**2022 REPORT** 

# Coordinated Access HUB Assessment





The project team thanks all the people who contributed to this assessment, especially the community members using the Coordinated Access HUB. It was an honour to listen to the stories and witness the emotions, tears, and laughter from the participants of this project. The stories have impacted the project team in lasting ways. We invite readers to feel how this data is attached to human beings. We invite you to read the words carefully and with intention. This assessment shares the stories of so many individuals who have been impacted by the Coordinated Access HUB, we hope it does them justice.

We also thank the many others who shared their perspectives and stories for this research including the service providers at the HUB and outside stakeholders, such as HUB neighbours. We thank Andree Patenaude (Nelson CARES, Reaching Home Program Manager), Rob Tanner (Selkirk College, Nursing Instructor), Nikole Johnson (Selkirk College, nursing student), and Michelle Nutter (Selkirk College, nursing student) for their support and expertise when developing the research instruments.

The project team would also like to acknowledge that one of the participants of this research lost their battle with mental health just before the writing portion of this project began. This individual contributed heavily to this project through their stories and dreams of what they hoped the Coordinated Access HUB would be. May they rest in peace.

This assessment is funded by Nelson CARES Society.

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On behalf of Selkirk College, I (we) acknowledge that we operate and serve learners on the unceded traditional territories of the Sinixt (Lakes), the Syilx (Okanagan), the Ktunaxa, and the Secwépemc (Shuswap) peoples.

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## **Executive Summary**

In response to the COVID-19 pandemic, the Nelson CARES Society and the Nelson Committee on Homelessness created the Coordinated Access HUB (HUB) to deliver essential services to the marginalized community of Nelson, BC. The HUB is a frontline service hub and drop-in center for individuals who are unhoused or at risk of being unhoused. Since its conception, the HUB has expanded to offer a variety of services including drop-in, food, general supplies and a free store, computers and internet access, street outreach, ministry navigation, health and hygiene, harm reduction, low barrier employment support, and housing referrals.

Nelson CARES requested an external assessment to determine the impact the Coordinated Access HUB is having on the unhoused community as well as the greater community of Nelson. Using four research instruments, researchers at Selkirk Innovates gathered information and feedback from various stakeholders of the Coordinated Access HUB. A total of 25 service user surveys, 24 service user interviews, 10 service provider interviews, and 33 outside stakeholder surveys were completed for this research.

#### **Service User Survey**

Twenty-five service users were surveyed at the Coordinated Access HUB over a two-week period in January 2022. The demographics of the respondents are indicative and representative of the service users at the HUB. The majority of respondents identified as non-Indigenous males between the ages of 25 and 54. Participants were asked 18 questions about their experiences with the Coordinated Access HUB.

Results showed that drop-in and food services were the most used services at the HUB, with over 90% of respondents stating they frequently access these services. Healthcare services (student nurses), healthcare and hygiene services, as well as general supplies, were also used by over 50% of survey respondents. It is important to note that 96% of respondents stated they come to the HUB at least once a week with many of those individuals stating they come to the HUB daily.

While 88% of survey respondents stated that the Coordinated Access HUB has had an overall positive impact on their life, 64% of respondents stated that they had experienced barriers to accessing the Coordinated Access HUB. These barriers include the limited HUB hours and physical space and time restrictions. Many of these barriers are directly related to capacity limits due to COVID-19 protocols. Overall, most survey respondents stated that they had an increased ability to access needed supports in times of crisis, had an increased sense of well-being and better mental health, increased sense of belonging in the community, and felt supported through the COVID-19 pandemic because of the Coordinated Access HUB. Participants also overwhelming stated they felt safe and free from discrimination at the HUB. Respondents stated that they felt thankful, warm, calm, safe and loved when accessing the space.

#### **Service User Interviews**

A total of 24 service user interviews were completed in the month of February 2022. All interview participants were asked 13 open-ended qualitative questions about their experiences at the HUB. Similar to the survey results, drop-in services, food services, general supplies, and health care were identified as the most helpful services. Many individuals stated they could not pick a 'most beneficial' service, as they viewed all the services as valuable. Interview participants stated they had overall more access to harm reduction services (E-OPS, OAT/safer supply, supplies), food, employment services,

health care services (student nurses), and hygiene services since the Coordinated Access HUB opened. Furthermore, all services were cited as being helpful to users' well-being. Drop-in services were one of the highest-ranked services used at the Coordinated Access HUB. Interview participants frequently stated the HUB provided them with a space to exist, build community connections, and stay warm or cool.

When individuals were asked what would be different in their life if the HUB did not exist, service users stated that the HUB was a necessary service in the community. There were seven explicit comments stating that without the HUB they would be dead. Participants also stated that the HUB has given them a sense of belonging in the community and has provided a safe space for them to exist.

The multi-service provision was cited as a positive component at the Coordinated Access HUB, with interview participants stating that they had greater access to services and were able to get more accomplished with the centralized service at the HUB. Commonly cited improvement suggestions for the HUB include having more food, having longer hours, expanding harm reduction services, providing shower and laundry services, and providing storage space.

#### **Service Provider Interviews**

Ten service provider interviews were conducted in late February with various staff working at and out of the Coordinated Access HUB. The aim of the service provider interviews was to determine what was going well at the Coordinated Access HUB as well as areas for improvement. Overall, the service provider interviews echoed the service user responses.

The most cited strength of the HUB was the low barrier access to services. Teamwork, peer self-efficacy and safety, and staff check-in were all common themes among service providers. Healthcare services, and the PEERS employment program received additional praise as well.

By far the greatest challenge cited by service providers was the community stigma the service users and the Coordinated Access HUB faced. Other challenges included the toxic drug supply, limited structural supports, the physical space of the HUB, COVID-19, and the BC housing crisis.

Similar to the service user comments, increasing food services was the most common suggestion for improvement made by service providers. Expansion of health care services, a larger space, and increasing neighbour engagement were other common improvements recommended. However, service providers cited budget and funding as the number one barrier to making those improvements.

#### **Outside Stakeholder Survey**

Outside stakeholders including neighbours, nearby business owners, elected officials, law enforcement and nelson residents, were invited to complete an online survey about their perceptions of the Coordinated Access HUB. A total of 33 surveys were completed and analyzed.

It is significant to note that 72% of completed surveys were business owners in the surrounding area or neighbours of the HUB. Just over half of the respondents stated they engage with HUB users at least once a week. Most outside stakeholder respondents stated they were aware of the services offered at the HUB and they would refer individuals to the HUB regardless of service. While there was mixed support for the HUB, most survey respondents (67%) indicated the HUB has an overall negative impact

on the Nelson community. One response cited, "I believe the impact on our marginalized community is probably helpful, but I also feel it has negatively impacted the businesses and employees in the area".

Respondents overwhelmingly stated the HUB's location was inappropriate, indicating they felt a diminished sense of safety on Vernon Street because of the HUB service users, including having a negative impact on nearby businesses.

Despite the general negative feedback about the HUB, outside stakeholder survey respondents were divided on whether or not the HUB is filling an important need in the community and whether they would like to see the HUB continue.

Overall, the Coordinated Access HUB has created a safe space for marginalized individuals to have low barrier access to the services they need to meet their basic needs. However, stigma and discrimination from the community are a major challenge and barrier at the HUB. It is recommended to increase community education for neighbouring residents and businesses about the necessity of incorporating a harm reduction model as a means of community health promotion.

## 1. Background

The Coordinated Access HUB (HUB) is a frontline service hub and drop-in center for people experiencing homelessness. It is a pilot project funded by Employment Social Development Canada Reaching Home program, and UBCM Strengthening Communities Services funding. The aim of this project is to jointly deliver frontline services, meet basic needs, and connect people to programming including harm reduction and health services, and provide one-door-access to employment supports and Coordinated Access for housing. This project aims to increase sector capacity through collaboration and interagency learning.

#### The services provided at the Coordinated Access HUB include:

- Harm reduction services
  - Episodic-Overdose Prevention Site (E-OPS)
  - Opioid agonist treatment (OAT)/Safer supply
- Harm reduction supplies
- Food services (snacks, referrals to other resources)
- Housing services (referrals and housing support navigation)
- Healthcare services (eye care, dental care, referrals to health care practitioners)
- Outreach student nurses (wound care, health assessment, foot care)
- Street outreach services
- Ministry navigation support
- Employment services (PEERS employment program, job search support, taxes)
- General supplies (sleeping bags, clothing)
- Hygiene services/supplies (haircuts, hygiene supplies)
- Drop-in (community, art, place to stay warm or cool)
- Computer/internet access

The Coordinated Access HUB requested an external assessment to examine the community impact and efficacy of the pilot program and prove the theory of change of low-barrier, centralized services within the Coordinated Access model.

## 2. Methods

This project focused on collecting both qualitative and quantitative data from the Coordinated Access HUB service users, Coordinated Access HUB service providers, and a variety of other outside stakeholders, such as HUB neighbors.

Data was collected through four research instruments: 1) service user survey, 2) service user interviews, 3) service provider interviews, and 4) outside stakeholder survey. A service user focus group was also part of the research design. A focus group was planned on site at the Coordinated Access HUB outside of drop-in hours. However, despite poster advertisements and reminders to service users, no participants attended at the designated time. Due to the challenge getting participants to attend a focus group, researchers instead conducted an additional ten service user interviews.

Research instruments were developed by a researcher at Selkirk Innovates in collaboration with HUB staff, Selkirk College nursing practicum students, and a Selkirk College nursing faculty member with

experience working with the target population. Data collection and analysis was done by Selkirk College research interns, with the support of a faculty researcher. In person data collection methods were done in compliance with all COVID-19 safety protocols in place at the time. All research methods were approved by the Research Ethics Board at Selkirk College.

Data analysis includes summary statistics of quantitative data and coding of qualitative data. Qualitative data was grouped into themes. Summaries of themed responses for the various questions are included, along with a selection of quotes from respondents. Word clouds are used as part of the analysis to visualize common words that came from some open-ended questions. The larger the word in the word cloud, the more frequently the word was included in the responses.

#### Service User Survey

The HUB service user surveys were conducted over a two-week period in January 2022. The survey was promoted though poster advertisements at the HUB, as well as verbal communication from HUB staff, service providers, and research team. All surveys took place on site at the HUB during drop-in hours, but in a private space away from other service users. A research intern read the questions to the service user and recorded the answers. The survey included 18 questions that touched on demographics, income, housing status, services accessed at the HUB, accessibility of HUB services, helpfulness of HUB services, and overall impact of the HUB. Service users were given \$10 when they completed the survey. In total 25 surveys were completed. See **Appendix A** for all survey questions.

#### Service User Interviews

The HUB service user interviews were conducted in January and February 2022. Participants were informed of the interviews though poster advertisements at the HUB, as well as verbal communication from HUB staff, service providers, and research team. All interviews took place on site at the HUB during drop-in hours, but in a private space away from other service users. A research intern read the questions to the service user and recorded the answers. The interview audio was also recorded for transcription purposes. Interviewees were asked 13 questions about their experience accessing services at the Coordinated Access HUB. The emphasis of the interview process was to highlight qualitative feedback and experiences of the service users in their own words. Some of the interviewees also completed the survey, as the qualitative interview built upon the mostly quantitative survey. Service users were given \$25 when they completed the interview. A total of 24 interviews were conducted. See **Appendix B** for a full list of interview questions.

#### Service Provider Interviews

Service provider interviews were conducted over a 1-week period in February 2022. These were conducted either on site at the Coordinated Access HUB or over Zoom video call. A research intern conducted the interviews. The interview audio was recorded for transcription purposes. The emphasis of the service provider interview was to hear the HUB strengths and areas for growth from the service provider perspective. A total of 10 service provider interviews were conducted. See **Appendix C** for a full list of interview questions.

#### Stakeholder Survey

The stakeholder survey was conducted online through Survey Monkey and was open for four weeks from late January 2022 to mid-February 2022. Participants were invited to complete the survey via an email invitation. Local business owners, neighbours of the HUB, nelson residents, law enforcement and city officials were invited to participate. However, the focus of survey was to hear most notably from neighbours of the HUB. The emphasis of this survey was to learn how stakeholders within the

community are aware of the HUB and how the HUB has impacted them. A total of 33 surveys were completed. See **Appendix D** for a list of survey questions.

## 3. Objectives

The overall research question for this HUB assessment is: "How is the Coordinated Access HUB making a difference in the lives of the marginalized population in Nelson, as well as the greater community?" The research objectives to reach this goal are:

- To determine what aspects of the Coordinated Access HUB are working well.
- To determine what aspects of the Coordinated Access HUB could be improved.
- To assess the impact of the Coordinated Access HUB for the target population.
- To assess what barriers may exist in using the Coordinated Access HUB.
- To assess the impact of the Coordinated Access HUB to the greater community.
- To share lessons learned for future iterations and to support future funding proposals.

#### 4. Results

## 4.1 Service User Demographics

Service user demographics were collected as part of the survey. While demographics were not collected during the interviews, the results from the survey were similar to the demographics of the service user interviews. Of the 25 survey responses, 76% were between the ages of 25-54 (Figure 1). The majority (80%) identified as male and (75%) as non-Indigenous (Figure 2, Figure 3). Seventy-two percent of respondents stated that Nelson was their home community and 12% called Castlegar home. The remaining respondents cited "other", which included smaller West Kootenay communities such as Balfour, Thrums, and various communities in the Slocan Valley (Figure 4).

