



**Quality in social services from the perspective of services
working with homeless people**

FEANTSA Annual theme 2011

Quality in social services from the perspective of services working with homeless people in Hungary

Written for FEANTSA

Composed and drafted by Péter Bakos

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Cooperating organizations: Hungarian Maltese Charity Service Kecskemét,
Salvation Army Hungary, Savaria Rehab-Team Nonprofit Ltd., ReFoMix
Nonprofit Public Benefit Ltd.



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It is important to note that at the time of drafting this report the composition of the National Social Policy Concept is taking place which will somewhat rearrange the legal framework in force the coming years.

1. Organisation and funding of homeless services

Objective: this section aims at understanding the organisation of the provision of homeless services in a given country

1.1. Legislation

-Is there any legislation or policy in your country which focuses specifically on homeless services provision?

In Hungary the provision of social services is regulated by the Social Act 1993 III on social administration and social services and also by the regulation 1/2000 on its enforcement published by the Ministry of Social and Family Affairs. The Social Act defines the services to be provided by local governments on an obligatory basis among them services to be provided for people who are homeless. Certain social services are only to be provided by local governments where the number of inhabitants exceeds the limit defined by the law.

„1. § (1) In order to create and maintain social security this act aims at defining the forms, organization of certain social services to be provided by the state and also defining the entitlement criteria of social benefits as well as the guarantee of their enforcement. .

(2) Beyond services regulated by this law Local Governments can define other services at their own charge.

2. § Ensuring the conditions of social services – beyond the responsibility of individuals for themselves and their family as well as members of their local community – is the responsibility of state bodies and local governments.” (Chapter I , General provisions)

1.2. Typology and organisation of services



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-Does a typology of homeless or social services exist in your country? In your organisation? If yes, please describe in detail.

This is detailed by the chapter on social services in the Social Act. The institutionalization of services for homeless people gradually took place after the years the problem of homelessness had appeared, such as night shelters, temporary hostels, soup kitchens, day centres, rehabilitation shelters for the homeless, nursing homes for the elderly homeless as well as street outreach work. Doctor's surgeries without spatial Restrictions and 24-hour health centres for the homeless are included in a different regulation.

-Does a register of homeless services exist? If yes, please give us relevant links to websites and directories.

The coordination of street outreach work and the operation of a 24-hour crisis telephone line are carried out by the national and the regional crisis phone lines. There exists a register of homeless services on the website of the national crisis phone line.

<http://kereso.diszpecserportal.hu/keres.php>

e.g. day centres in Budapest:

http://kereso.diszpecserportal.hu/keres_napmel.php?megye=20

On the website one can search for the types of homeless services by counties. Besides the contact details of an institution one can find information on the services provided, institutional capacity, division of service users by their gender, admission criteria (amount of fees, what sort of documentations of medical conditions required, etc.), if regular savings is expected, if the institution is wheelchair accessible.

In addition to the above mentioned there is a different register of social services in which homeless service providers can also be found.

It is compulsory for every social, child welfare and child protection service with valid operation licence to be recorded in this register. .

Besides data on the service and the service provider the institutional capacity, amount of fee to be paid and also the number of people waiting for the service.

<http://szocialisregiszter.afsz.hu/>



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As a result of an EU funded project (TÁMOP 5.4.1.) currently being implemented this register will be transformed into a social sector portal which is supposed to give information to citizens, social authorities, bodies of social administration, operators of social and child welfare services, experts of the social sector as well as institutions offering training on social themes.

