

# Appendix E: Instrument 5 – Remote services for customers

## Introduction

Thank you for engaging with Project SPARK (Supporting Partnerships to Advance Research and Knowledge) to help your agency adapt to disruptions brought on by the COVID-19 pandemic. The goal of Project SPARK generally is to equip state and local TANF programs with tools and skills to be better users and producers of evidence. We are conducting a series of short surveys designed to: (1) get your feedback about the usefulness of technical assistance you have received through Project SPARK around program operations during COVID-19, and (2) learn about how your agency has adapted to address challenges for both staff and customers during this public health crisis. This is the fifth of seven planned surveys. Each survey begins with the same four background questions, followed by a unique set of themed questions. The average response time for this collection of information is 10 minutes.

Providing information is voluntary, and all individual responses collected will be kept private and confidential to the extent permitted by law. Responses will help us improve the technical assistance we provide to programs—both the type of information we provide and the way we provide it—so please be candid. Should you have any questions about this survey or about Project SPARK generally, please contact Michelle Derr, Project SPARK director, at 202-484-4830 or [mderr@mathematica-mpr.com](mailto:mderr@mathematica-mpr.com) with any questions.

Paperwork Reduction Act Statement: 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 control number for this collection is 0970-0531 and it expires 5/31/2021.

The following four questions ask for background information about yourself.

1. In what state or territory are you located?
2. How would you describe your organization? (select one)
  - a. Government agency (for example, human services, workforce, vocational rehabilitation)
  - b. Educational institution (for example, adult basic education, vocational education, community college)
  - c. Quasi-governmental (for example, workforce investment board)
  - d. Nonprofit provider
  - e. For-profit provider or employer
  - f. Other (please specify)
3. What is your position within your organization? (select one)
  - a. Program manager
  - b. Supervisor/lead worker
  - c. Program analyst/data specialist

- d. Direct services staff
- e. Other (please specify)

4. How would you describe the community in which your organization operates? (check all that apply)

- a. Urban
- b. Suburban
- c. Rural

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The remaining questions are about providing services remotely for customers.

5. How is your organization providing the following services to customers right now?

	In person	Remote	In person and remote	Not provided
Orientation	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Assessment	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Employment planning	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Case management	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Skills workshops (such as job readiness or job search)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Support groups	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Individualized job search/job placement	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Job development	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Adult basic education	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Postsecondary education (such as vocational training or college courses)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Supportive services	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Other (please specify)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

6. What successes have you seen with serving customers remotely? (check all that apply)

- a. Increase in customer attendance and engagement
- b. Increase in connection between staff and customers
- c. Improvements in customers accessing the services they need
- d. None of these
- e. Other (please specify)

7. What challenges have you seen with serving customers remotely (check all that apply)
  - a. Access to technology for staff
  - b. Staff knowing how to use the technology
  - c. Access to technology for customers
  - d. Customers knowing how to use technology
  - e. Technology fatigue (feeling worn out from using virtual technology in all aspects of your work)
  - f. Inexperience with facilitating services remotely
  - g. Lack of helpful virtual content
  - h. Creating a meaningful connection between staff and customers
  - i. None of these
  - j. Other (please specify)
8. What services would you like to continue to offer remotely or online after the COVID-19 crisis has passed? [OPEN-ENDED RESPONSE]
9. What services would you like to stop offering remotely or online once the COVID-19 crisis has passed? [OPEN-ENDED RESPONSE]
10. How likely do you think it is your organization offers more online content and remote exchanges after the COVID-19 crisis?
  - a. Very likely
  - b. Somewhat likely
  - c. Somewhat unlikely
  - d. Very unlikely
  - e. Don't know