Interview Guide for Service Coordinators (Active Control Sites)

*Respondent is the service coordinator. Items in italics are instructions for the interviewer, not to be read aloud. Information to be filled in ahead of the interview is highlighted in yellow.*

## **Introduction**

Thank you very much for taking the time to speak with me. Abt Associates / L&M Policy Research has been contracted by HUD to conduct an evaluation of how to support people living in HUD-assisted housing as they get older. Your input is an important component of this process. We spoke to you [OR PREDECESSOR] in 2018 and 2019 to learn about how you support your residents as they age. This is our final interview for the evaluation and an opportunity for you to provide input on your overall experience as a service coordinator.

Your participation in this interview is voluntary and you are free to skip any questions you do not wish to answer. The questions in the interview have been reviewed by the Office of Management and Budget (OMB) under the Paperwork Reduction Act of 1995. Public reporting burden for this information collection is estimated at up to 90 minutes, including preparation and follow-up. 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 summaries of what we learn through the interviews to HUD but will not use your name or the name of the property in those summaries or in our other reports. The information that we collect will be used for research purposes only.

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 a question or would prefer not to answer, just let me know. Your participation in this interview is purely voluntary and you are free to skip any questions 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**

*These questions will only be asked of service coordinators that started after the 2019 interview.*

1. When did you start as the service coordinator for this property?
2. How many hours do you work at the property?
3. I understand you are [the only service coordinator / one of two service coordinators] at this property. Is that still true?
4. Before you started, do you know how long your position was vacant? Do you know when the last service coordinator left? (*If possible, obtain the month and year when the last service coordinator left.)*
5. Before starting here, did you have any prior work experience as a service coordinator, or related experience? How many years of experience?

## **Effects of COVID-19 (Coronavirus)**

I imagine the past few months have been a very challenging time for you. I’d like to hear about how COVID-19 affected your work with residents.

1. Did you work with residents all remotely, partly remotely, or were you still coming to the office? Did that change over time?
2. Did the focus on what you were working with residents on change? If so, how?
3. What about programming? Did all group programming stop? Did some programs stop and others continue?
4. Has going through the pandemic highlighted anything for you about the strengths and weaknesses of the SC role to support residents?

## **Service Coordination Activities**

Let’s talk about how you work with residents.

1. Last time we spoke, you said your worked with about [X] residents on a regular basis. Has that number gone up, gone down, or stayed the same?
2. Of the people you work with, can you estimate how many meet with you once a week, every few weeks, or less frequently? [*Send the table to the SC in advance for them to complete*.]

|  |  |  |
| --- | --- | --- |
| **How frequently the SC meets with residents** | **Estimated # of residents** | ***OR*: Estimated % of residents** |
| Once a week or more often |  | % |
| Every few weeks or monthly |  | % |
| Every few months  |  | % |
| Less than every 6 months |  | % |
| Have not seen them since they signed up |  | % |
| **TOTAL** |  | **100%** |

1. How focused are you on residents’ health and wellness when you work with residents, as opposed to helping them with their benefits, transportation, or other types of needs? Would you say very focused, somewhat focused, not very focused, or not at all focused?
2. What have you learned about what works best for getting residents to work with you? What gets them motivated to take advantage of your help?
3. What are the main barriers for residents taking advantage of what you have to offer?
4. Last time we spoke you had [*add information about regular on-site healthcare provider*]. Is that still the case? If not, what has changed?
5. Have you changed any of your procedures for how you work with residents returning from a hospital or nursing home stay or how you handle sentinel events such as a fall? [*Review prior interview notes.*]
6. Have you made any changes in how you work with healthcare providers such as hospitals and primary care physicians? If so, how?
	1. Do any of your interactions with healthcare providers go beyond dealing with specific residents? For example, have you worked with any providers to develop procedures or programs for the residents as a whole?
7. Are you satisfied with the level of support you receive from property management?
	1. Can you provide an example of how property management supports your work?
	2. What could property management could better support your work?

## **Programs and Partnerships**

Now let’s talk about programs and partnerships that support residents’ health and wellness.

1. *Send ahead printout of the information we have collected on programs.* Have you made any changes to your programs or partnerships since we last spoke? (Adding new programs or partners? Dropping programs or partners?)
2. Which programs are most popular with residents?

1. Which programs do you feel have the most impact on residents’ health and wellness?
2. Were there programs or services that you would like to offer but can’t? Why can’t you?
3. *Send ahead printout of the information we have collected on partnerships*. Have you developed any new partnerships that are not on this list?
	1. If so, please describe the purpose of the partnership, who the partner organization is, and how you work together.
4. Are there partnerships that you’d like to develop but can’t? What are the barriers?

## **Effects and Benefits of Service Coordination**

I’d like to ask you again about how residents have been affected by service coordination at your property.

1. What do you view as the main benefits of the work that you do for your residents?
2. What are the most important parts of your work for helping residents age in place successfully?
3. What are the biggest challenges that you face in assisting residents?
4. Since we last spoke, have you been in a position where something that you did helped a resident to avoid an unnecessary 911 call or trip to the ER? If so, please explain.
5. Can you think of an example of how you have contributed to a resident’s health and wellness?
6. Since we last spoke, have you been in a position where something you did helped a resident stay in their housing or decrease tenancy issues? (*Provide examples if necessary: something that you did to help a resident pay rent on time, or improve their housekeeping, improve relationships with other residents or property staff.)* If so, please explain.

## **Experience of Being a Service Coordinator**

I just have a few more questions about your overall experience as a service coordinator. These are the same questions I asked last time but we like to ask them again since they are important and your opinions might have changed.

1. What is your favorite part of being a service coordinator?
2. What is your least favorite part of being a service coordinator?
3. Did you ever feel limited in what you could do in your support for residents? Why?
4. Do you feel you have adequate resources to be successful in your role? (*Prompt if needed: time, training, office space, computer equipment, funding to pay for programming, onsite nurse*.) If no, what resources are lacking? What would you do differently if you had those resources?
5. Is there additional training that you feel would be useful in your role as Service Coordinator? Please describe.
6. Is there anything else you’d like to add?

**Thank you very much for your time and for all of your valuable input into the evaluation. Thank you also for all that you do for your residents.**