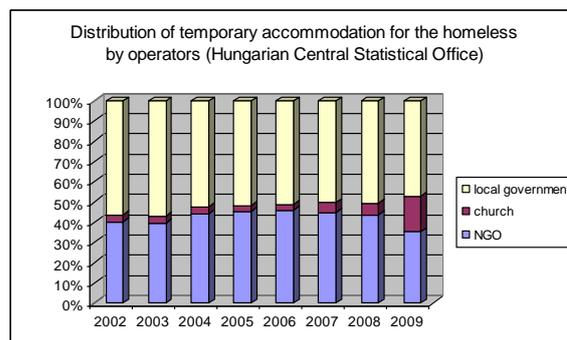
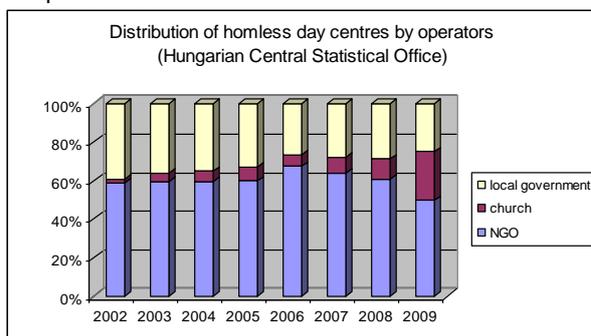
-Describe briefly how the provision of homeless services is organised in your country.

The government transfers the responsibility of providing services for homeless people in the competence of local governments that are - depending on the number of their inhabitants - obliged to have certain homeless services operated. However, the law allows local governments the possibility to out-contract the service provision with NGOs or churches. (120. § VI. Contractual social services)

Via the Ministry of National Resources the government supports service provision with a normative amount and continuously controls the allocation of the resources. The vocational and infrastructural conditions necessary for institutions to obtain operation licence are controlled by Government Offices established in each county.

The diagrams below containing data from 2009 show the proportion of NGOs, local governments and church organizations in the delivery of certain basic services for homeless people. NGOs are overrepresented in running day centres for homeless people, while the trend shows the growing number of church organizations.

However, looking at institutions providing temporary accommodation it is local governments that are overrepresented.



1.3. Funding



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-What are the main mechanisms in place for funding homeless services provided for the not-for profit organisations in your country (public procurement, grants, agreements with NGOs, donations etc)?

The Hungarian state expends approximately 8 billion HUF (~30 million EUR) per year on tackling homelessness. The state aims at creating calculable financial background for homeless services by normative support. The amount of the normative state support is defined on an annual basis in the Budget Act and differs by the type of service. In the case of services providing temporary accommodation the amount of normative support is 468 350 HUF per capita (1 750 EUR). (The normative funding of Family Temporary Homes is 635 650 HUF/year/capita ~2 370 EUR, that of day centres is 206,100 HUF ~770 EUR.) In the case of day centres, the total amount of normative state support that can be claimed can be calculated up to a maximum of three times the number of service users recorded in their operation permit.

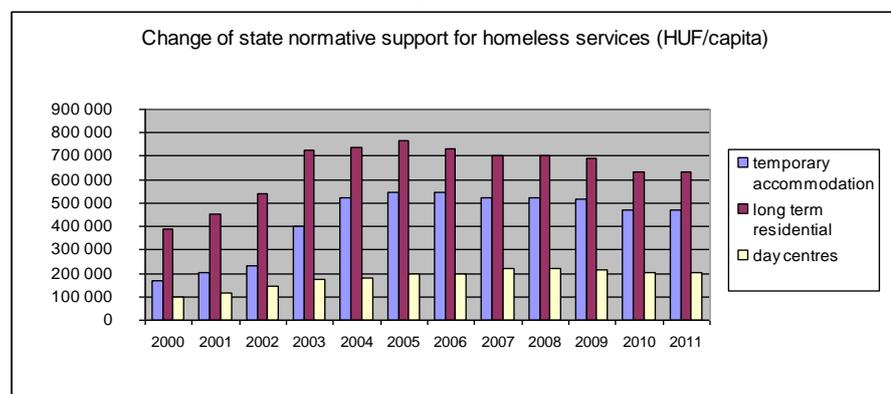
In 2005 street outreach service was also included in the normative funding scheme, however from 2012 the normative financing of this service is expected to end and it will fall under the category of tendered services again.