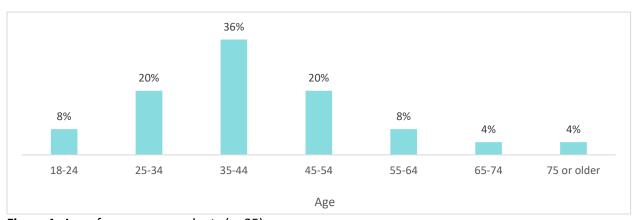


Figure 1: Age of survey respondents (n=25)

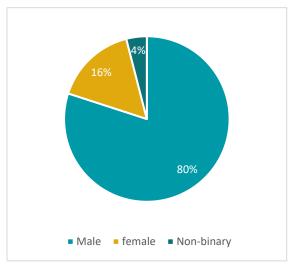


Figure 2: Gender of survey respondents (n=25)

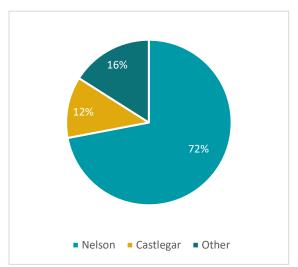


Figure 4: Survey responses to: "What is your home community?" (n=25)

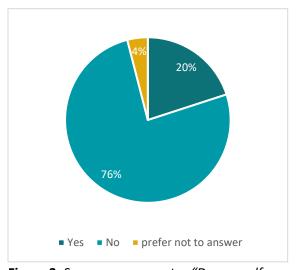


Figure 3: Survey responses to: "Do you selfidentify as Indigenous (n=25)

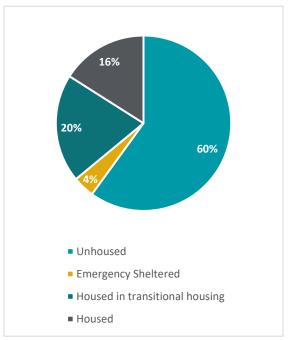


Figure 5: Current housing status of survey respondents (n=25)

The Coordinated Access HUB aims to provide services to individuals who are unhoused or at risk of being unhoused. Through the survey, 84% of respondents identified as not being adequately housed, including being unhoused, in emergency shelter, or in transitional housing (Figure 5). When asked about income, most respondents had multiple streams of income. Income assistance and informal work were most common sources of income (Figure 6).

An open-ended survey question asked, "What are your greatest needs right now?". Housing was the most common response followed by money. Other commonly cited needs include harm reduction services and dentistry services (Figure 7).

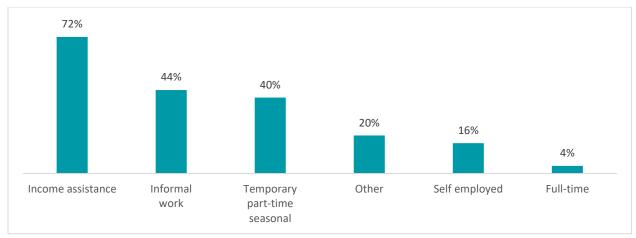


Figure 6 Source of income (n=25)



Figure 7: Survey responses to: "What is your greatest need right now?"

#### 4.2 Service Use

The Coordinated Access HUB provides multiple services to the marginalized community. These services include harm reduction services (supplies, OAT therapy and safer supply, and an injection E-OPS), food services, housing support services, health and wellness services (optometry, dental, acupuncture), student nurses (wound care, general health, foot care), employment services (PEERS employment program), ministry navigation at a provincial level, Nelson street outreach services, hygiene services (haircuts), general supplies (free store), drop in services, as well as computer and internet access. This assessment examines how the target population uses the services available at the HUB, how access to services has changed since the creation of the HUB, and how the HUB services has impacted their wellbeing.

#### **ALL SERVICES**

#### Survey Results

Food and drop-in services were the most common services accessed (used by 92% of respondents). This is followed by hygiene supplies and general supplies (68% and 64% of respondents, respectively).

Employment services were used the least (24% of respondents). Some respondents listed 'other' services they use. These 'other' services were identified as community connection and HUB engagement opportunities (i.e. surveys). See Figure 8 for a full breakdown.

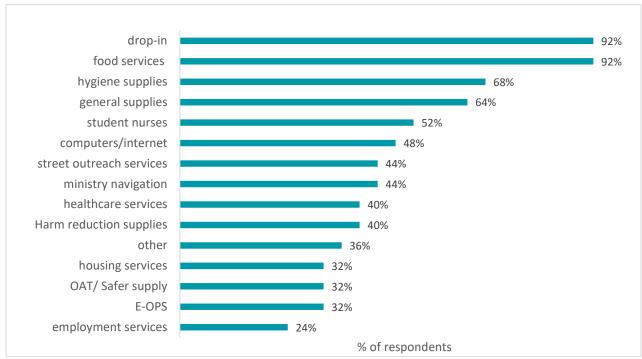


Figure 8: Survey responses to: "What services do you use when accessing the HUB?" (n=25)

The survey also asked, "How often are you accessing services at the HUB?" Almost all respondents (96%) indicated they access the HUB "all the time (more than once a week)". The majority of these respondents further specified that they used the HUB services daily.

#### Interview Results

The results from the service user interviews align closely with the survey results. The most used service mentioned was drop-in services (33 comments), followed by food services (19 comments), general supplies/free store (9 comments) and health/hygiene services (7 comments). Other services mentioned include PEERS employment program, harm reduction services, ministry navigation, internet/computer access and nelson outreach. See Figure 9 for a word cloud visualizing service use responses.

There were several comments that could not be categorized into a specific service. Four of those comments were related to multiple service use. Below are some comments provided by the service users when asked, "What services are you using at the HUB?":

- "I'm using them for whatever services they have."
- "I haven't used too much of their services yet, but I intend too."
- "There's so many services here, I don't know all of them, but I still think it's a good thing."
- "Pretty much everything."
- "I might ask some for the staff for help, just to know about different things or where to go for different things I may need help with."
- "Well, I don't use the OPS, but I'm all for safe supply and safe injection sites"

• "I don't I don't see a lot of the services that they have here as something that necessarily fits me, or in in many cases benefit me, but I'm glad that it's a benefit in the community given the fact. That there's people that do need them"

One individual spoke about how stressful it can be accessing services in other spaces - how it feels sterile and cold. The person expressed how the HUB is different, stating it "Makes it kind of like an office for hope that you can sit and not be stressed in."



Figure 9: HUB services used as themed through service user interviews

#### **DROP-IN**

Drop-in services are available at the HUB for four hours per day, seven days a week. The drop-in services provide service users a safe, warm (or cool) place to come and relax, connect with peers, and access services.

#### Survey Results

Drop-in is one of the most used services at the Coordinated Access HUB, with 92% of respondents indicating using this service (**Figure 8**). Eighty percent of respondents stated that the HUB has increased their ability to access drop-in services (**Figure 10**), and 44% of users state that HUB drop-in services are very helpful for their well-being (**Figure 11**).

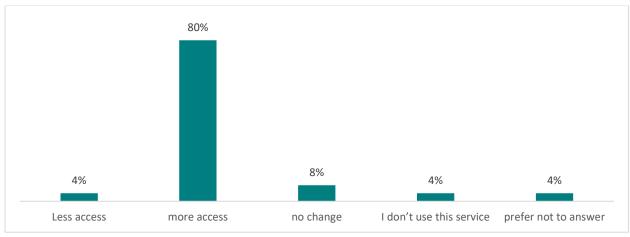


Figure 10: Change in access for drop-in (n=25)

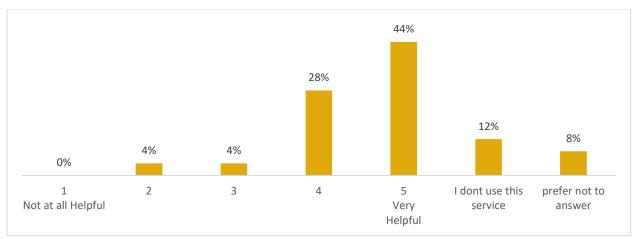


Figure 11: Helpfulness for improved well-being from drop-in (n=25)

Similar results were found in the interviews. When asked "How are you using the Coordinated Access HUB?", drop-in services were mentioned the most frequently (Figure 9). Within drop-in services, most comments could be categorized into three main themes: a sense of community, connection and belonging; a place to stay warm or cool; and a place to do art. Below are some of the comments specific to each theme:

Sense of Community, Connection and Belonging

- "As well as a place to connect with people and even [have] a sympathetic ear at times"
- "Someone to talk to you. Could be a staff member or a friend or a community member or something."
- "You get isolated out here living on the street, so [it's] nice to see everybody."
- "Meet friends. Make sure everybody is OK."

#### Place to Warm up/Cool down

- "Sometimes just a place to get warm and close my eyes"
- "I originally came here was a nice to use it as a cooling down service in the summer when we had that heat wave."
- "A warm spot actually. You don't get that too often around here."

#### Place for Art

- "The more people that get into doing art I think art is like one of the most therapeutic things in the world"
- "Gives me a space to paint"

When interview participants were asked a similar question, "What services are the most beneficial?", drop-in was the second most mentioned service after the food services. All comments stated that the HUB provided a space where users felt like they could exist without barriers. Some specific comments include:

- "The most helpful is just having a place to go"
- "Having somewhere warm I can come to everyday"
- "Just a place to go I have nothing so this place is great for sure"

• "When we've got everything being taken away to have something like this come out of like rise out of the ashes is like it's life saving for a lot of people there's a lot of people that would be screwed without having the hub here every day"

#### **FOOD SERVICES**

The Coordinated Access HUB provides coffee and light snacks for all guests who enter.

#### Survey Results

Most survey respondents (92%) stated they accessed food services at the HUB (**Figure 8**). And 72% of respondents cited that the HUB has increased their ability to access food (**Figure 12**).

When asked how helpful the food services at the HUB are for respondent's well-being, 60% stated it is helpful or very helpful and 8% stated the food services were not helpful at all (Figure 13).

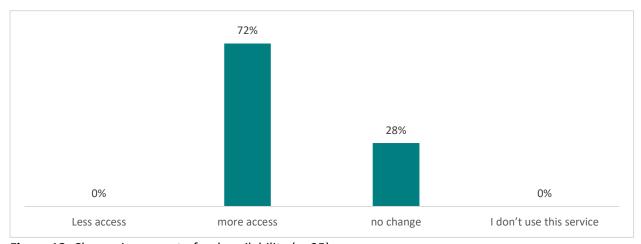


Figure 12: Change in access to food availability (n=25)

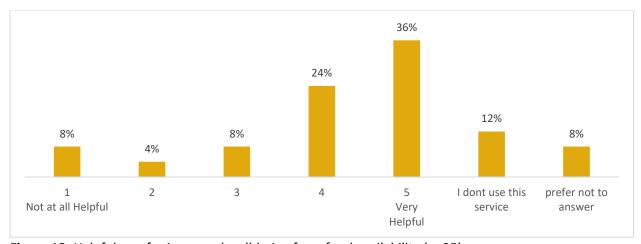


Figure 13: Helpfulness for improved well-being from food availability (n=25)

#### **Interview Results**

In the service user interviews, 100% of participants mentioned the food services in some capacity. Food was frequently mentioned as the one of the most beneficial services at HUB. Interviewees mentioned

the food service was necessary for their survival and was helpful to supplement their diets while on limited income. Some specific comments are:

- "I come here for food and stuff because there's nowhere else to go."
- "The food program is awesome."
- "The food is very useful."
- "I appreciate the food, man, like people complain but man, I stole candy every day for like 3 years straight just to eat."
- "The food. I don't have a lot of money for food, I'm only on old age pensions."

#### **HEALTH AND HYGIENE**

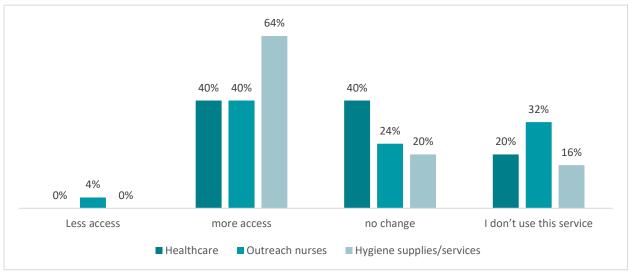
The Coordinated Access HUB offers an array of health and hygiene services including wound care, foot care and general health assessments through Selkirk College outreach student nurse practice placements and Interior Health's public health nursing. The HUB also offers acupuncture, haircuts, as well as dental and optometry days.

#### Survey Results

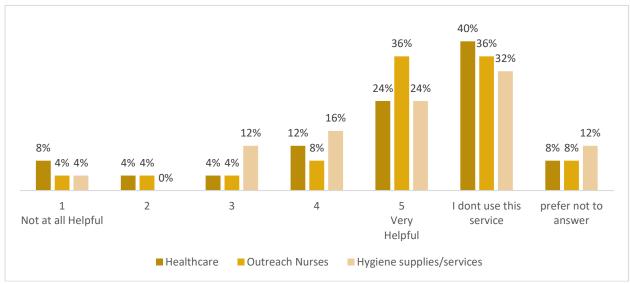
The majority of service user survey respondents (52%) indicated they use the health services provided by the student outreach nurses, 40% stated they use the health care services (eye care, dental care, sexual health, referrals to health care practitioner), and 68% indicated they access hygiene supplies (Figure 8).

