

Public Housing Agency Survey

The U.S. Department of Housing and Urban Development (HUD) has contracted with the Urban Institute, with Chapin Hall at the University of Chicago as their subcontractor, to learn how communities are implementing the Family Unification Program – Family Self-Sufficiency (FUP-FSS) Demonstration to serve youth who were formerly in foster care. The Urban Institute is a nonprofit, nonpartisan research organization based in Washington, DC that conducts research on social policy and practice. The information gathered for the evaluation will be used to help HUD understand how FUP-FSS has been implemented; the effectiveness of partnerships among the participating housing authorities, public child welfare agencies, and other organizations that collaborate on the Demonstration; the agencies' experiences with implementation; and short-term outcomes for participating youth. We are not evaluating your agency or its programs.

As part of this project, the research team is conducting a **voluntary** web-based survey of public housing agencies (PHAs) and public child welfare agencies (PCWAs) in communities that are participating in the FUP-FSS Demonstration. Your PHA was selected because your agency is participating in the FUP-FSS Demonstration. All responses will be kept confidential, meaning we will not disclose them in any way that would identify you.

The purpose of this survey is to learn how FUP vouchers are being used with FSS services to address the needs of youth who were formerly in foster care, and to identify any unique benefits or challenges your PHA has experienced implementing FUP-FSS and serving this population in partnership with your PCWA, CoC, and/or other community service partners. It includes questions about how you have implemented the FUP-FSS Demonstration; your agency's collaboration with your PCWA, CoC, and other local partners; the way FUP and FUP-FSS eligible youth are identified and referred; and your experiences administering FUP-FSS services for youth participants.

If your agency has contracted with separate organization(s) to administer FUP for youth or FUP-FSS, please note that some questions may be better addressed by your contractors. You may wish to ask them to provide you with the relevant information. Similarly, if other staff within your agency work with FUP-FSS participants, you may wish to consult with these staff to complete relevant survey questions.

This survey should take about 30 minutes to complete. If you cannot complete the survey in one sitting, you may save your place in the survey and finish it at a later time. Please note, however, that the survey needs to be completed by _____. **Participation in this survey is voluntary. Responses will be kept confidential.**

If you decide to participate, thank you in advance. Your responses will help HUD better understand how communities are using the FUP-FSS Demonstration to address the needs of youth who have aged out of foster care.

Please contact Michael Pergamit at (202) 261-5276 or mpergamit@urban.org, at the Urban Institute with any questions about the survey.

An agency may not conduct or sponsor, and a person is not required to respond to, a collection of information unless it displays a currently valid OMB control number. The OMB number for this information collection is 2528-0XXX and the expiration date is XX/XX/XXXX.

A. CONTACT INFORMATION AND SCREENER

I. PHA AND RESPONDENT BACKGROUND INFORMATION (FOR PHA RESPONDENT)

1. Public Housing Agency (PHA) Name
2. PHA ID Number
3. So that we know who in [FILL WITH Q1] is the primary person coordinating responses to this survey, please provide your contact information:

Name

Position

Phone Number

Email

4. How long have you been employed by [FILL WITH Q1] (in any position or title)?

5. A single PHA may partner with multiple Public Child Welfare Agencies (PCWAs) to administer the Family Unification Program - Family Self-Sufficiency Demonstration (FUP-FSS). How many PCWAs does your PHA currently partner with to administer the FUP-FSS Demonstration?

[IF Q5 =1 SKIP to Q8]

6. [IF Q5>1] What are the names of those PCWAs? Please enter all.

- A.
- B.
- C.
- D.
- E.
- F.
- G.

7. Among the PCWA partners that you identified, which one has referred the most youth to the FUP-FSS Demonstration? For the purpose of this survey, questions related to your PCWA partner will refer to this PCWA.

Select one.

- A.
- B.
- C.
- D.
- E.
- F.
- G.

II. BACKGROUND ON THE PHA'S FAMILY UNIFICATION PROGRAM (FUP)

8. Has your agency EVER issued a FUP voucher to a youth?

- Yes
- No SKIP TO Q12

9. What was the MOST RECENT year in which your agency, or an agency you work with to administer the FUP, issued a FUP voucher to a youth?

YEAR

10. As of [TODAY'S DATE], how many FUP-eligible youth are currently enrolled in the FUP?

NUMBER OF VOUCHERS

11. Do you provide FUP-eligible youth with tenant-based vouchers, project-based assistance, or both?

- Tenant-based
- Project-based
- Both

12. (IF Q8=NO): Why hasn't your agency issued a FUP voucher to a youth?