When mentioning normative state funding we must add that the nominal amount per capita has either declined or stayed unchanged for the last 5 years, thus homeless service providers must settle for less and less resources to finance their services. Homeless service providers expend 70% of the normative funding on personnel expenses while they have the remaining 30% to cover all the other emerging expenses.

Besides the normative state funding the budget of some homeless service providers is also complemented by their local government. The rate of this contribution varies significantly throughout the country. Until 2011 the Municipality of Budapest has contributed to the operation of non-religious homeless service providers in Budapest

up to 30% of the normative state funding. However, the new Mayor has recently withdrew this complementary funding from NGOs operating in Budapest. (The local government of Debrecen

contributes approximately 2% to the annual budget of ReFoMix.)





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The third strand of the budget of NGOs comes from grant applications, however the callable resources varies significantly by service providers.

Grant resources coming from the Ministry have recently been allocated to two Public Foundations. By the establishment of these public foundations it became possible to better adapt the elements of call for proposals to the needs of service providers (and thus that of service users). In Budapest "Solidarity" Public Foundation for the Houseless and Homeless in Budapest while for the rest of the country Public Foundation for the Homeless announced the call for proposals. However, due to the change of regime in 2010 the operation and future of all the public foundations in the country became precarious. In 2011 the Government made a decree on the abolishment of „Solidarity" Public Foundation.

Concerning EU resources access to them does seem to be a real alternative for every homeless service provider to supplement their budget. Besides administrative burdens the lack of personnel conditions and the necessary resources (e.g. pre-financing) also hinder the use of EU funding. Ideally between the period of 2007-2013 this type of funding would contribute to projects promoting housing and employment of homeless people with 5 milliard HUF (~18 656 716 EUR). However, due to the administrative burdens mentioned above as well as the call for proposal less adapted to the needs of service providers the use of funding does not go as well as it was expected.

The National NGO Fund financed mainly by the central Budget might also have calls for proposals which can mean supplementary resources for NGOs providing services for homeless people. However, this sort of income means only a symbolic contribution to the budget of some NGOs.

Finally it must be added that in Hungary church run institutions – under the Vatican treaty – receive a supplementary normative state funding. In practice it means that church run organizations can rely on 1,8 times more funding compared to the regular amount of normative state funding for NGOs.

2. Policy and legal framework regarding quality in homeless services

Objective: this section aims at gathering information on existing provisions on quality and their nature and scope.



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2.1. Quality provisions

-Is there any legislation or policy framework in place defining quality standards or principles¹ in homeless services in your country? (if yes, give a brief description of it and provide us with links to relevant laws or materials)

The Social Act 1993 III on social administration and social services and the regulation 1/2000 on its enforcement published by the Ministry of Social and Family Affairs details quality standards and principles in relation to homeless services.

On the Internet:

- Social Act 1993 III on social administration and social services

<http://www.szmm.gov.hu/main.php?folderID=1043>

- 1/2000 Ministry of Social and Family Affairs regulation on the professional responsibilities and operating conditions of social institutions providing personal care

<https://kereses.magyarorszag.hu/jogszabalykereso/SearchLawWindow?struts.portlet.mode=view&struts.portlet.action=%2FsearchLaw%2FrenderDirect&action=e&windowstate=normal&struts.portlet.eventAction=true&mode=view>

-If yes, are these quality standards or quality principles?

The relevant legal regulations include both minimum standards and principles.

e.g.3.§ (1) During the provision of personal care great care must be taken so that the human and civil rights of the individuals receiving the service will not be breached. The head of institution is responsible for the enforcement of human and civil rights within the institution as well as the development and maintenance of an atmosphere accepting the autonomy of the individuals and helping their integration by all manner of means.

It also regulates the general physical and personnel and professional conditions, requirements in relation to the personal care plan, personal development plan furthermore regulates the basic and specialized services.

