- c. Being able to trust the individuals I am interacting with
- d. Physical presence of security (i.e. guards or physical barriers)
- e. Controlled physical space (i.e. organized, calm, well lit, clean)
- f. Other _____

2. What are **TWO** factors that make you feel most unsafe?

- a. Bad neighborhood (e.g., crime)
- b. Isolated area (i.e. dark, empty)
- c. Lack of trust
- d. Absence of security (i.e. no guards or cameras)
- e. Dangerous or disruptive individuals
- f. Other _____

Feelings of Safety	Strongly Agree	Agree	Neutral/ Unsure	Disagree	Strongly Disagree	Not Applicable
Staff at the site treats me with respect.						
Staff is capable of calming down a tense situation.						
If a situation can't be calmed down by staff, police should be called in.						
Security staff at the site makes me feel safe.						
Security barriers at the site makes me feel safe (i.e. glass partitions, metal detectors, buzzed entry)						
Security staff carrying a weapon makes me feel safe.						
Security staff in uniform makes me feel safe.						

Would you like to explain or expand on any of these topics?

WHERE DO YOU FEEL SAFE?

How often do you feel safe...	Always	Most of the Time	Some times	Rarely	Never
In the area surrounding the site (i.e. parking lot, sidewalks)					
In the Waiting Room					
With your provider(s)					

Would you like to explain or expand of any of these topics?

IMPACT ON CARE

Impact on Care In the past year (12 months), at (insert name of clinic), I have.....	0 Times	1-2 Times	3-5 times	6-9 Times	More than 10 Times
Left an appointment because I felt unsafe.					
Not come to my appointment because I knew I would feel unsafe.					
Come to the building but not entered because I felt unsafe.					
Been nervous or agitated because I felt unsafe.					
Would you like to explain or expand on any of these topics?					

3. Are there other ways that your feelings of safety have impacted your care?

EXPERIENCES WITH STAFF

4. What has staff at (**insert name of clinic**) done to treat you with respect? (check all that apply)

- a. They are welcoming, they acknowledge me
- b. They listen
- c. They are non-judgmental
- d. They are concerned about me as a person, not just health or housing status
- e. They speak with a pleasant tone
- f. Nothing
- g. Other _____

5. What has staff done that made you feel disrespected? (check all that apply)

- a. They are cold, unfriendly or ignored me
- b. They give misinformation or lack of information
- c. They are condescending
- d. They are aggressive
- e. They are dismissive of my opinions or needs
- f. Nothing
- g. Other _____

PREFERENCES WITH STAFF

6. What skills do you think security staff should have? (check all that apply)
- a. Communication skills: listening, appropriate tone
 - b. Cultural awareness/competency (*the ability to respectfully interact with people of different **cultures***)
 - c. Empathy (*the ability to understand or feel what another person is experiencing*)
 - d. How to be assertive without coming off aggressive
 - e. Calm a situation down respectfully
 - f. Other _____
7. Who would you prefer respond to a conflict or incident at your site? (all that apply)
- a. Clinical Staff
 - b. Security Staff
 - c. Trained peer/consumer
 - d. Other _____
8. Would you like to expand on any experiences or preferences with staff that affect your feelings of safety?
-

OVERALL FEELINGS OF SAFETY

9. Has your identification with any of the follow characteristics negatively affected your feelings of safety at **(insert name of clinic)** ? (check all that apply)

- a. Ethnic identity/race
- b. Gender identity
- c. Sexual orientation
- d. Physical disability status
- e. Mental health status
- f. Language
- g. Religion
- h. Cultural norms
- i. None
- j. Other _____

10. If there was a group focused on coping with unsafe situations or spaces, what would you want to learn? _____

11. Please name the top three things that could improve your feelings of safety at **(insert name of clinic)**? _____

12. Do you have other comments, concerns or suggestions regarding safety at **(insert name of site)**? _____

IMPLEMENTING THE CPO

NATIONAL HCH COUNCIL RESPONSIBILITIES

- ◉ Provide webinar training for consumers to act as the interviewers for this survey.
- ◉ Council staff will provide PDF copies of the following resources:
 - Survey tool (personalized with the name of your clinic)
 - Consent form and resource sheet to be given to participants
 - Information and tip sheet for interviewers including this training power point
- ◉ Katherine Cavanaugh, the Council's Consumer Advocate, will be available throughout for support or guidance
- ◉ Input and analyze data as a whole and for each site individually, and provide each site with their personalized results

SITE RESPONSIBILITIES

- Ensure interviewers have viewed webinar and practice surveying
- Develop a schedule for surveying times
- Complete a resource sheet of local resources for relevant issues the (i.e. counseling, victim's services agencies)
 - Make sure to include HCH site resources
- Provide and distribute resources to interviewers including:
 - Print copies of the survey, consent and information sheets, local resource sheets, webinar training powerpoint
 - Clipboards, pens and notepads
 - Folders and storage for completed surveys
 - Space for interviews if individuals request further privacy
- Ensure all interviewers fulfill their responsibilities
- Arrange for personalized results to be shared by the CAB with staff and governing board

- Complete 1 "Security Overview" survey for the site
- Complete 100 surveys

FULFILLING SITE RESPONSIBILITIES

- In order to complete the site responsibilities, each site should assign a staff member and a consumer project lead
- These positions will be responsible for:
 - Ensuring the completion of task list including gathering and distributing materials
 - Acting as a liaison to NCAB and the Council for support to answer questions

INTERVIEWER RESPONSIBILITIES

- ◉ View webinar before conducting surveys.
- ◉ Abide by research best practices and trauma-informed interviewing.
- ◉ Respect confidentiality and privacy of shared information at all times.
- ◉ Be sure you have the supplies you need before you conduct surveys.

SUPPLIES FOR INTERVIEWERS

- ◉ Webinar Training PPT
- ◉ Pens and Clipboards
- ◉ Surveys, Information/Informed Consent Sheet, Resource Sheet
- ◉ Labeled folders for blank and complete surveys
 - 1 set per interviewer
 - 1 set per coordination center
- ◉ Note pads to describe data collection experience

KEY TO SUCCESS: WORK WITH YOUR LOCAL HCH

- Communication
 - Make sure your local HCH is able to assist you in completing this project. Communicate with staff about your needs and concerns.
- Coordination center
 - Identify a safe place to keep supplies and completed surveys
- Supplies
 - Request assistance with supplies prior to data collection start date

KEYS TO SUCCESS: SUPPORT EACH OTHER

- ◉ Even though surveys should be completed one-on-one, it is best to go out in pairs so you can support one another
- ◉ Since eligibility is for those who have used HCH services, we recommend that interviewers begin at and around their sites before attempting to engage in the broader community

MOVING FORWARD

- Support from the National Health Care for the Homeless Council is available at any time. Please contact one of the project leads below with any comments, questions or concerns.
 - Katherine Cavanaugh, Consumer Advocate
 - kcavanaugh@nhchc.org
 - (443) 703 - 1320
 - Joseph Benson, NCAB Chair
 - JosephJr.Benson@bcm.edu
 - (832) 352 - 5438