Select all that apply

- Too few youth age out of foster care in this community
- Housing needs of youth who age out of foster care are being met in other ways
- Agency prefers to devote all of its FUP vouchers to families
- 36-month time limit for FUP-eligible youth would create an excessive burden for your agency
- PCWA does not have the resources to provide the required support services

- Lack of or weak working relationship with a PCWA
- Lack of referrals from a PCWA
- Any other reasons (SPECIFY)
- Don't know

III. BACKGROUND ON THE FUP-FSS DEMONSTRATION

The questions in this next section ask about your FUP-FSS Demonstration.

13. Has your agency ever enrolled eligible youth in the FUP-FSS Demonstration?

- Yes
- No SKIP TO Q16
- Don't know SKIP TO END

14. As of [TODAY'S DATE] How many youth have enrolled in the FUP-FSS Demonstration?

NUMBER OF FUP-FSS DEMO PARTICIPANTS

15. When did your agency first begin enrolling youth in the FUP-FSS Demonstration?

MONTH/YEAR

- Don't know

16. (IF Q13=No): From your perspective, why haven't youth been enrolled in the FUP-FSS Demonstration to date?

Select all that apply

- [PHA's] FSS program is not equipped to serve the needs of youth exiting foster care
- Self-sufficiency needs of youth who age out of foster care are being met in other ways
- The community does not have the resources to provide the required support services
- To date, FUP-eligible youth have not opted to participate in the FUP-FSS Demonstration
- Any other reasons (SPECIFY)
- Don't know

B. CURRENT FUP FOR YOUTH AND FUP-FSS MODULE

I. PHA'S HISTORICAL USE OF FUP FOR YOUTH AND THE FUP-FSS DEMONSTRATION

The questions in this section ask about your agency's history with FUP.

17. Does your PHA administer the FUP or do you contract with another organization to administer it?

- Your PHA administers the FUP
- Another organization administers the FUP

If another agency administers your FUP, please note that some questions may be better addressed by that contractor. You may wish to ask your contractor to provide the relevant information.

18. What are the reasons your agency decided to serve FUP-eligible youth?

Select all that apply

- HUD requirement that FUP vouchers be used to serve FUP-eligible youth
- Many youth age out of foster care in this community
- Housing needs of former foster youth are not being met in other ways in your community
- Homelessness among former foster youth is a big problem in your community
- Addressing the housing needs of former foster youth is a priority for your agency or your community
- Addressing the housing needs of youth generally is a priority for your agency or your community
- Addressing the housing needs of former foster youth is a priority for the PCWA
- Linking supportive services to subsidized housing is a priority for your agency
- PCWA has the resources to provide the required support services
- Other (SPECIFY)
- Don't know

The questions in this section ask about your agency's history with the FUP-FSS Demonstration.

19. Does your PHA administer the FSS Program or do you contract with another organization to administer it?

- Your PHA administers the FSS Program
- Another organization administers the FSS Program

If another agency administers your FSS Program, please note that some questions may be better addressed by that contractor. You may wish to ask your contractor to provide the relevant information.

20. What are the reasons your agency decided to join the FUP-FSS Demonstration?

Select all that apply

- The opportunity of an extended FUP-FSS Demonstration voucher of up to 5 years
- Self-sufficiency service needs of former foster youth are not being met in other ways in your community

- Short-term housing without additional self-sufficiency supports won't reduce the probability of homelessness among former foster youth
- Addressing the service needs of former foster youth is a priority for your agency or your community
- Addressing the service needs of former foster youth is a priority for the PCWA
- Other (SPECIFY)
- Don't know

II. FUP and FUP-FSS ADMINISTRATION

A. FUP IDENTIFICATION, REFERRAL, AND ELIGIBILITY

The next few questions are about the FUP referral process and FUP eligibility determination.

21. Does [PCWA Name] pre-screen youth for voucher eligibility prior to referring them to your agency?

- Yes
 No
 Don't know

22. Does your agency have an expedited or streamlined eligibility determination process for FUP-eligible youth who have been referred by [PCWA Name]?

- Yes
 No

23. Does your agency exclude youth from eligibility for FUP vouchers for any of the following reasons?

	YES	NO
a. Rent or utility arrears	1 <input type="radio"/>	0 <input type="radio"/>
b. Drug convictions	1 <input type="radio"/>	0 <input type="radio"/>
c. Other types of criminal convictions	1 <input type="radio"/>	0 <input type="radio"/>

24. How many referrals for FUP-eligible youth did your agency receive from [PCWA Name] since [FILL AWARD DATE from MODULE A Q9]?

NUMBER OF REFERRALS

25. How many of the FUP-eligible youth *who were referred to your agency since [FILL AWARD DATE from MODULE A Q9]* were found to be eligible for a FUP voucher?

NUMBER OF REFERRALS WHO WERE ELIGIBLE

26. [IF Module A Q9 <= 2019] Thinking back to the previous year, what percentage of youth *who were issued a FUP voucher successfully leased-up since [FILL AWARD DATE from MODULE A Q9]*?