Under specialized services it regulates among other things the organization of catering and health services as well as the special regulations concerning services for homeless people.

¹ A **standard** should be understood as “an established norm or requirement formally defining uniform criteria, methods, processes and practices”, and a **principle** represents a set of values that inspire rules of organisation and a code of conduct



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e.g. 102. § (1) When organizing homeless services care must be taken of the basic rights of and human dignity of service users.

The legal regulation defines standards when specifies that

- in temporary hostels the maximum of 15 person can be accommodated in one room
- there must be at least 4 square metres space per service users in a room
- opening hours of a temporary hostel can not be fewer than 16 hours a day
- there must be at least on shower and a toilet by gender per 15 service users
- how many hours of social work must be provided in the given institution
- what other personnel and physical conditions must be met.

-Is it compulsory or voluntary?

These quality provisions are compulsory for every service provider. If a service provider can not meet the regulations defined by the law (e.g. physical conditions, wheelchair accessibility) can only operate further with a temporary operation permit provided that the lacking quality provisions are to be met within a given period of time. The most frequent reason behind temporary operation permit is that some institutions are not wheelchair accessible. Requirements related to wheel chair accessibility must be met by the end of 2012.

-Is there a quality framework for social services in general relevant to the homeless sector? Are you in your work affected by quality provisions regarding healthcare services or employment services?

The law and its clauses referred above define the quality frameworks that apply to social services in general and also specifically to homeless services. Naturally homeless service providers offering also employment and healthcare services are affected by quality provisions on employment and healthcare as well. The social Act also regulates the employability of service users within the institution, while the 1/2000 Ministry regulation specifies the organization of employment in social institutions.

During the recent years services operating on the borderline of homeless services and healthcare services have gradually developed. By their nature they can be considered either as specification or segregation.

There are about seven 24-hour health centres in operation throughout the country to deliver healthcare services for homeless people. Homeless service providers offering this type of service are affected by the regulation and

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quality provisions of Government decree 43/99. This type of service is financed by the normative support of County Health Insurance Funds.

Mobile medical service is regulated by the 4/2000 regulation issued by Ministry of Health.

Doctor's surgeries without spatial restrictions are regulated by the Health Act and the 60/2003 Ministry regulation. They are also financed by the County Health Insurance Funds.

2.2. Dimensions of quality

- *What definition of quality is used in your country?*

Mainly the ISO definition is applied which defines quality as "the totality of features and characteristics of a product or service that bear on its ability to satisfy stated or implied needs".

A training document² of an EU funded project (TÁMOP 5.4.1.) deals with quality and characterizes the quality of services as follows.

„The definition of quality in service provision

- Intangibility

In general services are not materialized. They are invisible and intangible prior they are used.

- Perishability (Immediately consumable)

Services are used at the time of their delivery as opposed to a product that is produced, stored then later sold and then finally consumed.

- Heterogeneity

The service is much dependant on the individual it is provided by as well as the time, the performance of the staff, their actual mental and physical condition. The same service can not be reproduced the same way.

- Inseparability

Both the service supplier and the service user take part in the consumption of the service with their personal presence.”

- *What are the criteria of quality in a homeless service in your country? (i.e. user's participation, training, funding)*

² Minőségügyi gondolkodás (képzési anyag) Készült: „A TÁMOP 5.4.1 Összeállította és szerkesztette: Dr. Erdélyi István, <http://84.206.8.166/index.php?page=dokumentum&piller=20&dokid=279>



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In the case of services the quality of the provided service particularly depends on the individual who delivers it therefore the training of qualified personnel have a significant impact on quality. It is important for the employees of homeless service providers to have regular opportunities for the maintenance of their mental health such as participation in supervisions.