When asked about changes in access since the Coordinated Access HUB opened, 40% of respondents had more access to healthcare services and student nurses and 64% had more access to hygiene supplies and services (**Figure 14**).

Respondents also indicated how these various health and hygiene services impacted their well-being. While these services were not used by some respondents, of those who do use the services, most indicated the services are helpful to their well-being. See **Figure 15** for the detailed breakdown.



**Figure 14:** Change in access to healthcare services, outreach student nurses, and hygiene supplies and services (n=25)



**Figure 15:** Helpfulness for improved well-being from healthcare services, outreach student nurses, and hygiene supplies and services (n=25)

Of the 24 interviews, eight people (33%) indicated health or wellness services and hygiene supplies as being one of the most beneficial services at the HUB. They specifically mentioned Nada circles, acupuncture, dental and optometry days, as well as student nurses, as some of the most beneficial services offered. Interviewees also noted that health and hygiene services have a positive impact on their daily life stating:

- "My feet are doing much better now"
- "They actually give me the time that I need and address [the issue]. It's not like they're watching the clock every five minutes"

#### **GENERAL SUPPLIES**

A variety of general supplies are available at the HUB through a free store. These items include clothing for men, women, and children; seasonal specific apparel; and camping materials (i.e., tents, tarps). The free store relies on donations from the public and supplies may vary given the season.

#### Survey Results

The general supplies were accessed by 64% of service user survey respondents (**Figure 8**) Sixty-eight percent of service users stated that they have increased access to supplies because of the HUB and 44% percent of respondents stated this service is very helpful for their well-being (**Figure 16**, **Figure 17**).

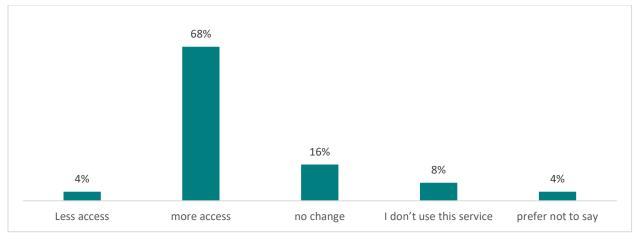


Figure 16: Change in access to general supplies (n=25)

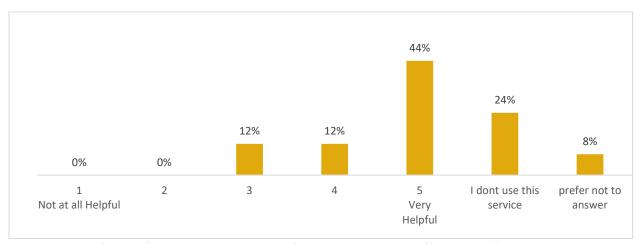


Figure 17: Helpfulness for improved well-being from general supplies (free store) (n=25)

The general supplies or "free store" were frequently cited in the interviews with service users (**Figure 9**). In the interviews, 21% of interviewees (5 individuals) stated that the free store was one of the most beneficial services offered at the HUB. They stated that being able to grab a fresh set of clothes or new camping gear is valuable to their daily life.

#### **COMPUTERS/INTERNET**

Computers and internet are available at the HUB to service users. Wi-Fi is free and there is one computer for guests to use at their convenience, as well as a printer/fax machine.

#### Survey Results

In the survey, 48% of services users stated they use the computers/internet at the Coordinated Access HUB (**Figure 8**). Additionally, 52% of users believe they have more access to computers/ internet since the opening of the Coordinated Access HUB. Twenty-four percent of service users find these services very helpful for improved well-being (**Figure 18**, **Figure 19**).

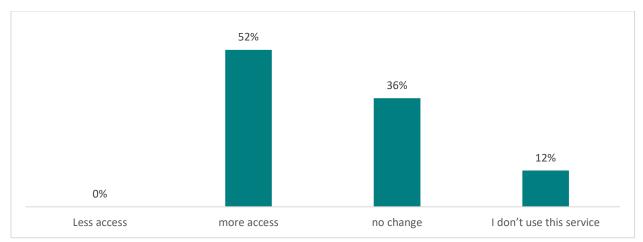


Figure 18: Change in access to computer and internet (n=25)

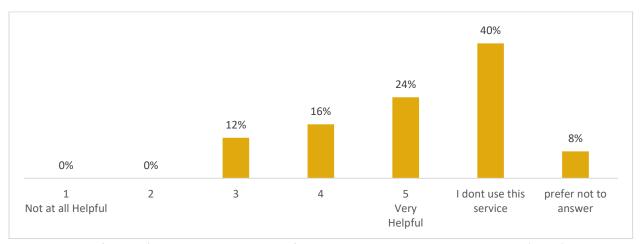


Figure 19: Helpfulness for improved well-being from access to computers and internet (n=25)

Two individuals specifically mentioned computers and internet were helpful to their well-being during the interview process. There comments are:

- "I've used the computer and printed things"
- "It's helpful for electricity to charge up my laptop and such"

#### STREET OUTREACH

The Coordinated Access HUB is a location for street outreach services. These service providers offer support to individuals living unhoused in the Nelson community by connecting them with the services they may need. They operate both within the HUB and out in the community.

#### Survey Results

Street outreach services are used by 44% of survey respondents (**Figure 8**). Thirty-two percent of respondents reported they have more access to street outreach since the opening of the HUB, while 28% observed no change in accessibility. Thirty-six percent of survey respondents (9 individuals) stated that they find the street outreach services very helpful. See **Figure 20** and **Figure 21** for a complete breakdown of responses.

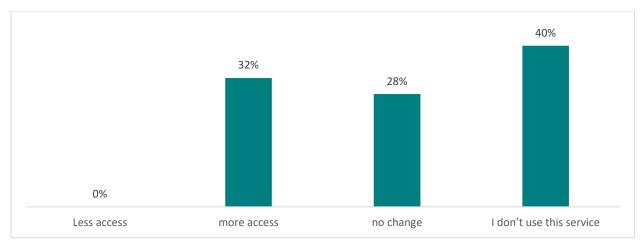


Figure 20: Change in access to street outreach services (n=25)

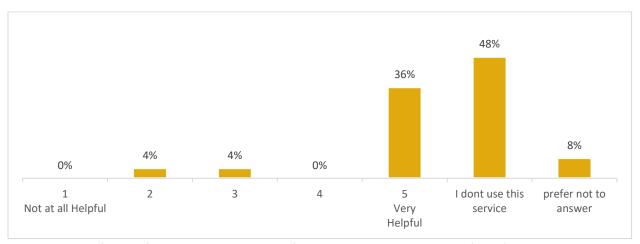


Figure 21: Helpfulness for improved well-being from street outreach services (n=25)

#### **MINISTRY NAVIGATION**

The Coordinated Access HUB provides ministry support navigation. This service helps service users navigate government ministry services such as applications for disability and old age, as well as obtaining new identification cards.

It is important to note that during the time frame when interviews and surveys were being conducted the ministry navigator on staff retired and service users were unable to access those services. That was a commonly voiced frustration from the service users.

#### Survey Results

Ministry navigation was used by 44% of survey respondents (**Figure 8**). Of respondents, 40% stated they had more access to ministry support at the HUB (**Figure 22**). Twenty percent stated that this service is very helpful to their well-being (**Figure 23**).

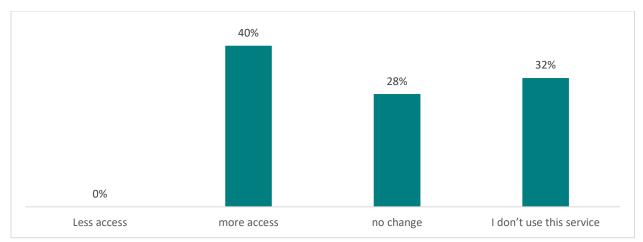


Figure 22: Change in access to ministry navigation support (n=25)

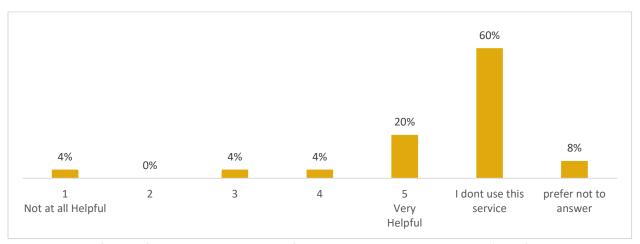


Figure 23: Helpfulness for improved well-being from ministry navigation support (n=25)

Ministry support was only mentioned twice during interviews. One individual noted that they received the referrals and help "exponentially faster" than they would have if they were accessing the ministry on their own outside of the HUB.

#### HARM REDUCTIONS SERVICES AND SUPPLIES

Harm reduction refers to programs, services and practices that aim to reduce the risks associated with substance use. The Coordinated Access HUB provides multiple avenues of harm reduction for the target population. These services include harm reductions supplies (clean needles, naloxone, sharps containers), harm reduction services via an injection only episodic overdoes prevention site (E-OPS), and harm reduction services including referrals to opioid agonist therapy (OAT) and safer supply.

#### Survey Results

Of the survey respondents 40% stated they used harm reduction supplies, 32% accessed the harm reduction services OAT and safer supply and the E-OPS (**Figure 8**). Most respondents who use the harm reductions services and supplies stated that the HUB has provided them more access to these services (**Figure 24**). For those who use the services, respondents also noted that the increase in accessibility to is overwhelmingly helpful to their well-being (**Figure 25**). Some respondents indicated that while they did

not use the harm reductions services (specifically the E-OPS), they still found this service to be helpful to their well-being, as their friends and loved ones access those services and that made them feel better.

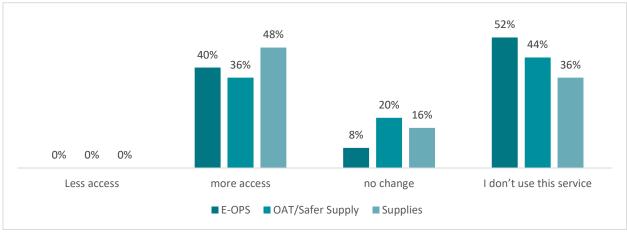
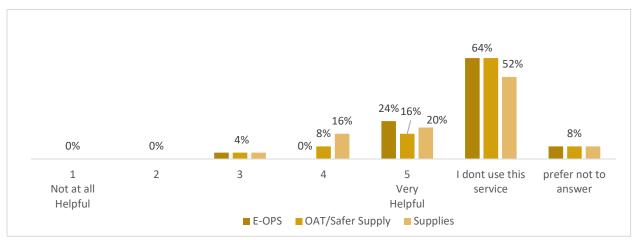


Figure 24: Change in access to harm reduction services (E-OPS and OAT) and supplies (n=25)



**Figure 25:** Helpfulness for improved well-being from harm reduction services (E-OPS and OAT) and supplies (n=25)

#### **Interview Results**

The harm reduction services and supplies were mentioned four times when participants were asked "what services are the most helpful". Participants stated that the E-OPS location and availability, as well as the supply services, were particularly helpful. One respondent indicated, "It's closer than ANKORS. walking over to the ANKORS is sometimes a pain coming from Stepping Stones or something like that. [It's] kind of nice halfway point."

The current toxic drug supply and opioid epidemic is an important consideration when examining harm reduction services. While the service users rarely spoke about the toxic drug supply and overdose crisis when discussing harm reduction services, the service providers frequently cited the impact and challenges of the toxic drug supply. See **Figure 45** in service provider section below for more information.

#### **HOUSING SERVICES**

Housing services provided at the HUB include help with housing referrals and applications.

#### Survey Results

Thirty-two percent of survey respondents stated they have accessed housing services at the HUB (Figure 8). Twenty-eight percent of survey respondents stated more access to housing services since the opening of the HUB, while 40% stated they have observed no change in access (Figure 26). While 60% of respondents indicated not use housing services, the degree of helpfulness for those using the services varied. Eight percent found the service very helpful, while 12% did not find it helpful at all (Figure 27).

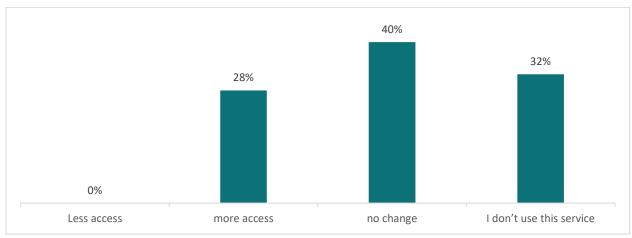


Figure 26: Change in access to housing services (n=25)

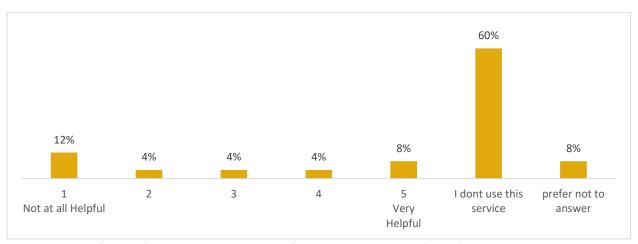


Figure 27: Helpfulness for improved well-being from housing services (n=25)

#### **Interview Results**

No comments related to housing services were received when asking participants about current services used.