PERCENTAGE OF YOUTH ISSUED A VOUCHER WHO LEASED UP

27. What are the most common reasons youth who are referred don't lease-up?

Select all that apply

- Do not complete application
 Application is denied

- Do not show up for voucher briefing
- Do not lease up before voucher expires
- Other (SPECIFY)

B. FUP HOUSING SEARCH AND SELECTION

The next set of questions asks about the housing search process for FUP-eligible youth who have had a voucher briefing.

28. How much time is a youth initially given to lease-up once a FUP voucher has been issued? We are interested in the initial voucher search term for FUP-eligible youth.

Select one only

- 60 days
- 90 days
- 120 days
- More than 120 days

29. What proportion of FUP-eligible youth is able to successfully lease up before their initial voucher search term expires?

Select one only

- Almost all
- More than half
- About half
- Less than half
- Almost never
- Don't know

30. How often does your agency grant an extension to FUP-eligible youth whose initial voucher search term is going to expire?

Select one only

- Almost always
- More than half of the time
- About half of the time
- Less than half of the time
- Almost never
- Don't know

31. How does the amount of time youth who have been issued a FUP voucher typically need to lease up compare to the amount of time standard Section 8 HCV Program participants need?

Select one only

- Youth typically require MORE time to lease up
- Youth typically require ABOUT THE SAME amount of time to lease-up

- Youth typically require LESS time to lease up
- Don't know

32. Which of the following types of housing search assistance does your agency (or a partner provider) provide to youth who have been issued a FUP voucher? Please do not include assistance that is only provided by [PCWA Name] or [CoC NAME].

	YES	NO
a. Provide information about different neighborhoods	1 <input type="radio"/>	0 <input type="radio"/>
b. Take youth on neighborhood tours	1 <input type="radio"/>	0 <input type="radio"/>
c. Transport youth to visit housing units	1 <input type="radio"/>	0 <input type="radio"/>
d. Provide a listing of vacant rental units	1 <input type="radio"/>	0 <input type="radio"/>
e. Refer youth to property managers/landlords known to accept FUP vouchers	1 <input type="radio"/>	0 <input type="radio"/>
f. Work with landlords/property managers to help youth secure housing	1 <input type="radio"/>	0 <input type="radio"/>
g. Provide information about tenant rights and responsibilities	1 <input type="radio"/>	0 <input type="radio"/>
h. Provide information about subsidized housing including eligibility requirements	1 <input type="radio"/>	0 <input type="radio"/>
i. Provide information about public transportation services	1 <input type="radio"/>	0 <input type="radio"/>
j. Help youth locate housing near school or work	1 <input type="radio"/>	0 <input type="radio"/>
k. Other (SPECIFY) <div style="border: 1px solid black; height: 20px; width: 100%; margin-top: 5px;"></div>	1 <input type="radio"/>	2 <input type="radio"/>

33. Does your agency provide housing search assistance to youth who have been issued a FUP voucher that it does NOT also provide to standard Section 8 HCV Program participants? Please do not include housing search assistance that is only provided by [PCWA Name] or [CoC NAME].

- Yes
- No
- Don't know

34. Does your agency provide FUP-eligible youth with:

	YES	NO
a. Pre-move counseling?	1 <input type="radio"/>	0 <input type="radio"/>
b. Post-move counseling?	1 <input type="radio"/>	0 <input type="radio"/>

35. [IF Q34a=1 OR Q34b=1 THEN ASK] What does this counseling include?

	YES	NO
a. Information about tenant rights and responsibilities	1 <input type="radio"/>	0 <input type="radio"/>
b. Information about budgeting	1 <input type="radio"/>	0 <input type="radio"/>
c. Information about credit	1 <input type="radio"/>	0 <input type="radio"/>
d. Information about landlord mediation	1 <input type="radio"/>	0 <input type="radio"/>
e. Information about the benefits of living in low-poverty areas (low-poverty areas are areas where the poverty rate is 10% or less)	1 <input type="radio"/>	0 <input type="radio"/>
f. Other (SPECIFY) <input type="text"/>	1 <input type="radio"/>	2 <input type="radio"/>

C. FUP-FSS IDENTIFICATION, REFERRAL AND ELIGIBILITY

36. How do FUP-eligible youth learn about the FUP-FSS Demonstration?

Select all that apply

	YES	NO
a. Information is provided by the PCWA before youth leave foster care	1 <input type="radio"/>	0 <input type="radio"/>
b. Information is provided in voucher briefings/orientations	1 <input type="radio"/>	0 <input type="radio"/>
c. Information is provided at recertification	1 <input type="radio"/>	0 <input type="radio"/>
d. Direct outreach to FUP-eligible youth about FUP-FSS	1 <input type="radio"/>	0 <input type="radio"/>
e. Recruitment/referral through partner organizations	1 <input type="radio"/>	0 <input type="radio"/>
f. Other (Please specify) <input type="text"/>	1 <input type="radio"/>	0 <input type="radio"/>