Beyond the person the service is provided by the spot of the service and the physical environment also have an impact on quality. Most institutions used by homeless service providers were not originally designed for the purpose they are currently being used. For instance it is most desirable that overcrowded conventional shelters should be replaced by smaller dwelling units allowing more privacy. Concerning the physical conditions of temporary hostels nearly 25% of them need total reconstruction within 5 years while 44% need partial reconstruction.³

The involvement of service users is an important criterion of quality as well. Several grant giving bodies require needs assessment based on the participation of service users and service user satisfaction surveys as compulsory attachments of applications.

-At what level are the quality standards being developed in your country? (national, regional, local, at the level of your own organisation or a federation of organisations)?

Quality standards are mainly being developed at national level. One of the objectives of the above mentioned EU funded project⁴ (TÁMOP 5.4.1.) is to promote the modernization of social services and social policy decision making. The project is implemented by the National Institute of Social Policy in consortium with the National Rehabilitation and Social Policy Office.

Besides the minimum quality standards included in the above mentioned legal regulations some organizations (e.g. [BMSZKI](#), [Savaria Rehab-Team Nonprofit Ltd.](#)) developed their own quality provisions.

2.3. Conditionality of funding

-Do funding bodies require minimum standards in homeless services, with strict reporting on meeting these standards? If yes, do funding bodies provide adequate funding to meet these standards?

³ Hajléktalanokért Közalapítvány BESZÁMOLÓ a hajléktalanok átmeneti szállásainak körében végzett kutatásról 2008. március, 78. o.

⁴ http://www.szmi.hu/programigazgatosag-1_9/tamop-5.4.1-modernizacios-projekt-2_30
<http://84.206.8.166/>



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Homeless service providers firstly try to meet the requirements of the relevant legal regulations and that of the controlling authorities.

The legal expenditure of the state normative support (which is the greatest resource of homeless service providers) is controlled by the Hungarian State Treasury or in special cases by the State Audit Office of Hungary. The control procedure of the regional bodies of Hungarian State Treasury shows some difference region by region within the legal framework.

The quality of professional work is monitored every second year by the Regional Methodology Centres. It is also the professional work controlled by the Public Foundation for the Homeless that regularly monitors projects financed by their resources throughout the country. As an intermediate body ESZA Social Service Nonprofit Ltd. (ESF Hungary) supervises the legal expenditure of EU funds and the implementation of indicators.

Local governments also control legal expenditure of their supplementary support.

The implementation of minimum quality standards defined in the legal regulations is controlled by the National Rehabilitation and Social Office and its Social and Guardianship Offices. (e.g. existence of compulsory documentations such as personal care plan, agreement with the service user, registers, etc.) However, the lack of professional quality of them is not sanctioned. Measuring resource use efficiency is relative and there is no unitary method. There was a national project aiming at the development of controlling procedures of social services in which homeless service providers were also involved but the final result is a bit put aside and will be replaced by results of the above mentioned EU project (TÁMOP 5.4.1.) which also works on standards.

3. Quality in the context of the specificities of homeless services

Objective: This section seeks to highlight some specificities of homeless services which should be taken into account when discussing and developing quality standards and measurement tools.

3.1. Transitional character of homeless services

- In your country, is there a different way of measuring quality in homeless services because of their short-term and emergency nature?



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If we look at the dimension of quality based on the satisfaction of service users the most common measuring method of it are anonymous, self-completion questionnaires. Service user satisfaction surveys are mainly made compulsory by EU funded projects.

When composing self-completion questionnaires it is important to simplify the questions so that service users with lower education can understand them too.

-Consultation of service users is an element of quality of the service – do emergency/transitional services in your country have specific methods for this?

Consultation of service users mainly takes place in the framework of residents' assemblies. The frequency of them depends on the related practice of service providers.

Sharing information with service users through the bulletin board of the given institution is another possible method of "consultation", however it can not really be considered as consultation by its very nature. There is a complaint box put out in some institutions in order to gather anonymous complaints from service users.

3.2. Diversity

-People who are homeless have multiple needs so services need to have room for creativity and flexibility in finding solutions – do the quality provisions in your work address this diversity?

