

Female Julian House Client - lived in Bath for many years

- Visiting services in different locations gives you something to do and it could get boring if everything was in one place
- If you always have to go to the same place, staff can get a bit sick of you and you might not get such a good service.
- Mindfulness is really useful and gets good results – e.g. stopped using needles. Works well in groups
- Phone services are useful especially if conversations get heated – better than face to face in these cases
- At the moment, the client doesn't use web-based info as she doesn't need to – gets all she needs face to face or via the phone.

Male Julian House client - lived all/most of his life in and around Bath

- Really likes the keyworker model used at JH and would like similar in health provision
- The limitations of prescribing services can be a problem. For instance, the Homeless Healthcare team cannot prescribe Librium (NB this is what specialist drug & alcohol services prefer as otherwise the HHC team would be detoxing people without support from SDAS).
- Really liked the Riverside HC and would like to see it reopened. Says most people won't go to the RUH.

Male Julian House Client - lived in Chew Valley for many years

- The dentist is the 'go to' professional so it might make sense to use this as the hub, rather than GP. Vets also important in rural areas!
- Need help to navigate the system and to know what questions to ask, especially if this is your first time needing care and support services
- If you live in an outlying rural area, you might not know which local authority to go to if you need care and support services so there needs to be better sign-posting – this will include ensuring neighbouring authorities can signpost people back to B&NES where necessary