37. Is the FUP-FSS Demonstration offered to all FUP-eligible youth?

- Yes
- No
- Don't know

38. Does your PHA have specific FUP-FSS eligibility requirements for FUP-eligible youth?

- Yes
- No SKIP TO Q37
- Don't know SKIP TO 37

39. Which youth are eligible to participate in the FUP-FSS Demonstration?

Select all that apply

	YES	NO
a. New FUP youth who receive voucher issuances	1 <input type="radio"/>	0 <input type="radio"/>

- | | | |
|---|-------------------------|-------------------------|
| b. Existing FUP youth participants | 1 <input type="radio"/> | 0 <input type="radio"/> |
| c. FUP-eligible youth that meet specific service needs such as education or employment assistance | 1 <input type="radio"/> | 0 <input type="radio"/> |

D. FUP YOUTH AND FUP-FSS STAFFING

40. Is a dedicated [PHA name] staff person assigned to FUP youth?

- Yes
- No
- Don't know

41. Is a dedicated [PHA name] staff person assigned to the FUP-FSS Demonstration?

- Yes
- No
- Don't know

42. Do FSS and FUP voucher staff coordinate to serve FUP-FSS participating youth?

- Yes
- No
- Don't know
- N/A (same person)

43. How frequently do FUP and FSS staff communicate about FUP-FSS participants?

- More than once a month
- Monthly
- Quarterly
- Bi-annually
- Annually
- Other
- Don't know
- N/A (same person)

E. FUP-FSS DATA COLLECTION

44. How do case managers track their interactions with FUP-FSS youth?

- In HUD 50058 reporting
- In an internal case management system
- Case managers track their interactions manually
- Case managers do not track their interactions with FUP-FSS participants
- Other (Specify)

45. How often are data for FUP-FSS participants recorded?

- More than once a month
- Monthly
- Quarterly
- Bi-annually
- Annually
- After every interaction with a case manager
- Don't know
- Other:

46. What types of data are tracked for FUP-FSS participants

Select all that apply

- Enrollment in FUP-FSS
- FSS service use
- Referrals to FSS services
- Progress towards individual FSS goals
- Escrow account balances
- The data tracked varies by participant
- We do not track data for FUP-FSS participants
- Other:

F. FSS SERVICES AVAILABLE TO FUP-FSS DEMONSTRATION PARTICIPANTS

47. How frequently do FSS case managers meet with FUP-FSS Demonstration participants?

- More than once a month
- Monthly
- Quarterly
- Bi-annually
- Annually
- Varies by participant
- Don't know
- Other:

48. How do FSS case managers interact with participants?

Select all that apply

- In-person
- By phone
- By email
- Through written progress report submissions from the FSS participants
- Other
- Don't know

49. Which of the following self-sufficiency related services does your agency (or a partner provider) provide to FUP-FSS Demonstration participants?

	YES	NO	DON'T KNOW
a. Financial counseling and management	1 <input type="radio"/>	0 <input type="radio"/>	2 <input type="radio"/>
b. Job search assistance	1 <input type="radio"/>	0 <input type="radio"/>	2 <input type="radio"/>
c. Education and vocational training	1 <input type="radio"/>	0 <input type="radio"/>	2 <input type="radio"/>
d. Homeownership preparation	1 <input type="radio"/>	0 <input type="radio"/>	2 <input type="radio"/>
e. Long term housing planning	1 <input type="radio"/>	0 <input type="radio"/>	2 <input type="radio"/>
f. Job training	1 <input type="radio"/>	0 <input type="radio"/>	2 <input type="radio"/>
g. Childcare assistance	1 <input type="radio"/>	0 <input type="radio"/>	2 <input type="radio"/>
h. Transportation assistance	1 <input type="radio"/>	0 <input type="radio"/>	2 <input type="radio"/>
i. Case management	1 <input type="radio"/>	0 <input type="radio"/>	2 <input type="radio"/>

j. Other (SPECIFY) <input data-bbox="253 233 935 285" type="text"/>	1 <input type="radio"/>	0 <input type="radio"/>	2 <input type="radio"/>
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50. Has your agency altered your FSS services to meet the needs of FUP-FSS participating youth?