During the winter crisis period homeless service providers have the opportunity to temporarily expand their capacity in order to meet the increased needs. In such cases the space per capita can decrease in the institutions as it is defined in the respective legal regulations. Instead of the originally defined 4 square metres per capita 3 square metres are authorized. This is when emergency situations overwrite quality standards.

3.3. Users' Participation

- Has your organisation developed specific methods to ensure effective participation of the users in spite of the unfavourable context of the often emergency character of the homeless services?

The extent of service user involvement and ensuring the conditions of participation – or even more empowerment - is very much dependant on the organizational culture and the character of the head of institution. In general



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homeless service providers do not make explicit efforts to enable service users to develop their interest enforcement capabilities.

4. Implementation of quality provisions in homeless services

Objective: this section seeks to identify how the quality provisions are implemented in countries concerned

4.1. Governance

-Who is responsible for implementing minimum standards in homeless services in your country? (homeless services' providers, funding bodies of the homeless services, local authorities etc.)

The implementation of minimum standards defined by the law is the responsibility of homeless service providers.

-Is the correct implementation of the quality provisions monitored? If yes, who is in charge of monitoring? Through which channels is it performed (i.e. activity reports, outcomes measurement, quality certification system etc.)?

Depending on the monitoring body (see point 2.3.) the findings are recorded in minutes, reports or decrees.

The occurrence of ISO certificated homeless service providers is very unique. The only organization in the country that used to have it is Savaria Rehab-Team Nonprofit Ltd. based in Szombathely. In their case the implementation of quality provisions was audited by an external auditor that has a licence required to conduct an audit. At the time of monitoring the auditor examined the vocational documentation of the organization then there was an on-site audit when the implementation of the processes defined in quality management handbooks and protocols was audited on the basis of a checklist. The summary of the findings is recorded in the audit minutes in which the occurring shortcomings are classified into three categories among which there can be shortcomings to be corrected but also very serious ones that might result in the withdrawal of the certification. In case of troubleshooting the discovered shortcomings are to be corrected within a given deadline and be sent to the auditing body which reissues the certification.

4.2. Methods

-Do homeless service providers in your country create and implement their own quality provisions without involving any external bodies?



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Homeless service providers have a vocational program for each type of service they provide. It contains both the compulsory quality standards and their own quality provisions. The extent to which the vocational program of homeless services exceeds principles and quality provisions defined in the legal regulations depends on the organizational culture and even more on how much the voluntary quality elements can be implemented without using additional financial resources.

The minimum standards of social work also defined in the Ethical Code of Social Work⁵ which includes the ethical norms determining the practice of social work with special emphasis on the relationship of the social worker and the service user.

-Are quality standards regularly reviewed in your country to adapt to changes in service provision?

Quick adaption to changes in service provision (e.g. changing profile of homeless people) can only be implemented at organizational level. The regular review of quality standards are probably done by only those few service providers that put special emphasis on the implementation of their own quality provisions as well. Concerning national level the EU funded project formerly referred to will work on the review of quality standards.

4.3. Staff training

-Are there budgets available to regularly train homeless service staff to adapt to emerging trends and needs?

Homeless service providers must make a retraining plan of their employees every second year. Employees can fulfil the retraining requirements in the framework of accredited vocational workshops or conferences as well.

The state also supports the training of employees in the framework of retraining subsidy. Homeless service providers can claim state subsidy (9000 HUF~33 EUR)/employee) to train their service staff. The total amount of the subsidy depends on the number of employees.

-Are there any training schemes to help homeless service staff to implement quality standards in their homeless services?

⁵ <http://3sz.hu/tartalom/szocialis-munka-etikai-kodexe>



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The vocational training scheme of the homeless sector has already been developed. The training conveys specific knowledge on homelessness and homeless services for the employees of service providers. Besides this there is a specific and compulsory training to be fulfilled by street outreach workers.

