

Appendix B. Online Survey Instruments for Non-MTW PHAs

B.1. Baseline Survey for Non-MTW PHAs

Respondent is the PHA Executive Director and one or more designated staff.

Introduction

Thank you very much for taking the time to complete this brief survey. HUD has hired Abt Associates to study Cohort 1 of the MTW Expansion. We are sending the survey to all PHAs that applied for MTW in Cohort 1 but were assigned to the Control group (not receiving MTW designation).

This survey has been reviewed by the Office of Management and Budget (OMB) under the Paperwork Reduction Act of 1995. The OMB control number is XXXX-XXXX, expiring XX-XX-XXXX. We expect the survey to take less than 30 minutes to complete.

The study team will use the information you provide for research purposes only. Only members of the study team will see your individual responses. Feel free to share the survey with other staff as needed to answer the questions. You may also skip questions that you cannot or do not wish to answer.

If you have questions or concerns, please contact the Abt Project Director, Larry Buron, at Larry_Buron@abtassoc.com or (301) 634-1735.

Thank you for completing the survey!

Questions

1. Your agency applied to Cohort 1 of the MTW expansion in fall 2018 or spring 2019. Please briefly describe your objectives in applying for MTW.

2. Would your agency be interested in applying for MTW in the future?

- Yes (*Skip to Q4*)
- No

3. Please briefly describe why your agency is no longer interested in applying for MTW. (*Then skip to Q5.*)

4. Please briefly describe the policy or program changes you would like to implement if you became an MTW agency.

5. Since the time you applied for MTW, have you implemented any new activities (including program and policy changes) with the goal of increasing PHA or program cost efficiency, increasing resident self-sufficiency, or increasing housing choice for residents? (These are activities you would have implemented under the regular program rules or with waivers from HUD.)

- Yes
- No (*Skip to Q9*)

Appendix B. Online Survey Instruments for Non-MTW PHAs

6. Please briefly describe each activity you have implemented to increase PHA or program **cost efficiency**:
- Implemented activity 1: _____
 - Implemented activity 2: _____
 - Implemented activity 3: _____
 - N/A
7. Please briefly describe each activity you have implemented to increase resident **self-sufficiency**:
- Implemented activity 1: _____
 - Implemented activity 2: _____
 - Implemented activity 3: _____
 - N/A
8. Please briefly describe each activity you have implemented to increase **housing choices** for residents:
- Implemented activity 1: _____
 - Implemented activity 2: _____
 - Implemented activity 3: _____
 - N/A
9. In the coming year, do you plan to implement any new activities (including program and policy changes) that have the goal of increasing PHA or program cost efficiency, increasing resident self-sufficiency, or increasing housing choice for residents? (These are activities you would implement under the regular program rules or with waivers from HUD.)
- Yes
 - No (*Skip to Q13*)
10. Please briefly describe each activity you plan to implement to increase PHA or program **cost efficiency**:
- Planned activity 1: _____
 - Planned activity 2: _____
 - Planned activity 3: _____
 - N/A
11. Please briefly describe each activity you plan to implement to increase resident **self-sufficiency**:
- Planned activity 1: _____
 - Planned activity 2: _____
 - Planned activity 3: _____
 - N/A
12. Please briefly describe each activity you plan to implement to increase **housing choices** for residents.
- Planned activity 1: _____
 - Planned activity 2: _____
 - Planned activity 3: _____
 - N/A

Appendix B. Online Survey Instruments for Non-MTW PHAs

13. Please use the space below to enter any thoughts you'd like to share with the study team regarding the MTW demonstration or your agency's efforts to increase cost efficiency, self-sufficiency, or housing choice.

Thank you very much for completing this survey. A member of the study team will follow up with you in the next two weeks.

B.2. Semi-Annual Online Survey for Non-MTW PHAs

Respondent is the PHA Executive Director and one or more designated staff.

Introduction

Thank you very much for taking the time to complete this brief survey for the MTW Cohort 1 Evaluation. We are sending the survey to all PHAs that applied to Cohort 1 but were assigned to the Control group.

This survey has been reviewed by the Office of Management and Budget (OMB) under the Paperwork Reduction Act of 1995. The OMB control number is XXXX-XXXX, expiring XX-XX-XXXX. We expect the survey to take less than 30 minutes to complete.

The study team will use the information you provide for research purposes only. Only members of the study team will see your individual responses. Feel free to share the survey with other staff as needed to answer the questions. You may also skip questions that you cannot answer.

If you have questions or concerns, please contact the Abt Project Director, Larry Buron, at Larry_Buron@abtassoc.com or (301) 634-1735.

Thank you for completing the survey!

Questions

1. In [YEAR OF COMPLETING THE SURVEY], you identified the following activities that your agency had implemented with the goal of increasing PHA or program cost efficiency, increasing resident self-sufficiency, and/or increasing housing choice for residents. (These are activities you would have implemented under the regular program rules or with waivers from HUD.)
 - Implemented activity 1: _____
 - Implemented activity 2: _____
 - Implemented activity 3: _____
 - Implemented activity 4: _____

2. Are these activities still active (or are the policies still in place) or have they been discontinued?
 - Implemented activity 1: [check "active/underway," "discontinued," or "other (explain)"]
 - Implemented activity 2: [check "active/underway," "discontinued," or "other (explain)"]
 - Implemented activity 3: [check "active/underway," "discontinued," or "other (explain)"]
 - Implemented activity 4: [check "active/underway," "discontinued," or "other (explain)"]

Appendix B. Online Survey Instruments for Non-MTW PHAs

3. Have you implemented any new activities (including program and policy changes) with the goal of increasing PHA or program cost efficiency, increasing resident self-sufficiency, or increasing housing choice for residents? (These are activities you would have implemented under the regular program rules or with waivers from HUD.)
 - Yes
 - No (*Skip to Q7*)

4. Please briefly describe each new activity you have implemented to increase PHA or program **cost efficiency**:
 - New implemented activity 1: _____
 - New implemented activity 2: _____
 - New implemented activity 3: _____
 - N/A

5. Please briefly describe new each activity you have implemented to increase resident **self-sufficiency**:
 - New implemented activity 1: _____
 - New implemented activity 2: _____
 - New implemented activity 3: _____
 - N/A

6. Please briefly describe each activity you have implemented to increase **housing choices** for residents:
 - New implemented activity 1: _____
 - New implemented activity 2: _____
 - New implemented activity 3: _____
 - N/A

7. In the coming year, do you plan to implement any new activities (including program and policy changes) with the goal of increasing PHA or program cost efficiency, increasing resident self-sufficiency, or increasing housing choice for residents? (These are activities you would implement under the regular program rules or with waivers from HUD.)
 - Yes
 - No (*Skip to Q11*)

8. Please briefly describe each activity you plan to implement to increase PHA or program **cost efficiency**:
 - Planned activity 1: _____
 - Planned activity 2: _____
 - Planned activity 3: _____
 - N/A

9. Please briefly describe each activity you plan to implement to increase resident **self-sufficiency**:
 - Planned activity 1: _____
 - Planned activity 2: _____
 - Planned activity 3: _____
 - N/A

10. Please briefly describe each activity you plan to increase **housing choices** for residents:

Appendix B. Online Survey Instruments for Non-MTW PHAs

- Planned activity 1: _____
- Planned activity 2: _____
- Planned activity 3: _____
- N/A

11. Please use the space below to enter any thoughts you'd like to share with the study team regarding the MTW demonstration or your agency's efforts to increase cost efficiency, self-sufficiency, or housing choice.

Thank you very much for completing this survey. A member of the study team will follow up with you in the next two weeks.