- Yes
- No SKIP TO Q52
- Don't know SKIP TO Q52

51. How has [PHA] altered its FSS services to meet the needs of FUP-FSS participating youth?

	YES	NO
a. Developed additional partnerships with community service providers to meet FUP-FSS youth needs	1 <input type="radio"/>	0 <input type="radio"/>
b. Changed frequency of meetings with FSS case managers for FUP-FSS participants	1 <input type="radio"/>	0 <input type="radio"/>
c. Altered mode of interaction between case managers and FUP-FSS youth	1 <input type="radio"/>	0 <input type="radio"/>
d. Adapted Individual Training and Services Plan (ITSP) goal-setting process for FUP-FSS youth	1 <input type="radio"/>	0 <input type="radio"/>
e. Adapted graduation requirements for FUP-FSS youth	1 <input type="radio"/>	0 <input type="radio"/>
f. Other <input data-bbox="204 1136 886 1188" type="text"/>	1 <input type="radio"/>	0 <input type="radio"/>

G. Exiting FUP-FSS Assistance

The next set of questions is about the period just before and after FUP-eligible youth reach their time limit on the receipt of housing assistance. If youth are participating in the FUP-FSS Demonstration, that time limit is the length of the FSS Contract of Participation (typically five years). Otherwise that time limit is 36 months.

52. How often do youth who are not participating in the FUP-FSS Demonstration and are approaching that 36-month limit enter the FUP-FSS Demonstration to extend their eligibility for housing assistance payments?

- Never
- Occasionally
- Frequently
- Always or almost always
- Don't know

53. Which of the following does your PHA do for FUP youth not participating in the FUP-FSS Demonstration as they approach their 36-month limit?

Please do NOT include counseling or other assistance that the PCWA provides.

	YES	NO
a. Provide information about other housing programs available through your agency	1 <input type="radio"/>	0 <input type="radio"/>
b. Provide information about housing programs administered by community-based agencies	1 <input type="radio"/>	0 <input type="radio"/>
c. Provide information about different neighborhoods	1 <input type="radio"/>	0 <input type="radio"/>
d. Take youth on neighborhood tours	1 <input type="radio"/>	0 <input type="radio"/>
e. Transport youth to visit housing units	1 <input type="radio"/>	0 <input type="radio"/>
f. Provide listings of vacant rental units	1 <input type="radio"/>	0 <input type="radio"/>
g. Refer youth to property managers/landlords	1 <input type="radio"/>	0 <input type="radio"/>
h. Other (SPECIFY) <input type="text"/>	1 <input type="radio"/>	0 <input type="radio"/>

54. [IF Q53a – Q53h = 1] Does your agency or another entity with which your agency contracts provide that same counseling or assistance to FUP-FSS participants as they approach the end of their FSS Contract of Participation?

- Yes
- No
- Don't know

III. OTHER HOUSING OPTIONS FOR FOSTER YOUTH AGING OUT

The next set of questions is about your public housing and Section 8 Housing Choice Voucher waiting lists.

A. PUBLIC HOUSING

55. Does your agency currently administer a public housing program?

- Yes
- No SKIP TO Q62
- Don't know SKIP TO Q62

56. Has your agency established local preference categories for its public housing waiting list?

- Yes
- No SKIP TO Q62
- Don't know SKIP TO Q62

57. Does your agency have a local preference on its public housing waiting list for youth who have aged out of foster care?

- Yes
- No SKIP TO Q62

58. Is there a limit on the number of youth who have aged out of foster care who can be given preference on the public housing waiting list?

- Yes
- No SKIP TO Q62

59. What is that limit?

LIMIT ON YOUTH AGED OUT OF FOSTER CARE

60. [IF Q56=1] Does your agency rank order preferences to establish a hierarchy of applicants within your system of preferences?

- Yes
- No SKIP TO Q62

61. [IF Q60=YES] Where do youth who have aged out of foster care fall in the ranking of preference categories?

Select one only

- Top third
- Middle third
- Bottom third

B. SECTION 8 HOUSING CHOICE VOUCHERS

62. Has your agency established local preference categories for its Section 8 Housing Choice Voucher program waiting list?

- Yes
- No SKIP TO Q66

63. Does your agency have a local preference on its Section 8 Housing Choice Voucher waiting list for youth who have aged out of foster care?

- Yes
- No SKIP TO Q66

64. Is there a limit on the number of youth who have aged out of foster care who can be given preference on the Section 8 Housing Choice Voucher waiting list?

- Yes
- No SKIP TO Q66

65. What is that limit?

LIMIT ON YOUTH AGED OUT OF FOSTER CARE

66. How would you describe the current status of your agency's Section 8 HCV waiting list?

Select one only

- Completely open (i.e., accepting applications)
- Open for some groups
- Completely closed (i.e., not accepting applications)

67. How many months has your agency's Section 8 HCV waiting list been [FILL RESPONSE FROM Q65]?

MONTHS

IV. PROGRESS AND CHALLENGES USING FUP and FUP-FSS

The questions in this section ask about the challenges your agency has faced and the progress it has made in serving FUP-eligible youth and implementing the FUP-FSS Demonstration.