#### **EMPLOYMENT SERVICES**

The PEERS employment program is provided by Kootenay Career Development Society at the HUB. It is a low-barrier employment program pilot project for individuals who access the Coordinated Access HUB.

#### Survey Results

Of the 25 surveys conducted, 24% of respondents stated they use the PEERS program (**Figure 8**). When asked about change in access to employment services because of the HUB, 28% of respondents stated more access (**Figure 28**). Of those who use the service, 16% of respondents state the employment services are helpful or very helpful to their well-being (**Figure 29**).

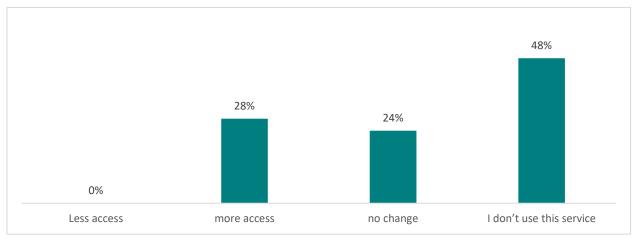


Figure 28: Change in access to employment services (n=25)

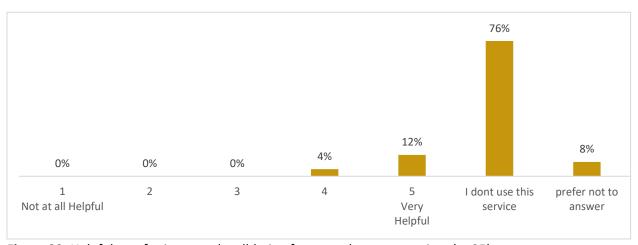


Figure 29: Helpfulness for improved well-being from employment services (n=25)

#### Interview Results

Two individuals explicitly stated that the PEERS employment program was one of the most beneficial services offered at the Coordinated Access HUB, stating that that the program has been exceedingly helpful anytime they have needed supplies or other items needed for jobs. One individual spoke to how the PEERS program has had a massive positive impact on his daily life stating, "They [PEERS Program] really helped me with bus fare, clothes, I got a packsack, and I got a computer I can use. I mean I am even back in school now so there's a lot of benefits." Another interviewee mentioned how the PEERS program has given him direction in his life and he is now pursuing further education because of the program.

#### OTHER SERVICES

#### **HUB** engagement opportunities

In the service user interviews there were four distinct comments from service users stating other services provided by the HUB. This includes being able to engage with and give back to the HUB community. Individuals cited engagement surveys (i.e., this assessment), small tasks like watering the plants, and other odd jobs at the HUB were something they found value in.

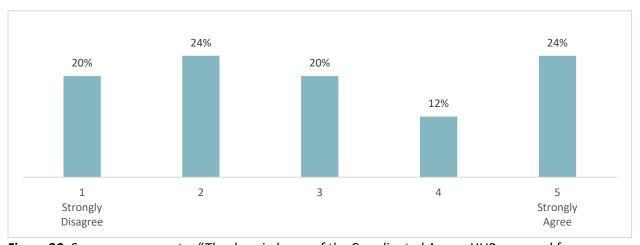
#### BARRIERS TO SERVICES

This section of the assessment explores barriers to services from a service user perspective.

#### Survey Results

Survey respondents were asked, "Have you experienced any barriers to services at the HUB that you need right now?". The majority of respondents (64%) indicated they did experience barriers to services at the Coordinated Access HUB. The most common barriers noted were in relation to the COVID-19 protocols in place. These protocols limited the number of service users in the space at one time. This contributed to difficulty acquiring services at the HUB because of longer wait times to get into the space. This was further compounded by the relatively short operational hours of the Coordinated Access HUB. In addition to the occupancy limits and COVID-19 restrictions, respondents also noted barriers because of stigma, lack of transportation, not enough food.

Many individuals noted that waiting to get into the space was a challenge for them. Respondents rated their level of agreement on the statement, "The drop-in hours of the Coordinated Access HUB are good for my needs". The responses were quite spread, with 36% agreeing or strongly agreeing the statement and 44% disagreeing or strongly disagreeing (**Figure 30**). Many individuals who stated that the HUB hours worked well for their needs further indicated that they would take "any hours they could get".



**Figure 30**: Survey responses to: "The drop-in hours of the Coordinated Access HUB are good for my needs"

#### Interview Results

In the interviews, time and space restrictions were the most cited barrier to accessing the Coordinated Access HUB (26 comments), with an additional five comments specifically related to the operational hours of the HUB. Another common barrier theme is interpersonal issues. Some specific comments from service users about barriers they have encountered accessing services at the HUB include:

#### Time and Space Restrictions

- "It's hard to stand outside when the place first opens up and it fills up. Everybody has an hour and a half, and if everybody takes up that hour and a half, you're stuck outside."
- "Just the time and only being allowed in for an hour and half. You know sometimes I'm doing something like this [a survey or meeting] where my time is being burned, and maybe I might not get to use the OPS at some point, right?"
- They're so limited on people [guests inside]. To stay here, it's as if there's just more limitations than there is help
- "You can't get everything done because you're on a limited time frame"
- "The limit to the number of people in the space is an enormous barrier. Like, why even have staff here? Take all the staff out and let three more people in."
- "Sometimes I feel like guilty for staying for too long. I feel like the staff don't mean too but I feel
  like they're trying [to rush me out], they maybe know someone else that needs a spot, and they
  want me out cause I'm taking it"

#### Hours

- "Uhm, just the amount of time because you only got 4 hours. Just the amount of people that can't or can't make it in due to the pandemic due to other things. Makes it frustrating."
- "The hours. One to five isn't long enough, and the space in here isn't big enough for as many homeless people as there is."
- "Ah, just hours. Like the shelter kicks people out at 7:30 am and then you know if anybody wants to get something else to eat off like or warm up you wait till one. You know there's a big gap."
- "The fact that it's open one to five is also just ridiculously stupid. Like I would volunteer my time. I would come here every night. 8 hours. Through the middle of the night when it's the coldest so that people could have somewhere to come sit down that's warm"

#### *Interpersonal issues*

- "They do have people that are coming in that are heavily intoxicated. I find that a little disturbing because I don't really feel too terribly safe knowing that someone's all wired up on meth. I find it very disturbing to be around people in that state because they're so unpredictable. They don't bring safety into the environment, even though the environment is safe"
- "Well, you could if you run into certain groups of people. But I think people here are pretty, you know, they just if they don't like somebody that is kind of try to avoid them. But I mean you have one literally one little doorway to filter through. Do you know what I mean? So sometimes you're going to, and you're going to see some head butting."
- "Having to put up with people that you don't really care for. Yeah, that's a little hard to tolerate sometimes."

It is important to note that there were six service users interviewed (25% of interviewees) who indicated they do not perceive any barriers in accessing the Coordinated Access HUB. One respondent stated, "I haven't had any problems at all. Yeah, I just come to the door knock, and it opens".

#### **MULTIPLE SERVICE PROVISION**

#### Service User Perspective

One of the pillars of the Coordinated Access HUB is its interagency operation. Multiple services exist under one roof with the aim to create fewer barriers for service users to access the care and services they need. There are some services that exist every day such as food, drop in, street outreach, and art

programming, while other services such as student nurses, acupuncture, and haircuts are available only certain days of the week.

Interview participants were asked if they experienced any benefits or challenges to having multiple services available in one location at the HUB. Of the comments received, 93% expressed benefits or neutral. Only three comments were made expressing challenges.

#### Examples of benefit comments are:

- "It is way less jumping through hoops, it's like "Oh, OK, well I need to go talk to this agency now". "OK, well they're in the next room. There they'll be right with you." I think it's perfect. it's actually, historic, there's not been really something like this before."
- "I don't have to plan my day as drastic anymore. Like, I can get everything done. Having multiple services here helps me access more [services]"
- "A lot of people have mobility issues so having it all in one place is good and helpful"

Of the three comments expressing challenges, two of the comments spoke to the fact that the service users simply don't have enough time to use all the services they want to before their allotted time is up. Another participant stated that having the E-OPS in the same building has been a challenge to accessing services stating, "If you go to the OPS and then you get too high [that can be a challenge]".

#### Service Provider Perspective

Service providers were also asked to describe experienced benefits or challenges of having multiple services available at the HUB. Most of the responses expressed benefits. Common benefits cited include increased communication and collaboration with other services providers and the ability to treat the whole picture/person. Service providers also stated it helped them understand other provider's roles and scope better. See **Figure 31** for a word cloud depicting common themes among service providers.

There was only one service provider who stated a negative impact of the multiple service provision at the HUB stating, "I think that it creates almost like a melding of all the agencies, whereas sometimes I don't have as much autonomy."



**Figure 31:** Themed benefits experienced by service providers for multiple services provided in one location at the HUB.

### 4.3 Impact of the HUB on Service Users

The HUB impacted service users in many ways. This section examines this impact.

#### Survey Results

In the service user survey, respondents were asked, "What impact has had the HUB had on your life?". Most respondents (88%) indicated the HUB has an overall positive impact on their life (Figure 32).

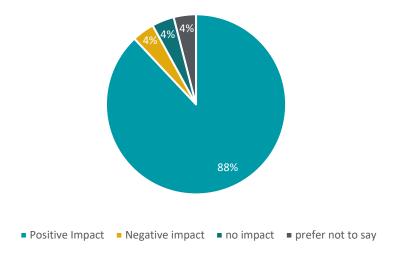
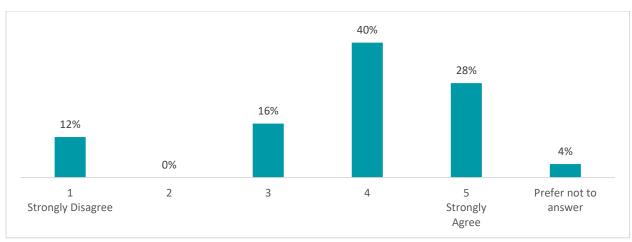


Figure 32: Overall impact of HUB on service users (n=25)

Survey respondents were asked a series of questions regarding how they feel the HUB has impacted their lives. Respondents answered with their level of agreement with the various statements. See **Figure 33** through **Figure 40** for their responses.



**Figure 33:** Survey responses to: "When facing an immediate threat or crisis, I know where to find support to request assistance and meet my needs" (n=25)

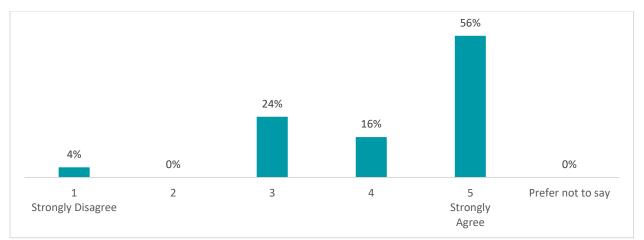
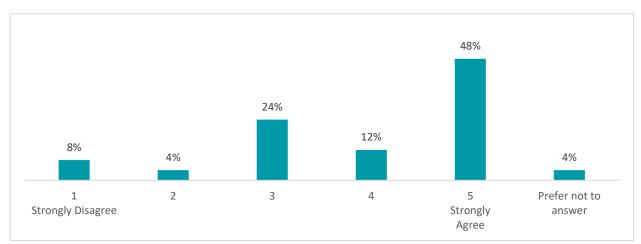


Figure 34: Survey responses to: "I have increased access to outreach services and crisis supports" (n=25)



**Figure 35:** Survey responses to: "I have increased sense of health and well-being, including improved positive mental health strategies in my daily life" (n=25)

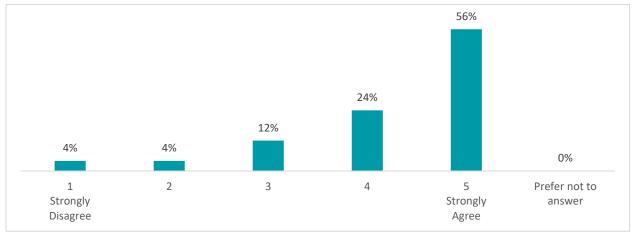


Figure 36: Survey responses to: "I feel safe when accessing services at the HUB" (n=25)

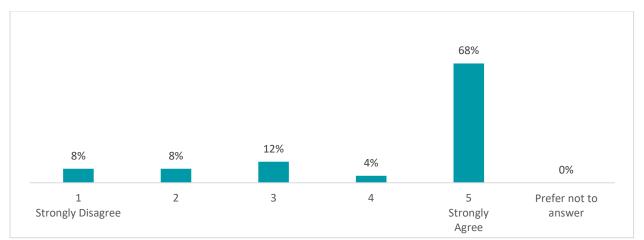
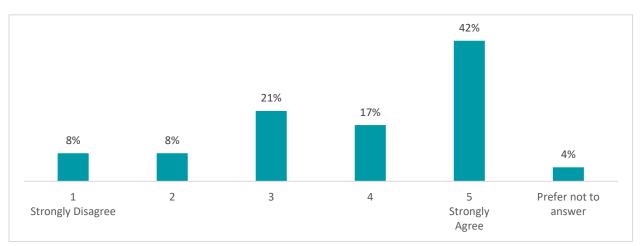


Figure 37: Survey responses to: "I can access services without feeling discriminated" (n=25)



**Figure 38:** Survey responses to: "I have an increased sense of safety and belonging in the community" (n=25)

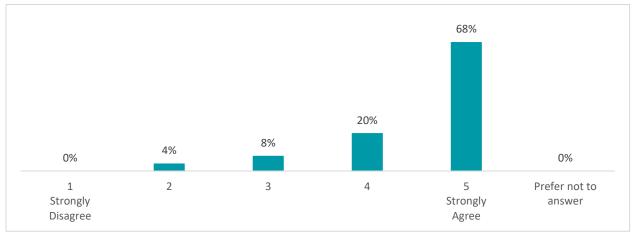


Figure 39: Survey responses to: "The HUB is in a good location for my needs" (n=25)

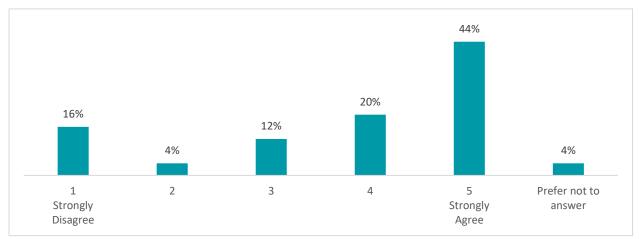


Figure 40: Survey responses to: "The HUB has helped me through the COVID-19 pandemic" (n=25)

In the interviews, service users were asked, "How does using the Coordinated Access HUB make you feel?". Of the 34 comments received, 21 comments (62%) were positive, 11 comments (32%) were negative and 1 was neutral. The positive comments can be grouped into multiple themes. Figure 41 shows common words that service users used to describe the feelings they have using the Coordinated Access HUB. The most common feeling expressed was 'thankful'. One interviewee stated, "They make me feel special. They make me feel important, you know they make me feel like I matter."



