

Communal Establishment Questionnaire

Northern Ireland





What do you need to do?

- Complete this questionnaire on 27 March 2011, or as soon as possible afterwards.
- Use the definitions provided in the Information Leaflet to distinguish between usual residents and visitors.
- Ensure an Individual Questionnaire is completed for each usual resident. Record the number of Individual Questionnaires issued, collected and completed online in the boxes below. You may find it helpful to use the Listing Form provided as a check list.
- Record the number of visitors staying overnight in the boxes below.
- Complete the Establishment questions overleaf.
- Sign the Declaration overleaf and hand the completed questionnaires to the Census Field Staff when they return.

Enter Individual Questionnaire and visitor counts below:

Use black or blue ink.

Questionnaires issued

Questionnaires collected

Questionnaires completed online

Visitors staying overnight



CF₄

Turn over to complete Establishment questions.





The Census - 27 March 2011

The manager or person in charge of this establishment is required by law to complete this questionnaire and ensure an Individual Questionnaire is completed for all usual residents.

Personal information is protected by law and will be kept confidential.

So help tomorrow take shape and be part of the 2011 Census.

TN Caven

Dr T N Caven Registrar General, Northern Ireland

Where can you get help?

www.census.gov.uk/ni

Census helpline 0300 0201 120

Text Relay 18001 0300 0201 170

Help is available in large print and Braille.

Establishment questions

		9
U	What is the nature of this establishment?	3 Which groups does this establishment cater for?
	Tick one box only.	Tick all that apply.
	Medical and care	Physical disability
	General hospital	Learning disability
	Mental health hospital/unit (including secure units)	Mental illness
	Other hospital	Intermediate care
	Care home without nursing	Substance misuse
	Care home with nursing	End of life care
	Sheltered housing only	Respite care
	_	Chronic illness care
	Children's home (including secure units)	Acute illness care
	Other medical and care establishment	Older people Schoolchildren
	Education	
	School	University and/or college students
	University (for example, halls of residence)	Armed Forces personnel Prisoners/offenders
	Other educational establishment	
		Asylum seekers Paying guests
	Armed Forces	Homeless people
	Defence establishment (including ships)	Nurses/doctors
	Detention	Staff
	Prison Service establishment	Seasonal/temporary workers
	Approved premises (probation/bail hostel)	Other
	Detention centre	Guidi
	Other detention establishment	Who is responsible for the management of this establishment?
	Travel or temporary accommodation	Health and Social Care body or group
	Hotel, guest house, B&B, youth hostel	District Council
	 Holiday accommodation (for example, holiday parks) 	Government department/agency
	 Hostel/temporary shelter for the homeless 	Housing Association
		Charity/voluntary organisation
	Other travel or temporary accommodation	Private owner/company
	Other	Other
	Religious establishment	Declaration This is the h
	Staff/worker accommodation only	Declaration This questionnaire has been completed to the best of my knowledge and belief.
	Other establishment	
		Signature
2	Which age group does this establishment cater for?	
	Tick all that apply.	Date Telephone number
	Aged 0 - 17	Date Telephone number
	_	We may contact you if we need to collect
	Aged 18 - 24	missing information.
	Aged 25 - 64	Census Field Staff use only
	Aged 65 and above	Persons sleeping rough

