**Supporting Statement for Paperwork Reduction Act Submissions**

**Evaluation of the Supportive Services Demonstration**

**(OMB# xxxx-xxxx)**

**Appendix G: Interview Guide for Housing Property Staff at Active Control Properties**

###### Appendix G. Interview Guide for Housing Property Staff at Active Control Properties

*Respondent is housing property staff (most likely the property manager). Items in italics are instructions for the interviewer, not to be read aloud.*

Introduction

Thank you very much for taking the time to speak with me. Abt Associates and its subcontractor L&M Policy Research has been contracted by HUD to conduct evaluation of the HUD Supportive Services Demonstration. We are speaking with property managers at a sample of HUD multifamily properties that applied to be in the demonstration.

In [MONTH YEAR] we spoke to you [OR PREDECESSOR] to gather some basic information on activities at your property. We now have the opportunity to delve more deeply into the work that you do.

Your participation in this interview is purely voluntary and you are free to skip any questions you do not wish to answer. The interview questions have been reviewed by the Office of Management and Budget (OMB) under the Paperwork Reduction Act of 1995. Public reporting burden for this collection of information is estimated at up to 150 minutes per response, but we expect this conversation will take about an hour. The OMB control number is XXXX-XXXX, expiring XX-XX-XXXX.

We will be taking notes during our discussion but will not be recording the discussion. At the end of the study, after we complete our interviews, we will provide the interview notes to HUD with individuals’ names, property names, and location names removed. We will also provide summary reports on the interviews to HUD but will not use your name or the name of the property in those summary reports. The information that we collect will be used for research purposes only, not for any audit or compliance purposes.

There may be some questions you may not be able to answer or that are more appropriate for other staff. If you are unable to answer or would prefer not to answer a question, just let me know. You are free to skip any question you do not wish to answer.

Do you have any questions about the evaluation or today’s discussion before we begin?

Background and Prior Experience

*[RQ6: Differences between treatment and control properties.]*

I’d like to start with your background and role at the property.

1. How long have you been employed at this property?
2. Overall, how many years of experience do you have as a property manager? How many years of experience do you have managing HUD housing? Housing for older adults?
3. What is your work schedule at this property? How many days and hours are you here on site?
4. What are your specific responsibilities at this property?
5. What other staff, such as maintenance and janitorial, work at this property?
6. Is there a resident council or some other type of resident leadership organization? If so, what is the role of the council? How do you interact with them?
7. Is it your goal that residents be able to live here at the property for as long as possible?
8. What do you see as the upsides and downsides of encouraging residents to age in place?
9. What do you see as your role (if any) in supporting residents as they age?
10. Have you made any improvements to the property in the last five years to help residents age in place? If so, describe.
11. What are your biggest challenges in helping residents continue to live here as they age?

*Ask questions from Part A below if the property has a service coordinator. Ask questions from Part B if the property has a nurse. Ask the questions from Part C if the property has no service coordinator but the property manager indicated on the initial questionnaire that he/she performs some of the functions of a service coordinator.*

Part A. For properties with a service coordinator

*[RQ6: Differences between treatment and control properties.]*

*Ask the questions in this section if the property has a service coordinator or indicated on the initial questionnaire that there is a partner that provides service coordinator functions. If there is no service coordinator or service coordinator partner, skip to next section.*

1. Overall, how would you characterize your level of involvement in the work that the service coordinator does with residents? Would you describe yourself as very involved, somewhat involved, minimally involved, or not involved at all?
2. On average, how often do you communicate with the service coordinator? Please describe a typical interaction. What is the mode of the communication? What issues are covered?
3. What do you see as the benefits or advantages of having a service coordinator on the property?
4. Is there anything about the service coordinator’s role that is challenging for you as a property manager? Is there anything about the service coordinator’s job description that you would change if you could?
5. Are there particular groups or types of residents that you feel are more likely or less likely to benefit from having a service coordinator? Describe.
6. Can you think of any specific examples where having a service coordinator helped a resident to avoid an unnecessary 911 call, trip to the ER, or stay in a nursing home (including readmissions Please describe those scenarios: What precipitated the crisis? Did you get involved and, if so, how? What do you think would have happened had the service coordinator not been there?
7. What are the main reasons that people leave this property? (Probe for the proportions of people leaving for different reasons, such as death, moving in with family, moving into a higher level of care, etc.)
8. Do you think that having a service coordinator has any effect on whether and why people leave the property? If so, describe.
9. Can you think of any specific examples where the service coordinator helped a resident to avoid an eviction, lease termination, or permanent transfer to a nursing facility? Please describe those scenarios: What precipitated the crisis? Did you get involved and, if so, how? What do you think would have happened had the service coordinator not been there?

Part B. For properties with a nurse

*[RQ6: Differences between treatment and control properties.]*

*Ask the questions in this section if the property has a nurse. Else skip to next section.*

1. I understand that this property has a nurse [*insert description of nurse arrangement, full or part time status from initial questionnaire]*. Is that still the case?
2. (*If the property no longer has a nurse*): If not, what happened? Do you have plans to seek the services of another nurse? [*Ask the next questions but modify to refer to the respondent’s relationship with the nurse while he/she was working with the property*]
3. Overall, how would you characterize your level of involvement in the nurse’s work with residents? Would you describe yourself as very involved, somewhat involved, minimally involved, or not involved at all?
4. On average, how often do you communicate with the nurse? Please describe a typical interaction. What is the mode of the communication? What issues are covered?
5. What do you see as the benefits or advantages of having a nurse on the property?
6. Is there anything about having a nurse on the property that is challenging for you as a property manager?
7. Can you think of any specific examples where having a nurse helped a resident to avoid an unnecessary 911 call, trip to the ER, or stay in a nursing home (including readmissions Please describe those scenarios: What precipitated the crisis? Did you get involved and, if so, how? What do you think would have happened had the nurse not been there?
8. Can you think of any specific examples where the nurse helped a resident to avoid an eviction, lease termination, or permanent transfer to a nursing facility? Please describe those scenarios: What precipitated the crisis? Did you get involved and, if so, how? What do you think would have happened had the nurse not been there?