Figure 41: "How do you feel when accessing the HUB?"

Of the negative feeling comments, three main themes emerged: community judgement, intrapersonal conflict, and guilt. Participants cited judgement from Nelson residents and community members as being the most negative feeling, accounting for 33% of the negative comments. Below are some of the specific comments given by interviewees:

• "I feel maybe it has a kind of a negative connotation, that's just [where] all the drug addicts go you know."

- "Sometimes it feels kind of like I'm a skid. I think a lot of people mistake the fact that homeless
  people are just a bunch of \*\*\*\*\*\*\* drug addicts and alcoholics and yeah, yeah we are, but
  there's much more. We used to have lives we used to be a part of society."
- "People just kind of look down on street kids like they're scum."
- "Seeing certain individuals... I'm trying not to do drugs, so running into people here who sell drugs and do drugs [is hard]. I'm probably going to start, either coming less or just coming and grabbing food and leaving right away... I might not be hanging out here so much."

#### **HOW THE HUB IS MAKING A DIFFERENCE**

Interview participants were asked, "What would be different in your life now if the Coordinated Access HUB did not exist?". From the comments, five clear themes emerged: 1) necessity of the space, 2) difference between life and death, 3) insight/life direction, 4) health, and 5) community.

#### Necessity of the Space

Many individuals stated that the Coordinated Access HUB has become a staple in their life and they have come to rely on it. Below are some comments from service users.

- "I still absolutely know no matter what I can come here... If I was bleeding and needed help, I would be a priority... No matter how they feel about me or my beliefs, or how I behave, or what I'm doing, or why I'm bleeding. Their priority is the well-being of an individual."
- "I've come to rely on it. It needs to be here like the that's the case for a lot of people too. Like everybody that comes here is like this is an establishment. This is now a thing that exists and can't go away."

#### Difference between Life and Death

There were 7 participants who explicitly stated that they would not or may not be alive if the Coordinated Access HUB did not exist. Some of these individuals cited freezing to death while others spoke in more general terms. Some specific comments are:

- "I'd probably be dead."
- "Actually, I might not even exist. Who knows, I don't even know. Some days I'm just barely existing."
- "It's helped keep me alive"

#### Insight/Life Direction

Some interview participants expressed how the Coordinated Access HUB has allowed them to explore new passions such as art and further education. It has also given them a space to figure out their next steps forward. Some specific comments include:

- "It's given me more of a purpose."
- "Having the routine and having a place to come and go...knowing that one o'clock there's a place open gives me kind of a way to plan my day and that the structure... and having this structure really helps. Before, the HUH was here, my day was kind of all over the place and I would miss appointments."
- "It's allowed me to like, you know, give me like a landing spot and figure out you know what I'm going to do."

#### Health

• "I would probably be in a rut, yeah like not in a good space. For example [I would be] like self-medicating."

#### **Community**

- "It does live up to his name as being a HUB, a hub of the community anyways."
- "Even just to link with some people that you're trying to keep track of... I think it is a really good service that way for the connection of community...cause even if they don't have a phone... you can always go down to the HUB."

Below are some common words used by service users to describe their lives if the Coordinated Access HUB *did not* exist (**Figure 42**).



Figure 42: "What would be different in your life if the HUB did not exist"

#### 4.4 Service Providers

#### **EXPERIENCE WITH SERVICE PROVIDERS**

As part of the interview process, service users were asked to "describe your experience connecting with the service providers at the HUB." In conjunction with other questions, there were 68 individual comments related to interactions with service providers at the HUB. Of those comments, 49% were positive, 22% negative, and 29% neutral. Some common themes that emerged were that service providers were accommodating, helpful, busy, lacked experience in working with the homeless population, exhibited favouritism, and lacked respect. **Figure 43** visualizes these common themes, with the larger words indicating more comments in that theme.



**Figure 43:** Service user themed responses to: "Describe your experience connecting with the service providers at the HUB"

Positive comments regarding experiences with service providers include:

- "The staff here are really awesome. I mean everyone here is. You can tell that the people that are here or not here for a paycheck and money, it's not their motivation for being here [rather] it's to be around the people and to be help helpful and to give back."
- "The people working here, they make you feel like you belong in the community."
- "Like with everybody involved, they've really adapted well, and heard what we are saying to them, and they are actively doing something to come to a compromise."
- "Yeah, they've helped connect me with some resources I didn't even know existed."

Negative comments regarding experiences with service providers include:

- "Sometimes I feel like they make snap judgments without getting the whole story. And will ask the wrong people to leave."
- "Frustrated at times because certain people are allowed to be sitting here all day, other people
  are given an hour, an hour and a half, and rushed out. Some people are given even less time than
  that."
- "You get in here and it's just like so militant, right? It's like 'don't do that, don't do that, don't offend anybody. Don't make any noise. Everybody just shut up and sit down and eat your food.' Which is \*\*\*\*\*\* disrespect. Like I know there's a lot of people that are homeless that don't go to services like this because they're treated like their children. That is disrespectful. And they already go through enough disrespect just being in public and being looked down on by everyone. People need training. People need to learn how to treat people with respect. So yeah, the respect could be way better."

Neutral comments regarding experiences with service providers include:

- "They are torn in 1000 different directions all at once like they are trying to do art and then they are trying to take care of people at the door and their trying to defuse situations and there is so much multitasking right? And so, I would almost say that it would be nice to have more staff."
- "There's been growing pains but that's to be expected with the new project."

#### **FEEDBACK FROM SERVICE PROVIDERS**

As part of the assessment process, ten interviews were conducted with service providers at the Coordinated Access HUB. Interviews were conducted with staff at the Coordinated Access HUB as well

as multiple partners who provide services or programs out of the HUB space including healthcare workers, social support workers, and HUB drop-in attendants.

#### Going well

Service providers were asked "What is going well at the Coordinated Access HUB?". It was apparent that service providers took a lot of pride in what the Coordinated Access HUB is doing in the Nelson community. The low-barrier access to services at the HUB received the greatest number of comments, with all ten service providers interviewed noting its success. Teamwork between service providers was the second highest theme with 9 comments. Drop-in services and peer self-efficacy both received 5 comments. Art, safety, staff check-ins, the PEERS program and health services and guest relations all received praise as well. These strengths echo similar feedback received in the service user interviews. See Figure 44 for a word cloud depicting the common themes expressed by service providers.



Figure 44: Service providers themed responses to: "What is going well at the Coordinated Access HUB?"

Some comments made by service providers about what is going well at the Coordinated Access HUB include:

- "Every door is an open-door kind of concept where people can move from; they have the warm handoff from one service to another in the same building. And they don't have to go around trying to seek services. It's all just kind of right here, so I think that concept that was built into the scaffolding of the HUB is a real asset."
- "The centralized service, right? People have a safe space to come. You know they've got the street nurses. - they can get their feet taken care of. They've got the OPS they can use. They've got some food services. They've got some social workers. We've got some lively conversations. There's art. It's multi-faceted what they can access here, and I think just like our clients are multifaceted. It's really important for them to have that."

<sup>&</sup>lt;sup>1</sup> In this case, peer self-efficacy includes seeing the service users grow and harness insight and direction in their life and taking pride in and ownership of the HUB space as their own.

- "Lots of people when they come through the door have a variety of complex needs and so having
  this system where we have this casual drop in space and then triage into more important needs
  is really powerful. The drop in staff know all the different services that are on site to know how to
  refer people into what might be further supportive for them"
- "The key thing that is beautiful about this space is the relationships that form between like peers
  that access the space and with service providers too, and the connections that happen here. I
  think that's something that's really positive and meaningful for everyone, so that's definitely
  going well."

#### **Challenges**

Service providers were asked what is not going well regarding the Coordinated Access HUB and the community they serve. Stigma was by far the most cited challenge with 12 distinct comments. Many of the comments spoke to the stigma the service users face from community members and neighbours of the Coordinated Access HUB. There were also mentions of the stigma service users encounter when accessing services not provided at the HUB. Multiple service providers spoke to how the stigma placed on the service users can, and does, at times extend to the Coordinated Access HUB as an organization. This is also congruent with the feedback received by service users in the interview process.

Other commonly cited challenges included the toxic drug supply/opioid epidemic, not having enough structural supports, the physical space of the HUB, the BC housing crisis, and the COVID-19 pandemic. See **Figure 45** for a word cloud depicting common challenges as cited by service providers.



**Figure 45:** Service providers themed responses to: "What is not going well at the Coordinated Access HUB"

Below are some service provider comments about the current challenges at the Coordinated Access HUB as grouped into common themes:

#### Stigma

• "The societal desire to not see street people and to not hear homeless people. The 'not in my backyard' mentality. The fact that we have to worry whether we're going to get our lease renewed because people are very uncomfortable with people yelling on the street and they don't feel good about that, yeah, so just like that external community judgment and stigma"

- "Community relations. We are really taking a hit right now with our neighbors being not stoked about people existing. Kind of like 'we support what you're doing, but can you not do it here?' and then it comes down on us as service providers and feeling like we have to like police people existing and tell them that this is just one more place that they can't exist but the whole point of this space is like having a place where people can exist, so yeah that's a challenge"
- "There's limited capacity, so people are often waiting to get in. And understandably that's challenging for businesses in this area. Because they haven't had to learn to coexist."
- People dealing with mental health often become stigmatized. I mean the stigmatization of the population is there and it's terrible. And then organizations that are supporting also get stigmatized. So, I think that's a challenge"

#### **Not Enough Support**

• "What's challenging is kind of like more layers of support are required in order for everybody's workload to be settled [distributed] over the group of us [the service providers]"

#### **Toxic Drug Supply**

- "I mean obviously the opioid epidemic. A drug poisoning emergency is challenging. In the month of January, I had an incident report on my desk every single day."
- "Obviously the opioid crisis. Toxic drug supply is a huge thing that is really horrendous.
   Obviously, for the people who are directly impacted by it and then for service providers, I feel like we have like a lot of vicarious traumas just through witnessing so much struggle."

#### **Physical Space**

- "Maybe the challenge of ensuring that there is enough space for service providers without infringing upon the space of the participants."
- "We have an incredible opportunity having a HUB for people and we're only limited by the space."
- "I think we will outgrow this space."

#### COVID

• "Covid rules has been a big challenge. Capacity and masks and just the constant reminders can be, I think, really annoying for some folks, and it's not congruent with a lot of the lifestyle. But what can we do? This is this is part of the safety, health, health and safety of people."

#### Complexity

• "It also often feels like a giant band aid on a problem that is like so systemic and so entrenched and deeply problematic. There's just so many layers of that can be really overwhelming. When you sit with people and hear their stories, and it's like- 'OK, you are facing barriers on like all possible fronts'. I think that that's a really big challenge is that some of the services that we need in this community just don't exist right now."

#### **Housing Crisis**

• "Well, I guess probably the biggest challenge is that there's no housing for people, right? And so, we're kind of stuck between a rock and a hard place in this place, where we really are a band aid solution, but at the same time we are the only thing that people have, right? So it will never be enough for us to serve people granola bars and puddings, because they need like a home."

## 4.5 Outside Stakeholder Perspectives

A total of 33 people responded to the survey that targeted outside stakeholders. Participants came from various perspectives in relation to the HUB, with the majority being business owners/employees in the surrounding area (39% of respondents), and neighbours of the HUB (33% of respondents). Surrounding business owners and neighbours combined to form 72% of the total responses to this outside stakeholder survey. The remaining participants were identified as Nelson residents (12%), law enforcement (6%), City of Nelson staff or elected officials (3%), and first responders (3%). Three percent of respondents preferred not to answer (Figure 46).