68. Below is a list of factors that may affect your agency's ability to serve FUP-eligible youth. Please indicate how much of a challenge each factor presents/has presented to your agency.

	<i>Select one per row</i>		
	NOT A CHALLENGE	SOMEWHAT OF A CHALLENGE	MAJOR CHALLENGE
a. Need to provide vouchers to families limits vouchers for youth	1 <input type="radio"/>	2 <input type="radio"/>	3 <input type="radio"/>
b. Availability of affordable rental housing	1 <input type="radio"/>	2 <input type="radio"/>	3 <input type="radio"/>
c. Availability of quality housing	1 <input type="radio"/>	2 <input type="radio"/>	3 <input type="radio"/>
d. The 36-month time limit on FUP youth assistance	1 <input type="radio"/>	2 <input type="radio"/>	3 <input type="radio"/>
e. Coordination with [PCWA NAME]	1 <input type="radio"/>	2 <input type="radio"/>	3 <input type="radio"/>
f. Coordination with [CoC NAME]	1 <input type="radio"/>	2 <input type="radio"/>	3 <input type="radio"/>
g. Administrative costs	1 <input type="radio"/>	2 <input type="radio"/>	3 <input type="radio"/>
h. Service provision costs	1 <input type="radio"/>	2 <input type="radio"/>	3 <input type="radio"/>
i. Staffing resources	1 <input type="radio"/>	2 <input type="radio"/>	3 <input type="radio"/>
j. Wait list procedures and administration	1 <input type="radio"/>	2 <input type="radio"/>	3 <input type="radio"/>
k. Relationships with landlords/property managers	1 <input type="radio"/>	2 <input type="radio"/>	3 <input type="radio"/>
l. Duration of the voucher application process	1 <input type="radio"/>	2 <input type="radio"/>	3 <input type="radio"/>
m. Duration of the housing search process	1 <input type="radio"/>	2 <input type="radio"/>	3 <input type="radio"/>
n. Complexity of leasing process (for initial units and unit changes)	1 <input type="radio"/>	2 <input type="radio"/>	3 <input type="radio"/>
o. Not enough vouchers available for youth	1 <input type="radio"/>	2 <input type="radio"/>	3 <input type="radio"/>
p. Other (SPECIFY) <input type="text"/>	1 <input type="radio"/>	2 <input type="radio"/>	3 <input type="radio"/>

69. In your opinion, has FUP-FSS participation by eligible youth met [PHA's] initial expectations?

- Yes
- No
- Don't know

70. Below is a list of factors that may affect your agency's ability to implement the FUP-FSS Demonstration. Please indicate how much of a challenge each factor presents/has presented to your agency.

	<i>Select one per row</i>		
	NOT A CHALLENGE	SOMEWHAT OF A CHALLENGE	MAJOR CHALLENGE
a. The number of FUP-eligible youth referred to [PHA]	1 <input type="radio"/>	2 <input type="radio"/>	3 <input type="radio"/>
b. Difficulty recruiting FUP youth participants into the FUP-FSS Demonstration	1 <input type="radio"/>	2 <input type="radio"/>	3 <input type="radio"/>
c. FUP-eligible youth do not want to participate in the FUP-FSS Demonstration	1 <input type="radio"/>	2 <input type="radio"/>	3 <input type="radio"/>
d. Limited capacity of [PHA's] FSS program to accept more participants	1 <input type="radio"/>	2 <input type="radio"/>	3 <input type="radio"/>
e. Lack of appropriate self-sufficiency services in the community to meet FUP youth needs	1 <input type="radio"/>	2 <input type="radio"/>	3 <input type="radio"/>
f. Other (SPECIFY) <div style="border: 1px solid black; height: 20px; width: 300px; margin-top: 5px;"></div>	1 <input type="radio"/>	2 <input type="radio"/>	3 <input type="radio"/>

C. PARTNER PCWA: CONTACT INFORMATION AND COLLABORATION

I. PARTNER PCWA COLLABORATION

The questions in this section ask about your agency's partner Public Child Welfare Agency (PCWA).

[If Q5>1 SKIP to Q72]

71. We have the following information about the contact at your partner PCWA. Please review it and let us know if it is correct.

Name: [PCWA NAME]

Contact Person: [NAME OF PCWA CONTACT PERSON]

Title: [TITLE OF PCWA CONTACT PERSON]

Telephone Number: [TELEPHONE NUMBER OF PCWA CONTACT PERSON]

Email Address: [EMAIL ADDRESS OF PCWA CONTACT PERSON]

Is all of the above information correct?

- Yes SKIP TO Q77
- No
- Don't know

72. What is the name of your partner public child welfare agency (PCWA)? If you partner with more than one PCWA, please write the name of the agency that has referred the most youth to the FUP-FSS Demonstration. For the purpose of this survey, questions related to your PCWA partner will refer to this PCWA.