Part C. For properties with no service coordinator

*[RQ6: Differences between treatment and control properties.]*

When we spoke before, you mentioned that you provide some types of assistance to help residents obtain the supportive services they need to continue to live independently in their homes. I’d like to talk a bit more about the work that you do.

1. You mentioned before that you provided the following types of assistance [*list from the initial questionnaire responses*]. Are you still providing those types of assistance? If not, explain.
2. Are you providing other types of assistance that we did not talk about last time? If so, what?
3. *For the types of assistance that the respondent is providing:* Please tell me a bit more about each of these types of assistance. Tell me how you work with residents.

*For each type of assistance, probe for:*

* + Number of residents provided this type of assistance; characteristics of residents assisted relative to the overall population of the property.
  + How often the property manager meets with residents and what form the meetings take (home visits, office hours, phone calls, etc.)
  + Does the assistance involve an initial needs assessment?
  + Does the assistance involve setting goals or tracking progress? Is there follow up?
  + Does the respondent use a client management system to record data related to the assistance provided?

1. (*If the property has a large percentage of LEP residents*.) How do language barriers affect the assistance that you provide residents? What steps have you taken to address language barriers?
2. Would you want to have a service coordinator on the property if the funding were available? What would you want the service coordinator to be able to do? Would you have any hesitations about having a service coordinator on the property?

Programs for Residents

*[RQ6: Differences between treatment and control properties.]*

From the last time we spoke, it looks like the following programs were available to residents to support their health and wellness: [*provide a copy of the list from the initial questionnaire.*]

1. Has anything changed since we last spoke? Have you added any programs? Have any programs been discontinued?
2. Are you involved in decisions about which programs and services to offer on the property? If so, what factors influence your decisions about which programs to offer on site, versus off site?
3. How do you obtain resident feedback on programming?
4. Is there any type of programming or services that you would like to offer residents but can’t at this time? If so, what programs? Why can’t they be offered (e.g., Too expensive? Not available in the community?)

Community Partnerships

*[RQ6: Differences between treatment and control properties.]*

The last time we spoke, you provided a list of organizations that you partner with to address residents’ needs. At that time you worked with about [INSERT NUMBER] partners. I’d like to review the list of partners in each category and talk about the status of those partnerships.[[1]](#footnote-2)

1. Has anything changed since we last spoke? Have you added any partners? Have any partners dropped off? *(Interviewer will provide the list of partners from the initial questionnaire to the respondent ahead of the interview so that they can prepare.)*

I’d like to talk about different types of partnerships. Let’s start with facilities partners. Facilities include hospitals, nursing homes, and inpatient rehab facilities. Last time we spoke you had X facilities partners. It looks like you have X facilities partners.

1. How easy or hard has it been to establish these types of partnerships in your community? What are the challenges to identifying partners? What are the challenges to getting partnerships off the ground?

*For each partner, ask the following questions:*

1. How often do you communicate? By what methods (meetings, email, phone)? With whom (position not person’s name)? What issues are discussed?
2. Do you exchange data on residents? What types of data?
3. What is the goal of the partnership? Are you working on specific programs and services for residents?
4. How formal is the partnership? Do you have an informal relationship? Letter of agreement? Memorandum of Understanding? Contract?

Let’s talk about the **primary care practice** partners. These include independent physicians or group practices, gerontologists, and other providers of healthcare services that aren’t facilities. It looks like you have X primary care partners.

1. How easy or hard has it been to establish these types of partnerships in your community? What are the challenges to identifying partners? What are the challenges to getting partnerships off the ground?

*For each partner, ask the following questions:*

1. How often do you communicate? By what methods (meetings, email, phone)? With whom (position not person’s name)? What issues are discussed?
2. Do you exchange data on residents? What types of data?
3. What is the goal of the partnership? Are you working on specific programs and services for residents?
4. How formal is the partnership? Do you have an informal relationship? Letter of agreement? Memorandum of Understanding? Contract?

Let’s talk about **other agency partnerships and referral partners**. It looks like you have X other partners.

1. How easy or hard has it been to establish these types of partnerships in your community? What are the challenges to identifying partners? What are the challenges to getting partnerships off the ground?

*For each partner, ask the following questions:*

1. How often do you communicate? By what methods (meetings, email, phone)? With whom (position not person’s name)? What issues are discussed?
2. Do you exchange data on residents? What types of data?
3. What is the goal of the partnership? Are you working on specific programs and services for residents?
4. How formal is the partnership? Do you have an informal relationship? Letter of agreement? Memorandum of Understanding? Contract?

That’s all I have. Thank you very much for your time. Is there anything else you’d like to add?

**Thank you very much for your time.**

1. *Note to reviewers:* We would not expect that a property that does not have a service coordinator would have as extensive partnerships as the IWISH properties or active control properties with service coordinators. Nevertheless, we will ask these questions to make sure that we collect comprehensive information on the partnerships that do exist. [↑](#footnote-ref-2)