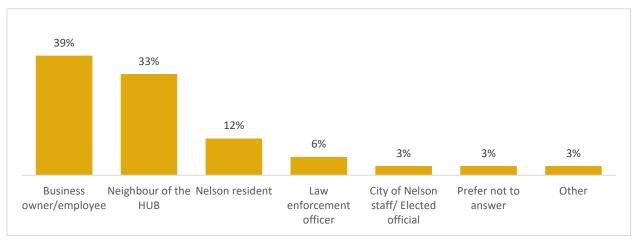
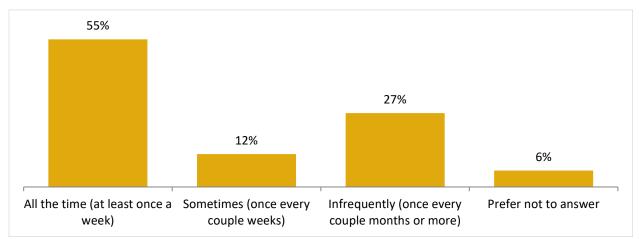


Figure 46: Self-identified perspective of stakeholder survey respondents (n=33)

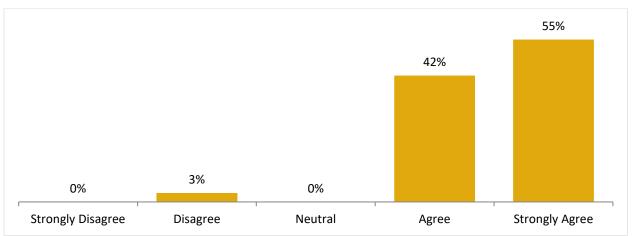
Outside stakeholders were asked to identify how frequently they engage with marginalized individuals. The majority of participants (55%) reported regular engagement<sup>ii</sup> at least once per week (**Figure 47**). Most survey respondents were aware of the Coordinated Access HUB, with 97% or respondents indicating they agree or strongly agree with the statement, "I am aware of the Coordinated Access HUB" (**Figure 48**).

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<sup>&</sup>quot;Note: "engage" is a subjective term and could be interpreted differently by each person.



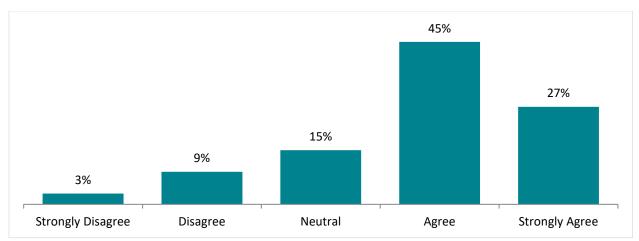
**Figure 47:** Outside stakeholder survey responses to: "How often do you engage with marginalized individuals, such as those who are experiencing or at risk of homelessness?" (n=33)



**Figure 48:** Outside stakeholder survey respondents' level of agreement with "I am aware of the Coordinated Access HUB" (n=33)

#### **AWARENESS OF HUB SERVICES AND WILLINGNESS TO REFER**

The outside stakeholder survey asked respondents their level of agreement to the statement "I am aware of the various services provided at the Coordinated Access HUB." Seventy-two percent of respondents agreed or strongly agreed with this statement (Figure 49).

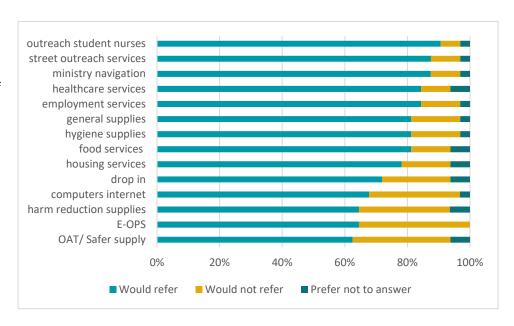


**Figure 49:** Outside stakeholder survey respondents' level of agreement with "I am aware of the various services provided at the Coordinated Access HUB" (n=33)

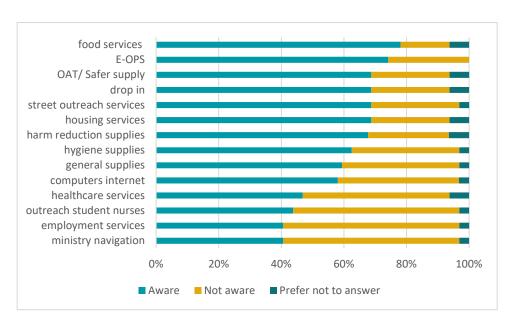
The survey went further and asked respondents to rate their level of awareness of each of the services provided at the HUB and whether or not they would refer these services to marginalized individuals they engage with. The next series of figures shows these survey results in different ways. Also see **Appendix D** for the results by service offered.

The majority of outside stakeholder survey respondents stated they would refer individuals to all services the Coordinated Access HUB offered, regardless of their awareness of the specific service (Figure 48). Most outside stakeholders are aware of the various services provided at the HUB. This awareness is greatest for food services (78% of respondents are aware) and lowest for employment services and ministry navigation (41% of respondents are aware) (Figure 49). One respondent provided an additional comment related to awareness, "I am aware of the services the HUB offers but Nelson has other services like this that offer help that are not directly affecting downtown businesses and making it unsafe for our children and elders in the community."

**Figure 50:** Outside stakeholder willingness to refer to HUB services, regardless of awareness of the service



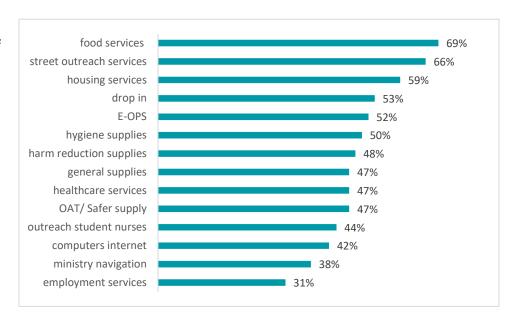
**Figure 51:** Outside stakeholder awareness of HUB services, regardless of willingness to refer



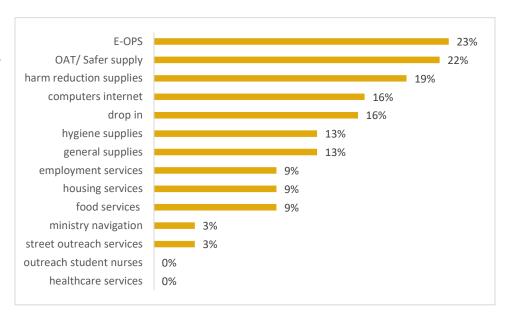
Of the services offered at the HUB, outside stakeholders had various levels of awareness and willingness to refer depending on the services. See **Figure 52** through **Figure 55** for these details. Of the services outside stakeholders were aware of, harm reduction services and supplies had the highest percentage of respondents not willing to refer.

### **Outside Stakeholders Aware of Services**

**Figure 52:** Outside Stakeholders are aware of the service and **would refer** 



**Figure 53:** Outside stakeholders are aware of the service, but **would not** refer



### **Outside Stakeholders Not Aware of Services**

Figure 54: Outside stakeholders are not aware of the service, but would refer

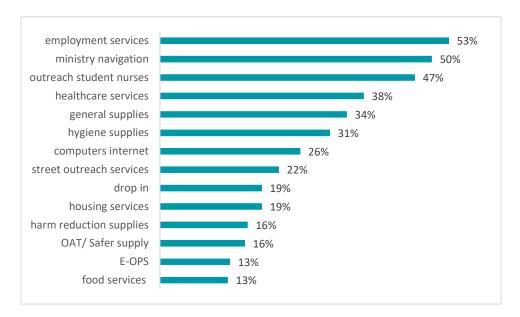
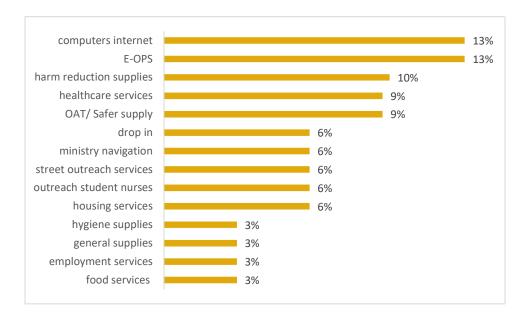
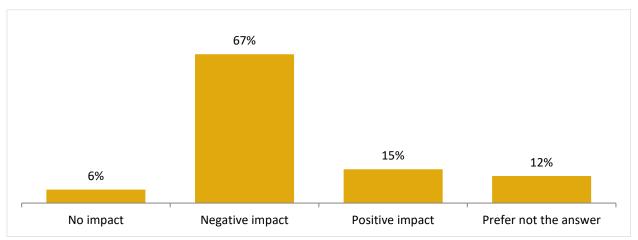


Figure 55: Outside stakeholders are not aware of the service and would not refer



#### IMPACT OF THE HUB ON OUTSIDE STAKEHOLDERS

The outside stakeholder survey asked questions to determine the impact the HUB has had on the surrounding community. Two-thirds of respondents (22 respondents) indicate the Coordinated Access HUB has an overall negative impact. Another 15% report that the HUB has a positive impact, and 6% report no impact at all (**Figure 56**).



**Figure 56:** Outside stakeholder's rating of the overall impact of the Coordinated Access HUB on the community (n=33)

The survey also included two opportunities for respondents to provide open-ended comments. One specifically asked to share comments related to how the HUB has impacted the community and the other invited any other comments respondents would like to share about the HUB. A total of 43 comments were received, coded, and grouped together into five themes: 1) exclusively supportive of the HUB, 2) exclusively unsupportive of the HUB, 3) mixed support for the HUB, 4) impact of location, and 5) suggestions for minimizing impact. Some comments fit into multiple themes.

#### **Exclusively Supportive of the HUB**

Of all the comments received, 5 comments (12%) were exclusively in support of the HUB. Comments recognized the value the HUB has on the unhoused community. Specific comments include:

- "Our town benefits in so many positive ways by having a public service such as this."
- "Supplying vital services to people who need them and may have trouble accessing them is huge component to developing a more fair, equitable and compassionate community."
- "Thank you to the great people who make this site work!"

#### **Exclusively Unsupportive of the HUB**

Of all the comments, 13 comments (30%) were exclusively unsupportive of the HUB. Of those 13 comments, 62% were critical of the HUB service users. Some of these comments include:

- "It's yet another service in Nelson which attracts homeless people from elsewhere, further increasing the homelessness issue in Nelson."
- "This community seems to have more help centers than other cities and it is drawing more and more homeless and addicts to our community."

The other 38% of unsupportive comments were critical of drug use and the perceived impact that drug use has on the community. Some of these comments include:

- "It attracts overdoses to the downtown core"
- "Homelessness in Nelson is a conscious decision made by the drug-using community"
- "There is no addiction rehab in the West Kootenays that will actually mitigate peoples' use of hard drugs."

#### **Mixed Support for the HUB**

Out of 43 comments, 13 comments (30%) expressed a mix of support and criticism for some aspect of the Coordinated Access HUB. Some comments include:

- "I believe the impact on our marginalized community is probably helpful, but I also feel it has negatively impacted the businesses and employees in the area"
- "[The] HUB serves an unfortunate need in our community but making it front row center diminishes the good things about Nelson".
- "I agree with the service it provides 100%, however I DO NOT support the location."

#### Location

The location of the HUB was mentioned directly or indirectly in most comments received. These location comments are further split into four main themes: inappropriate location, impact on neighbourhood, impact on businesses, and sense of safety. Some comments from each of these location themes include:

#### *Inappropriate Location*

- "I believe there is a need for such a service, but it DOES NOT belong on a main street in Nelson."
- "The services are great, bad location."
- "Terrible location, kids use the stairs to go to the indoor skate park and are too scared to walk that way now because of all the people loitering."

#### Impact on Neighbourhood

- "This doesn't seem to be the best location, considering there is not much room outside to accommodate all the people that gather, who then spill out onto the street and road and block access on a busy business block."
- "I would prefer that this statement said neighborhood as opposed to community. It's more than likely positive for the community in a whole, but not for the neighborhood it is currently in."
- "It's getting to the point that I no longer take my visitors downtown to shop. I'm too embarrassed and disgusted by what they'll encounter."
- "The sidewalk is not easy to transverse. The HUB clients are grouping together, do not move to let others pass by, garbage is left on sidewalks (although staff is doing best to clean up)"

#### Impact on Businesses

- "The impact of local business is a direct hit of the owners as surrounding community members no longer want to come to nelson because they do not feel safe."
- "This location is severely impacting my business and ability to earn an income for my family."
- "This location WILL FOR SURE have a direct, negative impact on my business. I agree with the service it provides 100%, however I DO NOT support the location."

#### Sense of Safety

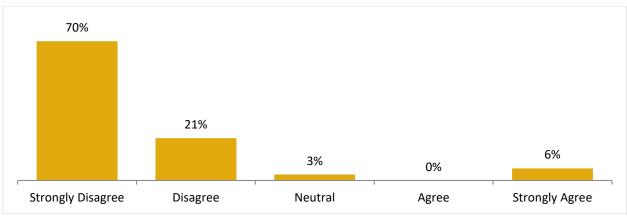
- "I am afraid for the safety of the general public. I own a building in the vicinity and some of my tenants have voiced concerns and have had unpleasant interactions with the HUB clientele."
- "I have had a few interactions that have worried me, from people whose mental health is not good, both outside the Hub and across the street in front of the post office."
- "My customers are complaining about having to walk past the HUB and some are afraid."
- "People are very intimidated/scared to walk past them. Some of the HUB clients have interacted with passers by in a negative manner."