5. Evaluation of the existing quality provisions

Objective: this section seeks to identify how the homeless services' providers assess the quality provision and their implementation and how they define the needs in the area against the background of the factual analysis above

5.1. Organisation of homeless services

-In your opinion, is the legislation regarding the organisation of homeless services in your country appropriate?

-If not, would you recommend new or amended legislation on homeless services? Please describe how.

The development of the National Social Policy Concept is taking place as a result of which the legal framework regulation homeless services will also change. The Social Act currently in force and innumerable amended will be replaced soon by the Service Provision Act. It is supposed to abolish the current legal context which is somewhat chaotic and overregulated due to countless amendments. By unified enforcement regulations, standards and principles he aim is to create a more flexible, service centred legal framework with special focus on the service users' needs.

5.2. Quality provisions

-Do you consider the existing quality provisions to be adequate to with the reality of homeless services in your country?

- Legal regulations are not really adapted to local needs. Due to general mistrust there are too strong administrative requirements imposed on homeless service providers.

-If not, would you recommend new or amended legislation on quality in homeless services? Please describe how the legislation could be amended and what should the standards or the principles be.



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Flexible legal framework would be needed providing greater institutional autonomy. Also see point 5.1.

-Do you consider the capacity of your organisation to comply with the quality requirements sufficient? If not, what are the needs to be met?

We just can not put aside the financial criteria of the implementation of certain quality provisions. The modernization of the building stock should need significant amount of resources.

5.3. Specificities of the homeless services

-Is standardisation of quality in homeless services a positive phenomenon, or do you think that (over-)standardisation can detrimentally affect small homeless services providers?

According to some respondents of this questionnaire there should be a two-tier standards system and differentiation might be done by spatial specificities as well. Over standardisation carries real risk e.g. homeless services in small settlements could not meet the quality provisions and would be forced to end their operation. It would affect small town NGOs rather disadvantageously. Theoretically in major cities where there is sufficient number of services to be chosen by service users standardization would result in abolishing services of insufficient quality. However the reality is that except for the capital there are not enough alternatives for service users to choose from.

Several aspects of this issue is dealt with in detail in an article by Péter Győri issued in the 2009 summer edition of FEANTSA Homeless in Europe magazine ⁶.

The advantages and disadvantages of introducing quality management are discussed in detail in a [document](#)⁷ drafted in the framework of the above mentioned EU project (TÁMOP 5.4.1.)

⁶http://www.feantsa.org/files/freshstart/Communications/Homeless%20in%20Europe%20EN/PDF_2009/Homeless%20in%20Europe_Summer09_EN.pdf

⁷ A szakmai szabályozó anyagok alkalmazási lehetőségei és lehetséges illeszkedésük a minőségügyi rendszerek által támasztott elvárásokhoz, Összeállította és szerkesztette: Dr. Erdélyi István Mediconsult Kft. A Nemzeti Család- és Szociálpolitikai Intézet megbízásából <http://84.206.8.166/index.php?page=dokumentum&piller=20&dokid=278>, 16-17. o.



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-In your opinion, should there be a two-tier standards system (minimum/maximum) for homeless services to preserve flexibility when necessary (i.e. providing low-threshold services in extreme weather conditions)?

By the very nature of homeless service provision there are circumstances when the quality provisions defined in the law are overwritten by the need of life-saving and crisis intervention. This must be taken into account when developing quality standards.

-One of the criteria of quality in the provision of the homeless services is ensuring effective participation of the service users. Do you find ensuring effective participation of the users in the homeless services challenging? Is this a criterion difficult to meet in your opinion?

Ensuring effective participation of service users demands firstly intention, secondly extra efforts from the service staff. In general service providers consider only a very small proportion of service users ready for effective participation.

5.4. Implementation of quality

-Do you think that the quality standards are correctly implemented in the homeless services in your country?

There was a survey conducted by the Public Foundation for the Homeless in the framework of which the implementation of quality standards were also measured. Nearly 76% of the temporary hostels operating in the country sent back the questionnaire.