73. Who is your contact person at the PCWA? Please indicate below the person at your partner PCWA that you contact the most.

74. What is this person's title/position?

75. What is your contact person's telephone number?

76. What is your contact person's email address?

The next few questions are about your agency's collaboration with your PCWA partner. It is possible that your agency may contract, partner, or have other relationships with outside agencies to help provide services. We will refer to all of these outside agencies as partner agencies or partner providers.

77. How familiar are you with each of the following?

Select one per row

	VER Y	SOMEWHA T	NOT AT ALL
a. Characteristics of youth who age out of foster care and their housing needs	2 <input type="radio"/>	1 <input type="radio"/>	0 <input type="radio"/>
b. [PCWA Name]'s procedures for identifying FUP-eligible youth	2 <input type="radio"/>	1 <input type="radio"/>	0 <input type="radio"/>
c. [PCWA Name]'s procedures for referring FUP-eligible youth to your agency	2 <input type="radio"/>	1 <input type="radio"/>	0 <input type="radio"/>
d. Types of housing search assistance provided to FUP-eligible youth by [PCWA Name] or partner providers	2 <input type="radio"/>	1 <input type="radio"/>	0 <input type="radio"/>
e. Types of supportive services provided to FUP-eligible youth by [PCWA Name]'s or partner providers	2 <input type="radio"/>	1 <input type="radio"/>	0 <input type="radio"/>

78. On which of the following topics does [PCWA Name] provide your staff with training?

	YES	NO
a. Characteristics of youth who age out of foster care and their housing or other service needs	1 <input type="radio"/>	0 <input type="radio"/>
b. How [PCWA Name] identifies FUP-eligible youth	1 <input type="radio"/>	0 <input type="radio"/>
c. How [PCWA Name] refers FUP-eligible youth to your agency	1 <input type="radio"/>	0 <input type="radio"/>
d. Types of housing search assistance provided to FUP-eligible youth by [PCWA Name] or partner providers	1 <input type="radio"/>	0 <input type="radio"/>
e. Types of supportive services provided to FUP-eligible youth by [PCWA Name] or partner providers	1 <input type="radio"/>	0 <input type="radio"/>
f. Other (SPECIFY) <input type="text"/>	1 <input type="radio"/>	0 <input type="radio"/>

79. [IF ANY OF MODULE C Q78a THROUGH Q78f=YES, THEN ASK] How often does a training occur?

Select one only

- Once after vouchers were awarded
- Annually
- Twice a year
- Quarterly
- More than once per quarter
- Don't know

80. On which of the following topics does your staff provide [PCWA Name] with training?

	YES	NO
a. FUP voucher eligibility	1 <input type="radio"/>	0 <input type="radio"/>
b. Other FUP requirements	1 <input type="radio"/>	0 <input type="radio"/>
c. Housing search and lease-up processes within the FUP	1 <input type="radio"/>	0 <input type="radio"/>
d. Tracking and reporting requirements associated with the FUP	1 <input type="radio"/>	0 <input type="radio"/>
e. Overview of the FUP-FSS demonstration program	1 <input type="radio"/>	0 <input type="radio"/>
f. FUP-FSS extended voucher timeline	1 <input type="radio"/>	0 <input type="radio"/>
g. FSS Contract of Participation (CoP)	1 <input type="radio"/>	0 <input type="radio"/>
h. FSS Individual Training and Services Plan (ITSP)	1 <input type="radio"/>	0 <input type="radio"/>
i. FSS escrow account	1 <input type="radio"/>	0 <input type="radio"/>
j. Other (SPECIFY) <div style="border: 1px solid black; height: 20px; width: 100%; margin-top: 5px;"></div>	1 <input type="radio"/>	0 <input type="radio"/>

81. [IF ANY OF MODULE C Q80a THROUGH Q80j=YES, THEN ASK] How often does a training occur?*Select one only*

- Once after vouchers were awarded
- Annually
- Twice a year
- Quarterly
- More than once per quarter
- Don't know

82. At any point since [FILL AWARD DATE from MODULE A Q9], has your agency had regular meetings with [PCWA Name] about serving FUP or FUP-FSS eligible youth?*Select all that apply*

- Yes, on FUP generally.
- Yes, on the FUP-FSS Demonstration program.
- No, we have not had regular meetings. SKIP TO 85.

83. [IF Q82=YES on FUP generally] Since [FILL AWARD DATE from MODULE A Q9], how often have the FUP meetings been held? If the frequency of these meetings has changed, think back to when you were meeting most regularly.*Select one only*

- Weekly
- Monthly

- Quarterly
- Twice a year
- Annually
- Other (SPECIFY)

84. [IF Q82=YES on FUP-FSS] Since [FILL AWARD DATE from MODULE A Q9], how often have the FUP-FSS meetings been held? If the frequency of these meetings has changed, think back to when you were meeting most regularly.