#### **Suggestions for Minimizing the Impact**

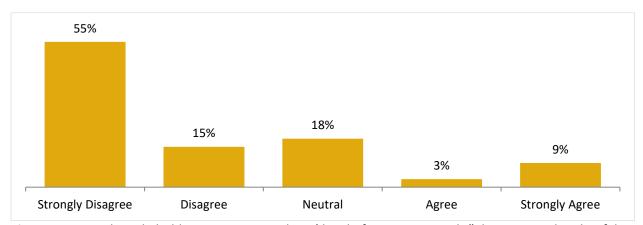
Eight comments were received that had some sort of suggestion for minimizing impact. Of these, 5 comments suggested finding a different location for the HUB, further away from businesses and the downtown core. Specific suggestions include:

- "I would suggest doing something about the loitering and tell the participants to be more respectful of everyone else that works downtown or this program will get a lot of push back."
- "Isn't there room inside the HUB building for people to congregate instead of outside on the sidewalk?... Maybe they could sweep the sidewalks, shovel snow, pick up their garbage?"
- "Consider renting at the skate park? Another location away from the busiest intersection in the city?"

Two level of agreement survey questions provide additional detail on how the HUB has impacted outside stakeholders surrounding the HUB. These questions are related to the HUB location and noticed change in community safety. See

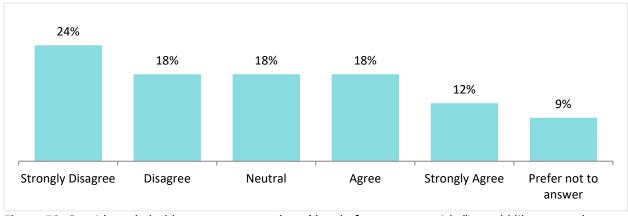


**Figure 57:** Outside stakeholder survey respondents' level of agreement with "The Coordinated Access HUB is in a good location" (n=33)



**Figure 58:** Outside stakeholder survey respondents' level of agreement with "I have noticed and or felt increased community safety since the Coordinated Access HUB opened" (n=33)

Outside stakeholder feedback was more diverse when respondents were asked their level of agreement with the statement, "I'd like to see the Coordinated Access HUB continue until its services are no longer needed" (Figure 59).



**Figure 59:** Outside stakeholder survey respondents' level of agreement with "I would like to see the Coordinated Access HUB continue until its services are no longer needed" (n=33)

## 4.6 Looking into the Future

This section outlines the feedback and suggestions given by service users and service providers to improve HUB service delivery. Some of these suggestions have already been addressed by the HUB staff.

#### **SERVICE USER SUGGESTIONS**

In an open-ended survey question, service users were asked what services they would like to add to the Coordinated Access HUB. **Figure 60** depicts the most common responses.



**Figure 60:** Service user survey responses to: "If I could add more services to the HUB, they would be..."

In the interviews, service users were asked what "What kind of assistance or services might be helpful that are not currently available through the Coordinated Access HUB?" and "If there was one thing that could be improved at the Coordinated Access HUB, what would this be and why?". Both questions garnered similar responses, so results were compiled for analysis. See **Figure 61** depicting a word cloud of common responses.

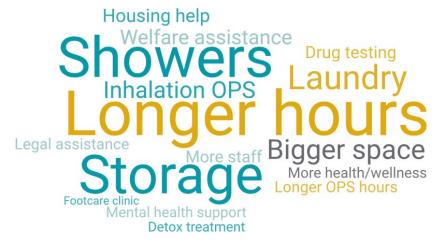


Figure 61: Service user suggestions for service additions or improvements

Interview participants had many suggestions and opinions on how the Coordinated Access HUB could improve its service delivery. These suggestions are broken down into the following suggestion areas: hours, storage, service provider interactions, health and wellness, food services, accessing services, and general supplies.

#### Hours

Extended or modified operational hours was a common suggestion with 15 comments. Four comments suggested a night program and the remaining 11 comments focused on lengthening the current operational hours at the HUB. Some of the service users' comments are:

- "If it was possible to be 24 hours. I got nerve damage in my fingers from being outside this winter and so it would be great to be warm at night."
- "Just longer hours maybe. Or break it up so there's a split shift or something. They can have an afternoon like they do now and then they open again from 1:00 AM to four or five am or something just in that. Witching hour is so freaking cold. You know, just somewhere to come in and have coffee."
- "Little earlier opening time. Some of the dead times between other services. Like when Salvation Army closes, they [The HUB] open."

#### Storage

While storage was cited 5 times as a needed improvement to the Coordinated Access HUB, only one interview participant gave an explicit suggestion. They stated that having short term storage lockers available to service users on a first come first serve basis would be highly beneficial.

#### Service Provider Interactions

When service users were asked about their interactions with service providers, there were a handful of comments made regarding the service provider's lack of lived-experience as an unhoused person, which can lead to disrespect. One service user gave the following suggestion to curb that disconnect. The service user stated,

"For the new employees here, that haven't worked in this type of field. I had an idea of having someone who's like, for example, someone like me, that could maybe almost like give them a would one on one kind of coach. So, they can enter that place of being able to be respectful and being compassionate and have understanding [of our experiences] because it is necessary because they don't have that lived experience."

#### **Health and Wellness**

There were a total of 18 comments related to health and wellness improvements that services users deemed beneficial. These suggestions included expanded hygiene services (showers, laundry), expanded harm reduction services (inhalation OPS, expanded hours, drugs testing), and increased spiritual and wellness supports. Below are some of the service users comments:

- "I would like to see laundry or showers. I have dirty clothes that I cannot wash."
- "It can be really difficult to find shower services, so if they had something along those lines [that would be helpful]"
- "When I do drugs, I smoke them. We should be allowed to smoke our drugs in the OPS room too"
- "More drug testing. I think people need to be testing their drugs."

- "I think the OPS should almost be a 24-hour thing. During the day it is great...but at night, that's when people die right?"
- "More healing circles and more Indigenous focused stuff."

#### **Food Services**

Overall participants stated that they would appreciate more nutritious food with more protein and less sugar. Some individuals stated the need for more food options, and that they would appreciate seeing a more substantial food program with hot meals.

#### **Accessing services**

There were a handful of comments related to the accessibility of services at the Coordinated Access HUB. Some individuals stated they would appreciate knowing what services were available to them at the HUB. Below are some specific comments related to the accessibility of services and navigating different service providers in the space.

- "It would be nice if we could set up an appointment to be able to come in here and use the services, and it's not full because they have a space open for you 'cause you phoned ahead and reserved a spot".
- "If the HUB could divide like open earlier and dedicate time in the mornings to working on things like dealing with the ministry getting. [That way] people have the chance to deal with whatever they gotta deal with. I feel like these people aren't getting [inside] because someone else is dealing with their issues and it takes longer than people think."
- "A counselor that will actually interview and find out what you really need, right somebody to kind of navigate you through all the services that are offered here."

#### **General supplies**

Three suggestions were received regarding expanding and improving the general supplies offered at the Coordinated Access HUB free store. Some comments received around the free store indicated that either clothes did not fit them, or they are not appropriate for the weather or their gender. Participants suggested more appropriate gear for the season and higher quality supplies would be helpful.

#### SERVICE PROVIDER SUGGESTIONS

When service providers were asked for suggested improvements for the Coordinated Access HUB, their responses were similar to the service users. Having more food was the most cited improvement suggestion, followed by increased health care services, increased neighbour engagement, having an outdoor space, having a bigger space, and more recreational programming. See Figure 62 for a word cloud depicting service provider responses. Specific suggestions are described below.



Figure 62: Service provider suggestions for service additions or improvements

#### **Food Program**

Increasing the food program was the most cited improvement by service providers. Below are some of the comments from service providers:

- "I think something that would make everybody happier would be to kind of like, authorize ourselves to become a food program"
- "I would really love to see an expanded food program. That's something that peers are often
  asking for it, and there are other food services in town, but because of the fact that this place
  has become sort of like a one stop shop would be awesome if we could have more substantial
  food for people."

#### **Healthcare services**

Service providers expressed the importance for expanding the health care services at the Coordinated Access HUB. Some participants stated that they would like to see more of the services that are currently offered (nurses, mental health workers, OPS services) and others stated they needed to add to the health care team at the HUB to include, doctors for detox referrals, social workers, and counsellors.

#### Increased neighbour engagement and education

Stigma from community members was a common theme cited by both service users and service providers when asked about challenges at the Coordinated Access HUB. In the service provider interviews, there were several comments made about strengthening relationships with neighbours and neighbouring businesses. One service provider stated the following:

"Doing some community engagement with the local businesses because all of this work is relational. I also think that having an open house where local business owners come in and they see what's happening here and they meet people and talk to people and maybe gain a little better understanding of the folks that are using their services. Because I think that really goes a long way in helping people to open their hearts and minds"

#### **Outdoor space**

There were several comments related to expanding the HUB to include a safe outdoor space for people to be. Service providers suggested a patio, green space, or garden area where service users could be

outside without overtaking the sidewalk and stairwell next to the HUB. One service provider indicated, "It would be really great if folks had, especially coming up in the summer, had a place near the building where they could safely gather outside. I think structurally it's challenging because people just have the sidewalk outside" Having an outdoor space would also satisfy the voiced desires of stakeholder survey respondents to have less crowding on the street.

#### Bigger space

Much like the service users, service providers also cited that the physical space of the Coordinated Access HUB is limiting. One service provider commented,

"We know for sure that capacity could be increased. I don't know exactly how you would do that in this space. But the fact that there are often, if not always, people waiting outside to get in. Like we know the demand is higher than the supply right now, so just literally being bigger with more staff."

#### **Barriers** to improvements

When service providers were asked to reflect on what barriers they foresee in implementing their suggestions for improving the HUB, 70% of providers cited budget and funding issues as the number one barrier. Community stigma was the second most cited barrier, followed by staffing issues (i.e., lack of staff) and services existing in other places. Other less noted barriers include space (or lack of), urban planning, and the new upper management at Nelson CARES. See **Figure 63** for a word cloud depicting common themes of service provider perceived barriers to implementing suggested improvements.



Figure 63: Service Provider- Barriers to suggested improvements

## 5. Conclusion

The Coordinated Access HUB is a valuable front line service agency that is providing lifesaving services to a marginalized community in Nelson BC. As cited by the service users, the HUB has provided insight, direction, community, and improved physical health and well-being to the service users. The benefit of Coordinated Access and the multiple service provision is monumental for service users and service providers alike.

As with all new projects there are growing pains. The Coordinated Access HUB has taken the first step in growth by requesting this assessment. Through this assessment's research, the strengths and opportunities for improvement have been identified. For example, outside stakeholders have identified

issues with service users congregating on the sidewalk outside the HUB. Service provider suggestions to mitigate this issue include having a designated safe outdoor space that service users can use. And since data collection and analysis for this assessment, HUB staff have already started resolving this issue.

The Coordinated Access HUB has created a safe space for individuals to access services and meet their basic needs. As indicated through the voices of the services users throughout this assessment, the HUB has made a positive impact in their lives, and for some, has been the difference between life and death. However, community stigma and discrimination are a major challenge and barrier at the HUB, as evidenced through the outside stakeholder survey. This presents opportunities for increased community education for neighboring residents and businesses about the necessity of incorporating a harm reduction model as a means of community health promotion. One service user was moved to tears expressing how important it is for the community to understand, "I just want to let them know that I am not trying to infect their children, or do anything wrong, I am simply just trying my best, I am just trying to survive."