One of the questions inquired if the given service provider have an operation permit for determined or undetermined period. A temporary operation permit actually means that due to some reason its holder can not meet the quality provisions defined in the law. According to the survey findings more than one third of temporary hostels fall under this category. Only 50% of local government run temporary hostels has permanent operation permit, while NGOs are better at it and 75% have it.⁸

It was also surveyed if the living space per capita reaches the minimum 4 square metres defined by the law. This criterion is fulfilled by nearly two third of the surveyed institutions, while it remained unfulfilled in 25% of them.⁹

⁸ Hajléktalanokért Közalapítvány BESZÁMOLÓ a hajléktalanok átmeneti szállásainak körében végzett kutatásról 2008. március, 11. o.

⁹ u.a. 16. o.



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15,2% of the institutions did not employ as many employees as defined by the law.¹⁰ Concerning wheel chair accessibility only 25,8% of the surveyed institutions could totally fulfil this regulation.¹¹

As part of the same study the satisfaction of service users living in night shelters and temporary hostels were also surveyed.¹² More than 500 service users were questioned among whom 297 persons were living in night shelters, 221 persons were living in temporary hostels at the time of the survey, winter of 2007-2008. 86,6 % of them marked "true" the allegation "I feel safe in the institution", while 12,6% of them this was not true. 16,7% of service users living in night shelters did not feel safe, while only 7,7% of the respondents living in temporary hostels said the same.

27,3% of the night shelter users did not consider their personal belongings safe while only 11,8% of respondents living in temporary hostels answered the same.

23,8% of the respondents had free Internet access within the institution. 83,5% of them marked "true" the allegation "During their work service staff take into account what I need", while 13,8% did not find it true.

-In your opinion, what are key principles to consider when implementing quality in homeless services? (transparency, support, user participation, continuous review, understanding of the homeless sector, bottom-up approach, etc.)

The protection of human dignity, users' satisfaction as well as effective social and labour market integration should be in the focus of service provision. The enforcement of the right to choose from (service) alternatives as well as the implementation of effective interest enforcement is also important.

If quality is approached from the side service users there might be some analogy with hospitality where the satisfaction of the guest clearly rates the quality level of the service.

Besides relative results (e.g. instead of rough sleeping a person spends his/her nights in a night shelter) it is essential to define outcome indicators based on long term objectives to measure the quality of current services. E.g. can a homeless service provision system be considered as good quality when street outreach workers perform very well by transferring rough sleepers into shelters with good quality standards but the whole system is weak at housing solutions in the end?

¹⁰ u.a. 19.o.

¹¹ u.a.23. o.

¹² Hajléktalanokért Közalapítvány, BESZÁMOLÓ az éjjeli menedékhelyet és átmeneti szállót igénybe vevő hajléktalan emberek körében végzett kutatásról 2008. március



6. The role of the European Union

Objective: This section seeks to identify the perceptions of how the EU legislation is affecting the provision of homeless services. In the second place, it looks at what the role of the European Union should be in defining the common quality criteria.

6.1. Impact of EU legislation

-Have you encountered situations where EU rules have had a direct positive or negative impact on the functioning of services in your country?

According to some respondents there are some positive examples of EU rules such as quality provisions integrated in EU projects e.g. needs assessments, service users satisfaction surveys, accredited retraining schemes.

-Are you aware of EU legislation on public procurement and state aid?

They are likely to be familiar in detail only for colleagues took part in training on EU affairs.

-When another EU national uses a homeless service in your country, do you encounter problems with regarding to his/her entitlement to receive services?

Due to administrative requirements entitlement enforcement might be problematic.

6.2. Quality framework

-Do you think it would be useful to have a European framework of quality in homeless (emergency) services?

-Do you see a role for FEANTSA in supporting the development of quality in homeless services? (for instance by developing a set of quality principles in homeless services)

The development of quality principles can be attempted with the adequate representative participation of FEANTSA members.