Select one only

- Weekly
- Monthly
- Quarterly
- Twice a year
- Annually
- Other (SPECIFY)

85. Apart from any regular meetings, since [FILL AWARD DATE from MODULE A Q9], how often has your agency communicated with [PCWA Name] about serving FUP-eligible youth generally (either by phone, email, or in-person)? If the frequency of this communication has changed, think back to when you were communicating most regularly.

Select one only

- Daily
- Weekly
- Monthly
- Quarterly
- Other (SPECIFY)

85a. Since [FILL AWARD DATE from MODULE A Q9], how often has your agency communicated with [PCWA Name] about serving FUP-FSS youth, specifically (either by phone, email, or in-person)? If the frequency of this communication has changed, think back to when you were communicating most regularly.

Select one only

- Daily
- Weekly
- Monthly
- Quarterly
- Other (SPECIFY)

II. PARTNER CoC: COLLABORATION

86. Does [PHA NAME] partner with a Continuum of Care (CoC) to administer the Family Unification Program (FUP)?

- Yes
- No (SKIP to SECTION IV)
- Don't know (SKIP TO SECTION IV)

86a. We understand that a single PHA may partner with multiple CoCs to administer FUP. How many CoCs does your agency currently partner with to administer FUP?

87. What is/are the name(s) of this/these CoC(s)?

- A.
- B.
- C.
- D.
- E.
- F.
- G.

88. [If 86a>1] Among the CoCs you partner with, which do you communicate with the most frequently about FUP-FSS? For this survey, we will refer to your partnership with this CoC. (Enter the CoC's name).

The next few questions ask about your agency's collaboration with [CoC NAME].

89. At any point since [FILL AWARD DATE from MODULE A Q9], has your agency had regular meetings with [CoC NAME] about serving FUP-eligible youth?

- Yes
- No (SKIP TO Q91)

90. Since [FILL AWARD DATE from MODULE A Q9], how often have these meetings been held? If the frequency of these meetings has changed, think back to when you were meeting most regularly.

Select one only

- Weekly
 Monthly
 Quarterly
 Twice a year
 Annually
 Other (SPECIFY)

91. [IF Q89=YES] Apart from any regular meetings, since [FILL AWARD DATE from MODULE A Q9], how often has your agency communicated with [CoC NAME] about serving FUP-eligible youth (either by phone, email, or in-person)? If the frequency of this communication has changed, think back to when you were communicating most regularly.

[IF Q89=NO] Since [FILL AWARD DATE from MODULE A Q9], how often has your agency communicated with [CoC NAME] about serving FUP-eligible youth (either by phone, email, or in-person)? If the frequency of this communication has changed, think back to when you were communicating most regularly.

Select one only

- Daily
 Weekly
 Monthly
 Quarterly
 Other (SPECIFY)

IV. PARTNER COMMUNITY SERVICE PROVIDERS: COLLABORATION

We understand that PHAs may partner with community service providers to administer Family Self-Sufficiency program services. These questions relate to the self-sufficiency services available to FUP-FSS Demonstration participants through community partners.

92. Does your agency currently partner with community service providers to provide self-sufficiency services to FUP-FSS youth?

- Yes
 No SKIP TO Q596
 Don't know SKIP TO Q96

93. How many community service providers does your agency currently partner with to administer the FUP-FSS Demonstration?

94. What is/are the name(s) of this/these provider(s)?

- A.

- B.
- C.
- D.
- E.
- F.
- G.

95. Has [PHA] established any new partnerships with community service providers specifically to provide self-sufficiency services to FUP-FSS youth?

- Yes
- No
- Don't know

96. From your perspective, are the services currently available to serve FUP-FSS youth working as intended to support participating youths' self-sufficiency goals?

- Yes
- No
- Don't know

97. Are additional services needed to serve FUP-FSS youth needs?

- Yes
- No SKIP TO END
- Don't know SKIP TO END

98. [If Q97=YES] Which additional services are needed to meet the needs of FUP-FSS youth?
Select all that apply

a. Financial counseling and management	<input type="radio"/>
b. Job search assistance	<input type="radio"/>
c. Education and vocational training	<input type="radio"/>
d. Homeownership preparation	<input type="radio"/>
e. Job training	<input type="radio"/>
f. Childcare assistance	<input type="radio"/>

g. Transportation assistance	<input type="radio"/>
h. Long-term housing planning	<input type="radio"/>
i. Case management	<input type="radio"/>
j. Other (SPECIFY) <input data-bbox="256 384 938 436" type="text"/>	<input type="radio"/>

END Thank you for your time. We appreciate your responses. They will help HUD better understand the FUP-FSS Demonstration.