# 6. Appendices

# Appendix A: Service User Survey Questions

1.	What i	s your age? (Note: if under 18, discontinue survey)
	a.	Under 18
	b.	18-24 years old
	c.	25-34 years old
	d.	35-44 years old
	e.	45-54 years old
	f.	55-64 years old
	g.	65-74 years old
	h.	75 years old or older
	i.	Prefer not to answer
2.	What g	gender do you identify as?
	a.	Male
	b.	Female
	c.	Non-binary
	d.	Prefer to self-describe (please specify)
	e.	Prefer not to answer
3.	Do you	self-identify as Indigenous?
	a.	Yes
	b.	No
	C.	Prefer not to answer
4.		s your home community?
	a.	Nelson
	b.	Castlegar
	c.	Trail
	d.	Ymir
	e.	Salmo
	f.	
	g.	Other [please specify]
5.	What b	pest describes your current housing status?
	a.	Unhoused
	b.	Emergency sheltered
	c.	Housed in transitional, temporary, or substandard housing (ex: couch surfing or unsafe
		housing)
	d.	
	e.	Prefer not to answer
6.	_	does your income come from? [Check all that apply]
		Informal work (ex: panhandling, bottling)
		Temporary, part-time or seasonal; inadequate pay; no benefits (ex: tree planting)

		Self employed								
		□ Income assistance								
		=								
	☐ Full time with adequate pay and benefits									
	☐ Prefer not to answer									
	Other (please specify):									
7.	Do you	have any of the following challenges that m	nake it ha	rd to ac	cess services you n	eed in				
	your d	aily life? You can answer yes, no, or prefer n	ot to ansv	wer or u	nsure.					
					r n	7				
					Prefer not to answer/unsu					
					r nc					
			Š		efe					
			yes	no	Pr an e					
Ment	al healtl	h (diagnosed or undiagnosed)								
Subst	ance us	e								
Cogni disabi	•	pairment (Ex: brain Injury, learning								
Physic	cal disal	pility/impairment								
Other	[Please	specify]								
				1		_				
8.		ften do you come to the Coordinated Access	Hub?							
		All the time (once a week or more)								
		Sometimes (once every couple weeks)								
	C.	Infrequently (once every couple months or Prefer not to answer	more)							
	a.	Prefer not to answer								
9.	When	you enter the Hub space, what resources/se	rvices do	you acc	ess? [check all that	apply]				
		Harm reduction services – E-OPS								
		Harm reduction services – OAT/Safer Supp	ly							
		Harm reduction supplies								
	☐ Food services (snacks, referral to other services)									
	☐ Housing services (applications, referrals, and housing support navigation)									
	<ul> <li>Healthcare services (eye care, dental, sexual health)</li> </ul>									
	<ul> <li>Outreach student nurses (foot care, wound care)</li> </ul>									
	☐ Employment services (PEERS Employment program)									
	☐ Ministry navigation (provincial government)									
		Street outreach services								
		Hygiene supplies (haircut, clothing)								
		General supplies (sleeping bags, jackets)								
	☐ Drop-in (ex: community, art, and place to stay warm or cool)									

Computers and/or internet
Prefer not to answer
Other [please specify]

10. How has your ability to access the following types of services changed since the Coordinated Access Hub was created?

	Less Access	More Access	No Change	l do not use this service	Prefer not to answer
Harm reduction services: Overdose Prevention Site (E-OPS)					
Harm reduction services: Opioid Agonist Treatment (OAT) / Safer supply					
Harm reduction supplies					
Food services (snacks, referrals to other resources)					
Housing services (referrals and housing support navigation)					
Mental health and addictions treatment services (such as counseling, groups, detox, residential addictions treatment programs)					
<b>Healthcare services</b> (eye care, dental care, sexual health, referrals to health care practitioners)					
Outreach student nurses (foot care, wound care)					
Street outreach services					
Ministry navigation support (Provincial government)					
<b>Employment Services</b> (PEERS employment program, job search support, taxes, etc)					
General supplies (sleeping bags, jackets)					
Hygiene Services/Supplies (haircut, hygiene supplies, clothing)					
Drop-in (community, art, place to stay warm or cool)					
Computer/Internet access					
Other (please specify)					

11. On a scale of 1 to 5, with one meaning not at all helpful, and 5 meaning very helpful, how helpful have the following services offered through the Coordinated Access Hub been to your well-being. A person's well-being includes their health, safety, happiness, and sense of belonging. (please rate all that apply to you):

	1	2	3	4	5	I do not use this service	Prefer not to answer
Harm reduction services: Overdose Prevention Site (E-OPS)							
Harm reduction services: Opioid Agonist Treatment (OAT) / Safer supply							
Harm reduction supplies							
Food services (snacks, referrals to other resources)							
Housing services (referrals and housing support navigation)							
Healthcare services (eye care, dental care, sexual health, referrals to health care practitioners)							
Outreach student nurses (foot care, wound care)							
Street outreach services							
Ministry navigation support (Provincial government)							
<b>Employment Services</b> (PEERS employment program, job search support, taxes, etc)							
General supplies (sleeping bags, jackets)							
Hygiene Services/Supplies (haircut, hygiene supplies, clothing)							
<b>Drop-in</b> (community, art, place to stay warm or cool)							
Computer/Internet access							
Other (please specify)							

12. On a scale of 1 to 5, please rate your level of agreement with the following statements thinking about your experience with the Coordinated Access Hub. 1 means strongly disagree and 5 means strongly agree:

	1	2	3	4	5	Prefer not to answer
I have an increased sense of safety and belonging in the community						
When facing an immediate threat or crisis, I know where to find support to request assistance and meet my needs.						
I have increased access to outreach services and crisis supports.						
I have increased sense of health and well-being, including improved positive mental health strategies in my daily life.						
I have increased and positive participation in the community due to programming, peer engagement, and information provided through the Coordinated Access Hub.						
I feel safe when accessing services in the Hub.						
I can access services without feeling discriminated.						
The Coordinated Access Hub is in a good location for my needs.						
The drop-in hours of the Coordinated Access Hub are good for my needs.						
Having multiple services in one location at the Hub allows me to access services I would not otherwise access.						
The Hub has helped me through the COVID-19 pandemic.						

12	Have you ev	operienced any	harriars to	carvicas at	the Huh	that you nee	d right naw?
13.	nave vou ex	wenenceo anv	parners to	services at	THE HUD	mai vou nee	a neni now :

- a. Yes
- b. No
- c. Prefer not to answer
- 14. If yes, what barriers have you experienced? [Okay to skip, if prefer not to answer]
- 15. What are your greatest needs right now? [Okay to skip, if prefer not to answer]
- 16. How is the Coordinated Access Hub helping you in your areas of need? [Okay to skip, if prefer not to answer]
- 17. If I could add more services to the Hub, they would be...[Okay to skip, if prefer not to answer]

- 18. Overall, how has the Coordinated Access Hub impacted your day-to-day life?
  - a. No Impact
  - b. Negative impact
  - c. Positive Impact
  - d. Prefer not to answer

## Appendix B: Service User Interview Questions

- 1. How have you been using the Coordinated Access Hub?
- 2. What services have you found most helpful and why?
- 3. What services have you found least helpful and why?
- 4. Describe your experience connecting with the service providers at the Hub?
- 5. What kind of assistance or services might be helpful that are not currently available through the Coordinated Access Hub?
- 6. How does using the Coordinated Access Hub make you feel?
- 7. What barriers, if any, have you experienced in accessing the services you need?
- 8. Please describe how the Coordinated Access Hub has impacted your daily life.
- 9. If you could improve something at the Coordinated Access Hub, what would this be and why?
- 10. What benefits, if any, do you experience having multiple services available in one location at the Hub?
- 11. What challenges, if any, do you experience having multiple services available in one location at the Hub?
- 12. What would be different in your life now if the Coordinated Access Hub did not exist?
- 13. Is there anything else you would like to share about your experience using the Coordinated Access Hub?

## Appendix C: Service Provider Interview Questions

- 1. What service(s) are you providing at the Coordinated Access Hub?
- 2. What is going well and why?
- 3. What are the challenges, if any, you have seen or experienced?
- 4. What suggested improvements do you have?
- 5. Are there any potential barriers to making these suggested improvements?
- 6. How has the Coordinated Access Hub impacted the lives of those using it?
- 7. What are the benefits, if any, you experience to having multiple services available in one location at the Coordinated Access Hub?
  Is there anything else you would like to share about your experience providing services at the Coordinated Access Hub?

## Appendix D: Outside Stakeholder Awareness and Referral by HUB Service

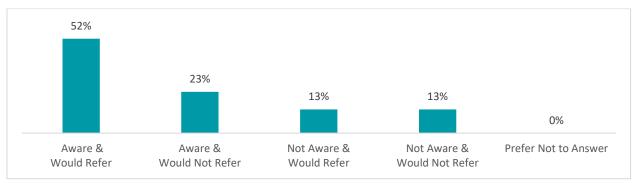


Figure 64: Outside stakeholder awareness and referral for E-OPS services (n=31)

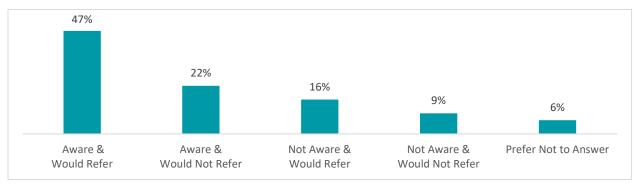


Figure 65: Outside stakeholder awareness and referral for OAT/safer supply services (n=32)

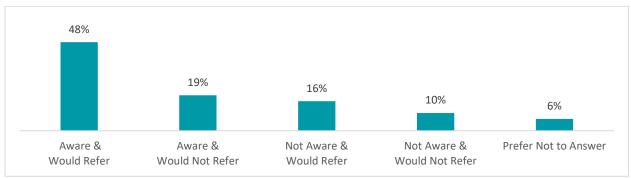


Figure 66: Outside stakeholder awareness and referral for harm reduction supplies (n=31)

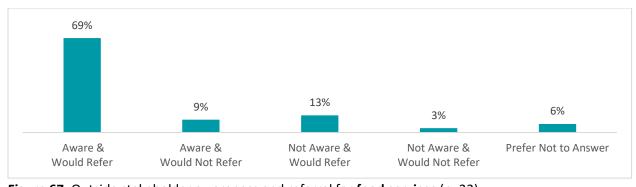


Figure 67: Outside stakeholder awareness and referral for food services (n=32)

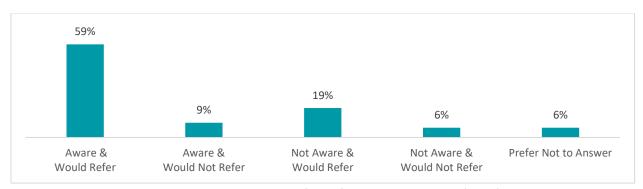


Figure 68: Outside stakeholder awareness and referral for housing services (n=32)

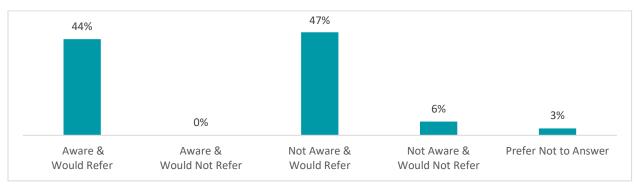


Figure 69: Outside stakeholder awareness and referral for student outreach nurses (n=32)

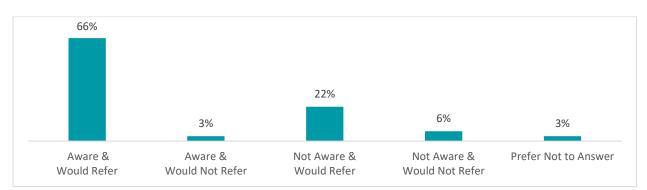


Figure 70: Outside stakeholder awareness and referral for street outreach services (n=32)

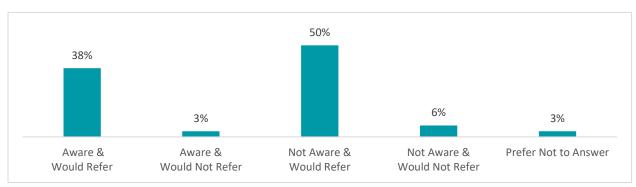


Figure 71: Outside stakeholder awareness and referral for ministry navigation (n=32)

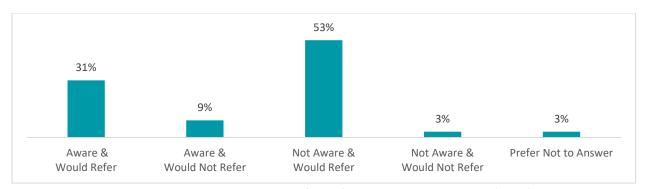


Figure 72: Outside stakeholder awareness and referral for employment services (n=32)

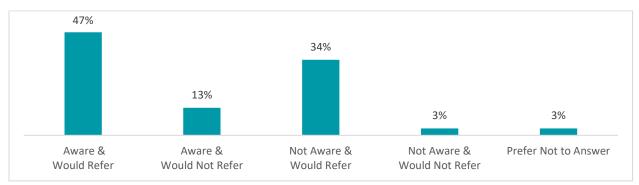


Figure 73: Outside stakeholder awareness and referral for general supplies (n=32)

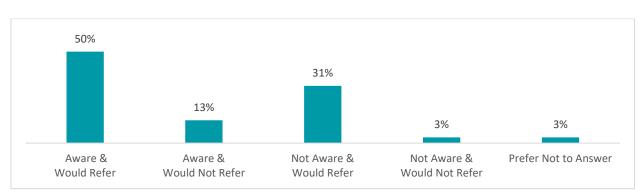


Figure 74: Outside stakeholder awareness and referral for hygiene supplies (n=32)

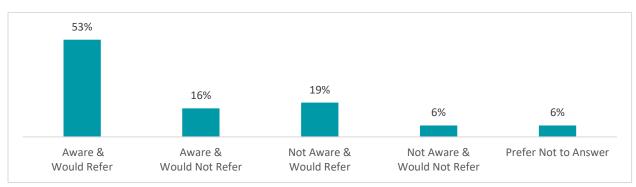


Figure 75: Outside stakeholder awareness and referral for drop-in (n=32)

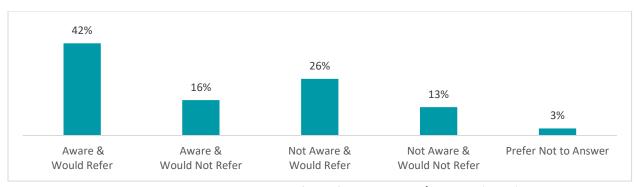


Figure 76: Outside stakeholder awareness and referral for computers/internet (n=31)

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